**WHO ITB 2020/EURO/MDA/0028**

**Annex 2: Vendor Information Form**

| **Company Information** to be provided by the Vendor submitting the offer |
| --- |
| **UNGM Vendor ID Number:*If available*** *– Refer to WHO website for registration process\** |  |
| **Legal Company Name:***(Not trade name or DBA name)* |  |
| **Company Contact:** |  |
| **Address:** |  |
| **City:** |  | State: |  |
| **Country:** |  | **Zip:** |  |
| **Telephone Number:** |  | Fax Number: |  |
| **Email Address:** |  | **Company Website:** |  |
| **Corporate information:** |
| Company **mission statement** |  |
| **Service commitment** to customers and measurements used*(if available)* |  |
| **Organization** structure (include description of those parts of your organization that would be involved in the performance of the work) |  |
| Relevant **experience** (how could your expertise contribute to WHO’s needs for the purpose of this ITB) – *Please attach reference and contact details* |  |
| **Staffing information** |  |

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\* <http://www.who.int/about/finances-accountability/procurement/en/>

**WHO ITB 2020/EURO/MDA/0028**

**Annex 4: Self Declaration Form**

**Applicable to private and public companies**

<**COMPANY**> (the “Company”) hereby declares to the World Health Organization (WHO) that:

1. it is not bankrupt or being wound up, having its affairs administered by the courts, has not entered into an arrangement with creditors, has not suspended business activities, is not the subject of proceedings concerning the foregoing matters, and is not in any analogous situation arising from a similar procedure provided for in national legislation or regulations;
2. it is solvent and in a position to continue doing business for the period stipulated in the contract after contract signature, if awarded a contract by WHO;
3. it or persons having powers of representation, decision making or control over the Company have not been convicted of an offence concerning their professional conduct by a final judgment;
4. it or persons having powers of representation, decision making or control over the Company have not been the subject of a final judgment or of a final administrative decision for fraud, corruption, involvement in a criminal organization, money laundering, terrorist-related offences, child labour, human trafficking or any other illegal activity;
5. it is in compliance with all its obligations relating to the payment of social security contributions and the payment of taxes in accordance with the national legislation or regulations of the country in which the Company is established;
6. it is not subject to an administrative penalty for misrepresenting any information required as a condition of participation in a procurement procedure or failing to supply such information;
7. it has declared to WHO any circumstances that could give rise to a conflict of interest or potential conflict of interest in relation to the current procurement action;
8. it has not granted and will not grant, has not sought and will not seek, has not attempted and will not attempt to obtain, and has not accepted and will not accept any direct or indirect benefit (finanical or otherwise) arising from a procurement contract or the award thereof;
9. it adheres to the UN Supplier Code of Conduct;
10. it has zero tolerance for sexual exploitation and abuse and has appropriate procedures in place to prevent and respond to sexual exploitation and abuse.

The Company understands that a false statement or failure to disclose any relevant information which may impact upon WHO's decision to award a contract may result in the disqualification of the Company from the bidding exercise and/or the withdrawal of any proposal of a contract with WHO. Furthermore, in case a contract has already been awarded, WHO shall be entitled to rescind the contract with immediate effect, in addition to any other remedies which WHO may have by contract or by law.

|  |  |
| --- | --- |
| **Entity Name:** | ………………………………………………………………………………………………… |
| **Mailing Address:** | ……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………… |
| **Name and Title of duly authorized representative:** | ………………………………………………………………………………………………… |
| **Signature:** |  |
| **Date:** | ………………………………………………………………………………………………… |