**Quotation Form**

**Name of Bidder:**

**Date of Bid:**

**Request for Quotation No:**

**Currency of Bid price:**

**Delivery time** *(from receipt of order till dispatch):*

**Expiration of Validity of Quotation** *(The quotation shall be valid for a period of at least 90 days* *after the Closing date.)*

**Price Schedule:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Item** | **Quantity** | **Unit Price (Insert Currency)** | **Total CPT, Chisinau (Currency)** | **Delivery schedule** |
| 1 | Examination couch | 134 |  |  | (days) |
| 2 | 2 level foot step | 145 |  |  | (days) |
| 3 | Bed screen on castors | 100 |  |  | (days) |
| 4 | Hot air sterilizer 70 l | 60 |  |  | (days) |
| 5 | CUSCO speculum S | 710 |  |  | (days) |
| 6 | CUSCO speculum M | 710 |  |  | (days) |
| 7 | CUSCO speculum L | 710 |  |  | (days) |
| 8 | Table Mayo type | 60 |  |  | (days) |
| 9 | Table 2 trays | 60 |  |  | (days) |
| 10 | Medical cabinet glass doors | 60 |  |  | (days) |
| 11 | Plasma thawing device | 15 |  |  | (days) |
| 12 | Sphygmomanometer trolley type | 60 |  |  | (days) |
| 13 | Stretcher, patient, with side rails | 60 |  |  | (days) |
| 14 | Revolving Stool | 60 |  |  | (days) |
| 15 | Weighting scale for adult | 60 |  |  | (days) |
| 16 | Patient bed 2 section | 45 |  |  | (days) |
| 17 | IV stand | 60 |  |  | (days) |

**In your offer, please include the following (mandatory documents):**

1. Detailed technical description of the offered goods, or product catalogue/leaflet, with detailed technical specifications as detailed in RFQ. Photos of the device product and packaging (preferably in a format where the dimensions and features can be visually verified)
2. Quality standard of the products (Quality Certificates (ISO, EC etc.)):
3. Company registration documents
4. Written Self-Declaration of not being included in the UN Security Council 1267/1989 list, UN Procurement Division List or other UN Ineligibility List;
5. Fast Track Procurement Questionnaire for Medical Devices

*Vendor’s Comments:*

**I hereby certify that this company, which I am duly authorized to sign for, accepts the terms and conditions of UNFPA (**<http://www.unfpa.org/resources/unfpa-general-conditions-contract> **) and we will abide by this quotation until it expires.**

**Name and title Date and Place**