

## **TERMS OF REFERENCE**

For the Engagement of Services of a Certifying Body to  
Provide Certification Audit for the Issuance of ISO 9001:2015 Certificate and  
Surveillance Audits for the Quality Management System (QMS) of the  
Investment Coordination Committee (ICC) Secretariat Appraisal and  
Facilitation of ICC Action at the NEDA Central Office (CO)

### **I. PURPOSE**

The purpose of this Terms of Reference (TOR) is to engage the services of a Certifying Body that will conduct assessment and audit of NCO ICC QMS for certification to ISO 9001:2015 Standard, together with the cycle of surveillance audits until the time for re-certification audit.

### **II. BACKGROUND**

In line with the need for government agencies to improve quality in their operations and service delivery, Executive Order No. 605: *Institutionalizing the Structure, Mechanisms and Standards to Implement the Government Quality Management Program (GQMP)*, was issued on February 23, 2007 to all departments and agencies of the executive branch, including all Government-Owned and/or Controlled Corporations (GOCCs) and Government Financial Institutions (GFIs) to enhance public sector efficiency and customer satisfaction.

The Philippine Development Plan (PDP) 2017-2022 strengthens compliance to E.O. No. 605 to enhance and sustain government performance in the delivery of quality services by upgrading the Government Quality Management Systems (QMS) to be more client- and citizen-oriented and driving agencies towards performance excellence to boost citizen trust in government. Thus, GQMP is considered a tool and among the priorities to ensure people-centered, clean and efficient governance.

In 2016, the NEDA has successfully posted in its Transparency Seal, the QMS Documentation which passed the validation conducted by the Government Quality Management Committee (GQMC). The QMS implementation, however, was deferred on March 1, 2017 and the continuation of QMS activities, mainly composed of the establishment of the Review and Improvement Processes, covering the provision of Capacity Building to the Internal Quality Audit (IQA) Team, carrying out of the first IQA of the QMS activities and conduct of Management Review, Pre-Certification Assessment and Third Party Certification Assistance, was started in July 2017.

With the aim to render excellent service and continuously improve performance, NEDA will pursue certification of its QMS for the Investment Coordination Committee (ICC) Secretariat Appraisal and Facilitation of ICC Action, one of its core services, using ISO 9001:2015 Standard.

### **III. OBJECTIVE**

The overall objective of the engagement is to provide independent confirmation that NEDA CO QMS for the ICC Secretariat Appraisal and Facilitation of ICC Action meets ISO

9001:2015 requirements, and if found compliant, issue the corresponding Certification and conduct the required Surveillance Audits.

Meeting the following specific objectives is expected to contribute to the attainment of the primary objective:

1. to conduct initial audits (Stage 1 and 2) of NEDA CO ICC's QMS based on ISO 9001:2015 Standard; and
2. to conduct surveillance audits within a three-year period after NEDA CO ICC's ISO 9001:2015 QMS gains certification.

#### **IV. SCOPE OF WORK**

The Certification and Surveillance Audits shall cover the NEDA CO ICC's QMS, in particular, the project appraisal process conducted by the NEDA Sector Staffs, and the facilitation of the ICC approval process, limited to procedures conducted and within the control of the ICC Secretariat. The said Third Party Certification Audit shall involve the following activities:

1. Conduct ISO 9001:2015 Certification Audits of NEDA CO ICC's QMS, as follows:
  - a. Stage 1 Audit – ISO 9001:2015 QMS adequacy and readiness review; and
  - b. Stage 2 Audit – ISO 9001:2015 QMS implementation audit.
2. Issue ISO 9001:2015 Certificate to NEDA CO ICC's QMS upon satisfactory compliance to the Standard and Certification requirements;
3. Conduct at least one surveillance audit every year for two consecutive years after the issuance of Certificate to maintain NEDA CO ICC's QMS Certification.

#### **V. CLIENT'S RESPONSIBILITY**

On behalf of NEDA, the Quality Management Representative (QMR) or his duly designated representative, shall evaluate the quality of work delivered by the Certifying Body based on this TOR to ensure the quality and relevance of work being conducted, and based on this, shall issue a written project acceptance/approval, retention, or discontinuance.

