# 3. Bidders Identification Form

Bid No. UNFPA/IDN/19/01

1. **Organization**

|  |  |
| --- | --- |
| Company/Institution Name |  |
| Address, City, Country |  |
| Telephone/FAX |  |
| Website |  |
| Date of establishment |  |
| **Legal Representative**: Name/Surname/Position |  |
| **Legal structure**: natural person/Co.Ltd, NGO/institution/other (please specify) |  |
| **Organizational Type**: Manufacturer, Wholesaler, Trader, Service provider, etc. |  |
| Areas of expertise of the organization |  |
| Current Licenses, if any, and permits (with dates, numbers and expiration dates) |  |
| Years supplying to UN organizations |  |
| Years supplying to UNFPA |  |
| Production Capacity |  |
| Subsidiaries in the region (please indicate names of subsidiaries and addresses, if relevant to the bid) |  |
| Commercial Representatives in the country: Name/Address/Phone (for international companies only) |  |

1. **Quality Assurance Certification**

|  |  |
| --- | --- |
| International Quality Management System (QMS) |  |
| List of other ISO certificates or equivalent certificates |  |
| Presence and characteristics of in-house quality control laboratory (if relevant to bid) |  |

1. **Expertise of Staff**

|  |  |
| --- | --- |
| Total number of staff |  |
| Number of staff involved in similar supply contracts |  |

1. **Client Reference List**

Please provide references of main client details.

|  |  |  |  |
| --- | --- | --- | --- |
| Name of company | Contact person | Telephone | E-mail |
| 1. |  |  |  |
| 2. |  |  |  |
| 3. |  |  |  |

1. **Contact details of persons that UNFPA may contact for requests for clarification during bid evaluation**

|  |  |
| --- | --- |
| Name/Surname |  |
| Telephone Number (direct) |  |
| Email address (direct) |  |

P.S.: This person must be available during the next two weeks following receipt of bid