

Request for Quotation

Conflict Mitigation Assistance for Civilians (COMAC)

Procurement and Delivery of Tablets for COMAC Project

RFQ Number	RFQ-COMAC-KBL-070
Issue Date	November 17, 2019
Close Date	November 21, 2019, 4:00 PM
Questions due date/time	November 20, 2019 – 3:00 PM Please email your questions to comac-procurementkbl@blumont.org

BLUMONT/COMAC is looking for registered providers of Tablets as more specifically outlined in this RFQ to enter into Purchase order to supply to COMAC project in **Kabul Office**. The project will issue a Purchase Order to the vendor with the maximum ceiling amount based on which the project will be placing the order.

This RFQ in no way obligates COMAC/Blumont to award a contract nor does it commits COMAC/Blumont to pay any costs incurred in the preparation and submission of a proposal.

COMAC/Blumont bears no responsibility for data errors resulting from transmission or conversion processes.

The selected vendor is required to deliver as and when ordered by COMAC/Blumont.

Selected vendor(s) will be asked for their business license and other key information to begin the USAID vetting process during final negotiations. Please see attached USAID Vetting Information Form attached as "Appendix 2".

TERMS AND CONDITIONS

- (a) INELIGIBLE COUNTRIES (MAY 1986): Unless otherwise approved by BLUMONT, funds will only be expended for assistance to countries eligible for assistance under the Foreign Assistance Act of 1961, as amended, or under acts appropriating funds for foreign assistance: Iran, Syria, North Korea and Cuba.
- (b) Authorized Geographic Code of procurement for all goods or services is 935 (USAID, Special Free World)
- (c) It is COMAC/BLUMONT's Policy that no gifts of any kind and of any value be exchanged between vendors/contractors and COMAC/BLUMONT personnel. Discovery of the same will be grounds for disqualification of the vendor/contractor from participation in any COMAC/BLUMONT's procurements and may result in disciplinary actions against COMAC/BLUMONT personnel involved in such discovered transactions.
- (d) Detailed delivery or performance schedules: Kabul City, Afghanistan
- (e) Validity of Quotation: **90 days (starting from the day of submitting quotation)**

I. ITEMS SPECIFICATIONS – See Annex 1 for details specifications.

II. Eligibility Requirements

To qualify for this RFQ, a vendor must (**note: incomplete bids will not be considered for evaluation**):

- a) Hold a valid business license / registration with municipality (be a legal entity)
- b) Confirm that the requested commodities are available in the vendor's store preferably in **Kabul** city (i.e., regularly in-stock) and/or the vendor can make the requested commodities available upon request.
- c) Sub-contracting under this contract will not be permitted.
- d) Certify that proposed prices shall be fixed for the duration of the contract
- e) Complete the table in Annex 1 of this RFQ. Completion of Annex 1 demonstrates the bidder's acceptance of all Annex 1 Terms and Conditions.
- f) Certify the ability to deliver requested commodities within **2 days** of the issuance of delivery order

Bid Security and Bank Statement: (if Applicable)

- g) Demonstrate sound financial status to carry out the task/service. Bidder shall provide a bank statement with a closing balance of USD (. **(NOT APPLICABLE)**)
- h) The Bidder shall submit bid security valued (in the form of bank guarantee only) **(NOT APPLICABLE)**

Vendors who do not meet the above minimum eligibility requirements, **WILL NOT BE CONSIDERED** for further evaluation.

III. Evaluation Criteria

Final selection of eligible vendors will be based on Lowest Price/Technically Acceptable (LPTA). Technical acceptability will be determined based on the following criteria:

COMAC may schedule site visit for the recommended / determined vendor to inspect the vendor's premises and set up (photos will be taken by COMAC for documentation purpose). After satisfactory result of site visit, the award will be made to the recommended bidder. **(NOT APPLICABLE)**.

IV. Submission Requirements

The vendors can choose from available option to submit quotations:

I. **Electronic Submission:**

Please email your offers (**in one PDF file**) to comac-procurementapply@blumont.org by the designated deadline.

Please indicate **RFQ-COMAC-KBL-070 Provision of Tablets for COMAC Project** the subject line of the email.