The following comprise the general expectations from NEDA, as client:

1. Prior to any execution of activities related to this Terms of Reference, the NEDA Quality Management Structure shall convene a meeting between the representatives of the Certifying Body and the NEDA CO Staffs point persons to be assigned to handle this project. A close anchoring and monitoring of all the activities as indicated herein shall be undertaken by the QMR;
2. The QMR and the ISO Core Team Secretariat shall be responsible for providing technical assistance for the project. They shall closely coordinate with the representatives of the Certifying Body in the conduct of the audit and other related certification activities, including monitoring of the progress of the various tasks;

3. The QMR, Internal Audit Service and ISO Core Team Secretariat shall cooperate in the conduct of audit activities, ensuring that the process owners and concerned officials and staff are available on the scheduled dates of audits. For any request for change or cancellation of schedule, however, at least a one (1) week notice shall be given and the said change/ adjustment shall be made based on mutual agreement by both parties; and
4. Provision of meals, work space, desktop computer/laptop, and transportation service to fetch the Auditors from and to the Certifying Body's office and/or as may be needed in the course of the project.

## **VI. CERTIFYING BODY'S RESPONSIBILITY**

The Certifying Body shall provide information that indicates experience, educational/ training qualifications and capacity to undertake the work outlined herein, within the specified timelines. As part of this, the consultant is expected to provide an indication of public QMS-related engagements, as well as QMS certification audit engagements that are currently committed, ongoing or completed. This will be considered in the assessment of the Certifying Body's QMS-related qualification.

The Certifying Body undertakes to perform the Audit with the highest standards of professional and ethical competence and integrity.

The following are the general expectations from the Certifying Body:

1. Commitment to treat with utmost confidentiality, all information and materials gathered and used relating to this engagement or the Client's business or operations;
2. Preparation of the Certification or Surveillance Audit Plan, as the case may be, with schedule of activities for the entire duration of the engagement. The representatives from the Certifying Body shall coordinate with the QMR through the ISO Core Team Secretariat regarding any changes on the dates of audit schedules or any delay in the activities related to ISO certification;
3. Adherence to certification or surveillance audit schedule/appointment and any changes or adjustments of schedules as may be agreed upon. For any request for change or cancellation of schedule, however, at least a one (1) week notice shall be given and the said change/adjustment shall be made based on mutual agreement by both parties;
4. Provision of information on any conflicts of interest and proposed approach to the resolution thereof;
5. The duly authorized representative of the Certifying Body shall submit an audit report after conducting the certification audit and surveillance audits, as the case may be, on mutually agreed schedules; and
6. Conduct of at least two (2) surveillance audits within the period of certification of NEDA CO ICC's QMS to 9001:2015 Standard, but not more than a year for the first and

more than two (2) years after for the second audit, respectively. The Certifying Body shall continue to perform the necessary tasks at no additional cost to NEDA, except the amount provided in this TOR, until the time for application to ISO 2015 QMS recertification.

## **VII. CERTIFYING BODY'S QUALIFICATION REQUIREMENTS**

The Certifying Body shall show proof or sample work to support the following qualification requirements:

### **A. Qualification and Competencies**

1. The Certifying Body must be duly accredited by the Department of Trade and Industry- Philippine Accreditation Bureau (DTI-PAB) with PNS ISO/IEC 17021-1:2015 to provide QMS certification to ISO 9001:2015 for L75: Public Administration. Furthermore, the Certifying Body shall have a locally SEC-registered office accredited to both the DTI-PAB and an international accreditation body;
2. The Certifying Body must have the following:
  - a. Minimum of five (5) years of experience in conducting ISO QMS audits/certification; and
  - b. Minimum of ISO QMS government certification projects conducted.
3. The Certifying Body shall field a team (1 lead auditor and at least 4 auditors) with the following qualifications:

