**BIDDER RESPONSE DOCUMENT**

**Please provide information on each requirement.**

Additional rows can be inserted for all questions as necessary.

**Section 1 - Bidder’s Experience**

1. Please outline the company’s experience in delivering the required services. This should include demonstrated experience with the delivery in the past and any value-added services.

|  |
| --- |
|  |

**Section 2 - Bidder’s Company Information**

1. General information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Company name: | | | | | | |
| Number of years in Operation in the Country: | | | | | | |
| Registered name of company (if different): | | | | | | |
| Any other trading names of company: | | | | | | |
| Primary Contact Name: | | | Job title : | | | |
| Phone: | | | Fax: | | | |
| Email: | | | Website: | | | |
| Principal Address: | | Registered Address: | | | Payment Address: | |
| Company Registration number |  | | | Date of registration: | |  |
| VAT/Tax registration number: |  | | | Annual Turnover: | |  |
| Names of Company Directors: | | | | | | |
| Name of any Parent company: | | | | | | |
| Location of Registered Office of the Parent Company: | | | | | | |
| Legal relationship with Parent Company: | | | | | | |

1. Please provide the following details for at least 3 client references which Malaria Consortium can contact (preferably INGOs / Humanitarian Organisations with similar requirements).

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of client 1** |  | Length of Contract |  | Monetary value of contract: |  |
| Contact Name |  | Phone Number |  | Email address |  |
| Outline of goods / services supplied: | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of client 2** |  | Length of Contract |  | Monetary value of contract: |  |
| Contact Name |  | Phone Number |  | Email address |  |
| Outline of goods / services supplied: | | | | | |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name of client 3** |  | Length of Contract |  | The monetary value of contract: |  |
| Contact Name |  | Phone Number |  | Email address |  |
| Outline of goods/services supplied: | | | | | |

The client organisations response to this question will also act as your Referees. If any of the information supplied is deemed false following reference checks, your response to this RFP will be disqualified.

1. Please provide details of all relevant insurances held by the company related to the item requested for:

|  |  |  |  |
| --- | --- | --- | --- |
| Insurance Type | Brief description of what the insurance covers | Maximum claim value | Any relevant restrictions on the insurance |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

Please provide a copy of all insurances with your bid.

1. Please outline any major changes (e.g. mergers, acquisitions, partnerships) planned in your organisation over the next two years):

|  |
| --- |
|  |

1. Do you conform to any relevant Health and Safety and/or Green Logistics legislation and best practices for your industry?

Yes No

If yes, please provide details:

|  |
| --- |
|  |

1. Do you operate the following policies within your company? If yes to any of the above please provide a copy with your bid.

|  |  |  |
| --- | --- | --- |
| **Policies** | **Yes / No** | Outline how these policies are embedded and adhered to within your organisation |
| Fraud and Bribery |  |  |
| Equality & Diversity Policy |  |  |
| Environmental Policy |  |  |
| Quality Management Policy |  |  |
| Health & Safety Policy |  |  |

1. Data protection policies, procedures and processes

Please provide proof of compliance with the laws listed in Malaria Consortium’s [privacy notice](https://www.malariaconsortium.org/pages/who_we_are/privacy-notice.htm).

|  |  |  |
| --- | --- | --- |
| **Policy / process** | | **Yes / No** |
| A | Information Governance |  |
| B | Information security management systems |  |
| C | Business continuity/Disaster recovery |  |
| D | Data backup and restore |  |
| E | Data retention and disposal |  |
| F | Data breach incident management |  |
| G | Data sharing and transfer |  |
| H | Information standards |  |
| I | Individual information rights |  |
| J | Third party data processors management |  |

1. Information and data security

Do you have any of the following information systems security measures in place?

|  |  |  |  |
| --- | --- | --- | --- |
| **IS security measure** | | **Yes / No** | **Narrative (if not attached in a separate document)** |
| A | Anti-virus |  |  |
| B | Malware |  |  |
| C | Anti-spyware |  |  |
| D | Intrusion detection |  |  |
| E | Firewalls |  |  |
| F | Vulnerability scans of workstations and servers |  |  |
| G | Independent penetration testing of network and internet facing applications |  |  |
| H | Encryption |  |  |
| I | Physical security measures |  |  |
| J | Role based access controls |  |  |
| K | Systems monitoring |  |  |
| L | How are the above applied and managed. What is the frequency of testing? |  |  |
| M | Do you have wireless networking facilities at your sites, if so, how secured to prevent unauthorised access? |  |  |
| N | How do you backup personal data? |  |  |
| O | What methods do you use to transfer data/records? |  |  |
| P | Do you have a data breach (real or suspected) incident management process in place? |  |  |
| Q | Do you have experience or specific plans for protecting data of the most vulnerable people in conflict or dangerous settings? |  |  |

1. Please outline how you check staff, suppliers and sub-contractors against the following sanctions list:

|  |  |
| --- | --- |
| **List** | **Bidders response** |
| UK Treasury list |  |
| EC list |  |
| OFAC list |  |
| US treasury list |  |

1. What quality standards does your organisation adhere to, e.g. ISO?

|  |
| --- |
|  |

1. Outline how you comply with quality and regulatory requirements

|  |
| --- |
|  |

1. Do you offer guarantee and warranty?

Yes  No

If yes, give details of relevant warranty and what it entails:

**Section 3 - Declaration by the Bidder:**

We, the Bidder, hereby confirm compliance with:

* Malaria Consortium Terms and Conditions of Purchase
* Malaria Consortium’s Child Protection policy
* Malaria Consortium’s Anti-Fraud and Anti-Corruption policy
* Malaria Consortium’s Anti-Bribery Policy
* Malaria Consortium’s Safeguarding Policy

*Note: The terms and conditions and policies can be found at the end of the RFP document.*

|  |
| --- |
| We also confirm that Malaria Consortium may in its consideration of our offer, and subsequently, rely on the information provided in this document.  I (Name) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Title) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  am authorized to represent the above-detailed company and to enter into business commitments on its behalf.  Company……………………………………………………………………...  Date……………………………………………………………………………….. |