II. **Submission in Hardcopy (Not allowed)**

- All Quotations must be **signed and/or stamped** by an authorized representative.
- Quotations submitted in hard copy must have complete address, telephone number and e-mail address (if available) of the company. Vendors that do not provide this info may be disqualified.
- Quotations should be submitted be in **AFA**, all payments will be made to vendor in local currency (AFN)
- In case of price discrepancy between unit price and SUBTOTAL/GRAND TOTAL, the unit price shall govern.
- Please write down the RFQ number and its description i.e. () on the envelope, and send it to the below mentioned address: Not applicable

Address:

COMAC Project, Located in Baron Camp Compound

Khwaja Rawash, Hawa Shanasi Road, Kabul

Mobile: 0728 944 778

V. Tax:

Withholding Tax on Subcontractor:

Government withholding Tax: Pursuant to Article 72 in the Afghanistan Tax law effective March 21, 2009, BLUMONT/COMAC is required to withhold "contractor" taxes from the gross amount payable to all Afghan for-profit subcontractor/vendors with aggregate amount of AFN 500,000.00 or greater and transfer this to the Ministry of Finance. In accordance with this requirement, BLUMONT/COMAC shall withhold 2% tax from all gross invoices from subcontractors/vendors under this Agreement with active and relevant business license issued by Ministry of Commerce. For subcontractors /vendors without active or irrelevant business licenses, BLUMONT/COMAC shall withhold seven percent 7% "contractor" tax per current Afghanistan Tax law.

VI. Disclaimers and Protection Clauses

- may cancel solicitation and not award
- may reject any or all responses received
- issuance of solicitation does not constitute award commitment by Blumont
- reserves the right to disqualify any offer based on offeror failure to follow solicitation instructions
- will not compensate offerors for responses to solicitation
- reserves the right to issue award based on initial evaluation of offers without further discussion
- may choose to award only part of the activities in the solicitation, or issue multiple awards based on the solicitation activities
- reserves the right to waive minor proposal deficiencies that can be corrected prior to award determination to promote competition
- will be contacting offerors to confirm contact person, address and that bid was submitted from solicitation

VII. Certification of Independent Price Determination

- (a) The offeror certifies that--
 - (1) The prices in this offer have been arrived at independently, without, for the purpose of restricting competition, any consultation, communication, or agreement with any other offeror, including but not limited to subsidiaries or other entities in which offeror has any ownership or other interests, or any competitor relating to (i) those prices, (ii) the intention to submit an offer, or (iii) the methods or factors used to calculate the prices offered;
 - (2) The prices in this offer have not been and will not be knowingly disclosed by the offeror, directly or indirectly, to any other offeror, including but not limited to subsidiaries or other entities in which offeror has any ownership or other interests, or any competitor before bid opening (in the case of a sealed bid solicitation) or contract award (in the case of a negotiated or competitive solicitation) unless otherwise required by law; and
 - (3) No attempt has been made or will be made by the offeror to induce any other concern or individual to submit or not to submit an offer for the purpose of restricting competition or influencing the competitive environment.
- (b) Each signature on the offer is considered to be a certification by the signatory that the signatory--
 - (1) Is the person in the offeror's organization responsible for determining the prices being offered in this bid or proposal, and that the signatory has not participated and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above; or
 - (2) (i) Has been authorized, in writing, to act as agent for the principals of the offeror in certifying that those principals have not participated, and will not participate in any action contrary to subparagraphs (a)(1) through (a)(3) above;
(ii) As an authorized agent, does certify that the principals of the offeror have not participated, and will not participate, in any action contrary to subparagraphs (a) (1) through
- (a)(3) Above; and
 - (iii) As an agent, has not personally participated, and will not participate, in any action contrary to subparagraphs (a)(1) through (a)(3) above.
- (c) Offeror understands and agrees that --
 - (1) Violation of this certification will result in immediate disqualification from this solicitation without recourse and may result in disqualification from future solicitations; and
 - (2) Discovery of any violation after award to the offeror will result in the termination of the award for default.

