



BIDDER RESPONSE DOCUMENT

Accommodation & Conference Facility 2019 – MC/HOTEL/2019/001

Please provide information against 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 supplies services or works. This should include demonstrated experience with the delivery in the past, Resources available to deliver any value added services.

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Section 2 - Bidder’s Company Information

2. 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:			

3. 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		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.

4. Please provide details of your three largest customers preferably NGOs, and indicate how much they contributed to your turnover over the past year:

Client organisation	% contribution to turnover
1.	
2.	
3.	

5. Please provide copies and details of all relevant insurances held by the company. These must include Public Liability to cover any injuries or property damage sustained by guests while on your **hotel's** property and what the maximum value is:

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.

6. 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		

7. Outline how you comply with environmental statutory and regulatory requirements

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Section 3: Bidder Capacity

8. Indicate in the table below which products you are ready to provide. List and describe any other services available.

Products	1-20 PAX	1-50 PAX	1-100 PAX	1-200 PAX
Accommodation per Night – Bed & Breakfast				
Full Day Conference Package				
Half Day Conference Package				
Catering Services				

***Conference Package includes;**

- ✓ Air conditioned Conference Room /Hall with facilities for the number of participants specified in the Purchase Order
- ✓ Lunch with a soft drink
- ✓ Projector, Flip Charts & Markers and Writing materials (Pens & Booklets /Notepads)
- ✓ Sound System
- ✓ Wired & Wireless Internet
- ✓ Two (2) Coffee /Tea break with snacks
- ✓ Two (2) Mineral Water Bottles per PAX per day.

9. List your:

Bed & Breakfast Occupancy	
Indicate Various available sizes of Meeting room Capacity	
Car park Capacity	
Dining/Meal Room Capacity	
Additional Facilities that may be available to our staff	
WI-FI – Indicate speed/Capacity	
Proximity to key facilities and amenities e.g. shopping malls, hospitals, forex bureaus.	

10. Outline in the below table the type of security control measures available for the security and safety of the Malaria Consortium guests, staff and their property.

No:	Security control measure
1.	
2.	
3.	
4.	

What type of security control measures do you have in place, please outline how you would go about providing standard security and safety of the guests and their property.

11. What quality standards does your organisation adhere to e.g. ISO

12. Detail any benefits or additional services your organisation can offer Malaria Consortium

Section 4 - 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

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