<b>Criteria for Technical Evaluation</b>	<b>Qualifications</b>
<u>Lead Auditor</u>	<ul style="list-style-type: none"><li>• Degree relevant to the job.</li><li>• At least five (5) similar projects (that is, ISO QMS Certification for government institutions); and at least 5 relevant projects (that is, ISO QMS Certification for private companies).</li></ul>
<u>Audit Team Members</u>	<ul style="list-style-type: none"><li>• Degree in relevant to the job.</li><li>• At least three (3) similar projects (that is, ISO QMS Certification for government institutions); and at least 3 relevant projects (that is, ISO QMS Certification for private companies).</li></ul>

### **B. Documentary Requirements/Submissions**

Interested firms are required to submit one (1) original and four (4) copies of the following in three (3) separate sealed envelopes:

1. Eligibility Requirements:
  - a. DTI-PAB certification/accreditation;
  - b. SEC registration;
  - c. Mayor's/Business permit issued by the city or municipality where the principal place of business of the prospective bidder is located, or the equivalent document for Exclusive Economic Zones or Areas. In cases of recently expired Mayor's/Business permits, it shall be accepted together with the official receipt as proof that the bidder has applied for renewal within the period prescribed by the concerned local government unit: Provided, That the renewed permit shall be submitted as a postqualification requirement in accordance with Section 34.2 of the IRR of RA 9184;
  - d. PhilGEPS registration certificate/number;
  - e. Statement of the consultant specifying its nationality and confirming that those who will actually perform the service are registered professionals authorized by the appropriate regulatory body to practice these professions and allied professions;
  - f. Income/Business Tax Returns; and
  - g. Omnibus Sworn Statement (use Form A).
2. Technical Proposal:
  - a. List of ongoing and completed certification projects (use Forms B and C);
  - b. Curriculum vitae of the proposed certification audit team with audit experience relevant to this project (use Form D for required details);
  - c. Certificate of satisfactory service from at least one (1) of its previous government clients on delivering quality output on time; and
  - d. Complete and clear scope of work and implementation methodology, including team composition and tasks (use Form E), time schedule for professional personnel (use Form F), and activity work schedule (use Form G).
3. Financial Proposal: Financial Proposal Forms 1 to 4 (see attached)

The envelopes shall be properly marked as "Eligibility Requirements-Original", "Technical Proposal-Original" and "Financial Proposal-Original" and shall bear the name of the procurement and the Consultant. All envelopes marked original shall be enclosed in a single envelope marked "Original Submission" and shall bear the name of the procurement and the Consultant. The same shall be done for Copies 1-4.

### **C. Evaluation and Selection Criteria**

1. Evaluation Procedure. Pursuant to RA No. 9184 and its Revised IRR, the proposals shall be evaluated using Quality-Cost Based Evaluation (QCBE), at 80% (Technical Proposal) and 20% (Financial Proposal) allocation ratio;
2. Selection Criteria. The Certifying Body must attain a hurdle rate of 70% based on the following set of selection criteria for Technical Proposal with their corresponding weight assignment:

<b>Criteria for Technical Evaluation</b>	<b>Weight</b>
A. Applicable Experience and Track Record of the Certifying Body <ul style="list-style-type: none"> <li>➤ 1. Years of experience in conducting ISO QMS audits/certification; and</li> <li>2. ISO QMS government certification projects.</li> </ul>	40%
B. Qualification of Consultants/Audit Team: <ul style="list-style-type: none"> <li>➤ Education</li> <li>➤ Experience in auditing for ISO QMS certification</li> </ul>	40%
C. Plan of Approach and Methodology: <ul style="list-style-type: none"> <li>➤ Substance of the Proposal</li> <li>➤ Completeness of the Proposal</li> <li>➤ Clarity of Methodologies and Approaches</li> </ul>	20%
<b>Total</b>	<b>100%</b>

#### **VIII. DURATION OF ENGAGEMENT AND APPROVED BUDGET FOR THE CONTRACT (ABC)**

The services of the Certifying Body will be engaged for three (3) years. The project is expected to commence upon receipt of the Notice to Proceed and will end in 2020. The ABC is Four Hundred Eighty Seven Thousand Pesos (₱487,000.00) inclusive of all taxes and other charges imposed under applicable laws.