Annex 1 – Vendor Offer and Business Detail Information:

1. Vendor Information:

Vendor name per Business License	
Vendor Address:	
Vendor shop address	
Vendor contact person and Phone Numbers	
Vendor email address (if available)	

Note: Incomplete Bids Will Not Be Considered for Evaluation

2. Items Specifications and Price:

#	Item Description	Unit	Quantity	Unit Price AFA	Total Price AFA
1	2	3	4	5	0
1	Tablet A (2016) 10.1", Model SM-T585(with SIM) Or Equivalent detailed specification is attached	Each	21		
Grand Total					

Note: The cost should be inclusive of all charges, including delivery to COMAC Program in the specific location.
The order will be placed for different quantities (be reduced or increased) depending on need basis

3. Reinstatement and Confirming the Minimum Terms and Conditions

No	Description / Question	Response
1	Valid Business License provided?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2	Are you capable enough to provide all required items included in the package?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Logistical Arrangements and Delivery: Are you capable enough to arrange logistical resources and deliver the items to the destinations stipulated in the RFQ?	<input type="checkbox"/> Yes <input type="checkbox"/> No
3	Did you provide address for your shop?	<input type="checkbox"/> Yes <input type="checkbox"/> No
4	Brand Name/Model Did you specify the brand and model for each item? You can include separate sheet of paper with specs	<input type="checkbox"/> Yes <input type="checkbox"/> No
6	Do you agree to fix the price for one year?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7	Payment Term: Payment will be issued within 30 working days after the delivery/acceptance of goods, and receipt of signed invoice. Do you accept these terms and conditions?	<input type="checkbox"/> Yes <input type="checkbox"/> No

Note: The recommended vendor MUST obtain **DUNS number** and do **SAM registration** within 10 days after notification of Award, if not registered in SAM. Contract will not be executed unless these requirements are complied.

*It's highly recommended that the potential Vendors obtain DUNS number and do SAM registration.

Business Name: _____

Authorized Representative Name (print)

Authorized Representative Title (print)

Authorized Representative Signature

Date

Note: Incomplete Bids Will Not Be Considered for Evaluation

Appendices:

- Appendix 1: Offer's Letter (to be signed and returned with Business/Price Proposal)
- Appendix 2: USAID Vetting Information Form

APPENDIX 1

OFFEROR'S LETTER

Dear Sirs/Madams:

We, the undersigned, offer to undertake **PO/BPA (RFQ-COMAC-KBL-070)** in accordance with your Request for Quotation dated (Insert date) and our Quotation in the sum of **AFN/USD** (in words) _____ (in figures) _____.

Our Proposal/ Quotation shall be valid for **ninety (90) calendar days** from the submission date.

Our proposed prices will be valid for up to one year upon contract execution.

Our proposed prices include local taxes.

Our proposed equipment has warranties up to (*Insert number of days/months*) (if applicable)

Our quotation is predicated upon all the terms and conditions of the RFQ.

Our Company is legally licensed to conduct business in Afghanistan and shall provide services within _____ calendar days after receipt of confirmation of contract.

By submitting this proposal, we grant the COMAC/Blumont Contracting Officer and authorized representative(s) the right to examine, at any time before award, those records, which include documents, accounting procedures and practices, and other data, regardless of type and form or whether such supporting information is specifically referenced or included in the proposal as the basis for pricing, that will permit an adequate evaluation of the proposed price and validity of the offer.

We understand you are not bound to accept any Quotation/ Proposal you receive.

Sincerely yours,

Name of Firm/Vendor: _____

Name and Title of Authorized Signatory: _____

Phone Number: _____

Email Address: _____

Address: _____

Authorized Signature and Date: _____

Note: Filling Offeror's Letter is mandatory. Failing to fill this form may lead to the rejection of quotation

APPENDIX 2
Partner Vetting Information
(If Applicable)

Part I: Information About Proposed Activities (all parts mandatory)			
1. Name of the proposed awardee of USAID contract or assistance (Firms must include a copy of applicable, currently valid licenses to do business in Afghanistan)			
2. Type of proposed award or other assistance (check one): <input type="checkbox"/> Contract or Subcontract <input type="checkbox"/> Grant or Subgrant <input type="checkbox"/> Training <input type="checkbox"/> Equipment <input type="checkbox"/> Other			
3. US\$ amount and estimated start/end date of proposed award or assistance: Dollar amount: \$ 00.00 Cumulative Value Start: End:			
4. Purpose of proposed award or assistance:			
5. Organization proposed to receive award or other assistance:			
a. Name:			
b. Address (include village/town/city, state/county/province, and country):			
c. Telephone: +93(0)		d. Fax:	e. Email:
6. Information on Key Individuals associated with the organization named in 5 above who are <u>not U.S. citizens or permanent legal residents</u> or, if no organization is listed, information on each individual to receive cash or in-kind assistance (including technical assistance). Use continuation sheets as necessary. ** = mandatory information.			
A. Name (As in passport or other government-issued photo ID):**		Government-issued photo ID number, type of ID and country of issuance:**	
Place of birth** House#** Street# ** City** Village#** District#** Province** Afghanistan		Date of birth:** (dd,mm,yyyy)	Title in organization (Example: President/Vice President/CFO):
Other names used (may include nicknames, pseudonyms not listed under "Name").:** Nil		Gender:**	
Current employer and job title:		Occupation:	
Address of residence** House#** Street# ** City** Village#** District#** Province** Afghanistan		Citizenship(s):** (Afghans: Tribal Affiliations, Father's Name and Grandfather's Name) Afghan Father Name: Grand Father Name:	
Email: Phone:		Is the individual a U.S. citizen or legal permanent resident?** Yes <input type="checkbox"/> No <input type="checkbox"/>	
Part II: Contractor/Grantee/Recipient Certification:			
Potential Awardee certifies in submitting this form that it has taken reasonable steps (in accordance with sound business practices) to verify the information contained in this form. Contractor/Grantee/Recipient understands that the U.S. Government may rely on the accuracy of such information in processing this vetting request.			
Name:		Signature:	
Title/Organization:		Date:	
Part III: Submission details (to be completed by USG vetting official)			
Vetting request number			
Staff member who initiated request			
Project name			
Date submitted for screening			

USAID Information Form Continuation Sheet for Part I, Section 6: List of Individuals

(Use additional continuation sheets as necessary):

B. Name (As in passport or other government-issued photo ID):**		Government-issued photo ID number, type of ID and country of issuance:**
Place of birth** House#** Street# ** City** Village#** District#** Province** Afghanistan	Date of birth:** (dd,mm,yyyy)	Title in organization (Example: President/Vice President/CFO):
Other names used (may include nicknames, pseudonyms not listed under "Name").:** 		Gender:**
Current employer and job title:		Occupation:
Address of residence** House#** Street# ** City** Village#** District#** Province** Afghanistan		Citizenship(s):** (Afghans: Tribal Affiliations, Father's Name and Grandfather's Name) Afghan Father Name: Grand Father Name:
Email: Phone: +93(0)		Is the individual a U.S. citizen or legal permanent resident?** Yes <input type="checkbox"/> No <input type="checkbox"/>
C. Name (As in passport or other government-issued photo ID):**		Government-issued photo ID number, type of ID and country of issuance:**
Place of birth** House#** Street# ** City** Village#** District#** Province** Afghanistan	Date of birth:** (dd,mm,yyyy)	Title in organization (Example: President/Vice President/CFO):
Other names used (may include nicknames, pseudonyms not listed under "Name").:** Nil		Gender:**
Current employer and job title:		Occupation:
Address of residence** House#** Street# ** City** Village#** District#** Province** Afghanistan		Citizenship(s):** (Afghans: Tribal Affiliations, Father's Name and Grandfather's Name) Afghan Father Name: Grand Father Name:
Email: Phone: +93(0)		Is the individual a U.S. citizen or legal permanent resident?** Yes <input type="checkbox"/> No <input type="checkbox"/>
D. Name (As in passport or other government-issued photo ID):**		Government-issued photo ID number, type of ID and country of issuance:**
Place of birth** House#** Street# ** City** Village#** District#** Province** Afghanistan	Date of birth:** (dd,mm,yyyy)	Title in organization (Example: President/Vice President/CFO):
Other names used (may include nicknames, pseudonyms not listed under "Name").:** Nil		Gender:**
Current employer and job title:		Occupation:

Address of residence** House#** Street# ** City** Village#** District#** Province** Afghanistan		Citizenship(s):** (Afghans: Tribal Affiliations, Father's Name and Grandfather's Name) Afghan Father Name: Grand Father Name:
Email: Phone: +93(0)		Is the individual a U.S. citizen or legal permanent resident?** Yes <input type="checkbox"/> No <input type="checkbox"/>
E. Name (As in passport or other government-issued photo ID):**		Government-issued photo ID number, type of ID and country of issuance:**
Place of birth** House#** Street# ** City** Village#** District#** Province** Afghanistan	Date of birth:** (dd,mm,yyyy)	Title in organization (Example: President/Vice President/CFO):
Other names used (may include nicknames, pseudonyms not listed under "Name").**		Gender:**
Current employer and job title:		Occupation:
Address of residence** House#** Street# ** City** Village#** District#** Province** Afghanistan		Citizenship(s):** (Afghans: Tribal Affiliations, Father's Name and Grandfather's Name) Afghan Father Name: Grand Father Name:
Email: Phone: +93(0)		Is the individual a U.S. citizen or legal permanent resident?** Yes <input type="checkbox"/> No <input type="checkbox"/>
F. Name (As in passport or other government-issued photo ID):** (add Technical Manager Information)		Government-issued photo ID number, type of ID and country of issuance:**
Place of birth** House#** Street# ** City** Village#** District#** Province** Afghanistan	Date of birth:** (dd,mm,yyyy)	Title in organization (Example: President/Vice President/CFO):
Other names used (may include nicknames, pseudonyms not listed under "Name").**		Gender:**
Current employer and job title:		Occupation:
Address of residence** House#** Street# ** City** Village#** District#** Province** Afghanistan		Citizenship(s):** (Afghans: Tribal Affiliations, Father's Name and Grandfather's Name) Afghan Father Name: Grand Father Name:
Email: Phone: +93(0)		Is the individual a U.S. citizen or legal permanent resident?** Yes <input type="checkbox"/> No <input type="checkbox"/>

INFORMATION FORM INSTRUCTIONS

Please provide information for key individuals of all organizations receiving funds from USAID, including grantees, sub-grantees, contractors, and vendors, who work in Afghanistan.

Part I

Question 1 – Self-explanatory

Question 2- Indicate the proposed type of mechanism to be utilized by placing a check mark on the line in front of the appropriate term

Question 3 – Enter the amount of award or assistance (or sub-award) in U.S. dollars and indicate the start and end date of the award (or sub-award) using a mm/dd/yyyy format

Question 4 – Indicate the purpose of the award or assistance. Use additional sheets and attach to page one of the vetting form if necessary

Question 5 a-i – Self-explanatory.

Attach a copy of the relevant, currently valid Afghan business license.

Question 6 - A “Key Individual” means (i) Any person who exercises effective control of the organization; (ii) a principal officer of the organization's governing body (e.g., chairman, vice chairman, treasurer or secretary of the board of directors or board of trustees); (iii) the principal officer and deputy principal officer of the organization (e.g., executive director, deputy director president or vice president); (iv) the program manager or chief of party for the USAID-financed program; (v) any person receiving significant commissions (defined as a sum, either fixed or a set percentage of the value involved, paid to an agent or person acting in a similar role in the activity involved) or similar earnings from the Award in an amount exceeding \$25,000; and (vi) any other person with significant responsibilities for administration of USAID-financed activities or resources (while a comprehensive list is not possible, this would include any person acting in a role substantially similar to those outlined in (i)-(v). For Private Security Services, this would include leadership roles down to the level of field commanders). Complete for each of these six categories or indicate “N/A” if a category does not apply. Use additional pages as needed. Only Key Individuals who are not U.S. citizens or permanent legal residents need to be submitted. Attach copies of photo ID for each non-U.S. “Key Individual”. In addition, for all non-U.S. Key Individuals in possession of passports, passport copies must be attached.

Note: If a “Key Individual” is a U.S. citizen or permanent legal resident, proof of citizenship or residency must be attached.

Part II

The representative of the prime Awardee (chief of party, program director or their designee) must fill out the form, read the certification and print their name where indicated, sign where indicated, print their title and the name of their organization where indicated, and print the date where indicated.

Part III

This section will be completed by the USG vetting official.