#### **IX. DELIVERABLES AND TERMS OF PAYMENT**

1. The following services and outputs will be expected from the Certifying Body to be submitted/delivered to NEDA with the timelines specified below and based on the agreed general Work Plan:

<b>Activity</b>	<b>Output</b>	<b>Timeline*</b>
a. Preparation of certification audit plan	Stage 1 Audit Plan Stage 2 Audit Plan	Within 10 days upon CB's receipt of the Notice to Proceed (NTP)
b. Conduct certification audits	Stage 1 Audit conducted Stage 2 Audit conducted	Within Month 1 upon receipt of NTP
c. Preparation of audit reports	Stage 1 Audit report Stage 2 Audit report	Within Month 1 upon receipt of NTP
d. Evaluation of correction/ corrective and preventive actions	Acceptance Report of Correction/Corrective and Preventive Actions	Within Month 2 upon receipt of NTP**
e. Issuance of ISO 9001:2015 certificate***	ISO 9001:2015 Certificate	Within Month 3 upon receipt of NTP

f. Conduct of two (2) surveillance audits and confirmation of ISO 9001:2015 certificate within Year 1 and Year 2	Annual surveillance audits, plans, procedures, schedules and reports:  1 <sup>st</sup> Surveillance Audit  2 <sup>nd</sup> Surveillance Audit	Within Year 1 after the Certification  Within Year 2 after the Certification
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Notes: \*Changes in the project schedule shall be allowed subject to NEDA's approval.

\*\*Subject to actual submission of correction/corrective and preventive action report.

\*\*\*Subject to satisfactory results of assessment audit.

2. Payment shall be made in three (3) installments upon completion of each of the following milestones and submission of the required deliverables:

Activity/Deliverable	Payment
a. After Certification Audit and Issuance of ISO 9001:2015 Certificate Valid for Three (3) Years	50%
b. After Surveillance Audit for the 1 <sup>st</sup> Year	25%
c. After Surveillance Audit for the 2 <sup>nd</sup> Year	25%

Each payment shall be supported by a Certificate of Satisfactory Service based on the work rendered comprising the actual outputs as certified by the Certifying Body and duly accepted by the QMR or his authorized representative.

<p><b>Conforme:</b></p>  <div style="text-align: center; margin-bottom: 20px;"> <hr style="border: 0; border-top: 1px solid black; width: 100%;"/> <p><b>Bidder's Company Name</b></p> </div> <div style="text-align: center; margin-bottom: 20px;"> <hr style="border: 0; border-top: 1px solid black; width: 100%;"/> <p><b>Name &amp; Signature of Authorized Representative</b></p> </div> <div style="text-align: center; margin-bottom: 20px;"> <hr style="border: 0; border-top: 1px solid black; width: 100%;"/> <p><b>Designation</b></p> </div> <div style="text-align: center;"> <hr style="border: 0; border-top: 1px solid black; width: 100%;"/> <p><b>Date</b></p> </div>
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## FORM A: Omnibus Sworn Statement

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REPUBLIC OF THE PHILIPPINES )  
CITY/MUNICIPALITY OF \_\_\_\_\_ ) S.S.

### AFFIDAVIT

I, *[Name of Affiant]*, of legal age, *[Civil Status]*, *[Nationality]*, and residing at *[Address of Affiant]*, after having been duly sworn in accordance with law, do hereby depose and state that:

1. **Select one, delete the other:**

*If a sole proprietorship:* I am the sole proprietor or authorized representative of *[Name of Consultant]* with office address at *[address of Consultant]*;

*If a partnership, corporation, cooperative, or joint venture:* I am the duly authorized and designated representative of *[Name of Consultant]* with office address at *[address of Consultant]*;

2. **Select one, delete the other:**

*If a sole proprietorship:* As the owner and sole proprietor or authorized representative of *[Name of Consultant]*, I have full power and authority to do, execute and perform any and all acts necessary to participate, submit the proposal/bid, and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]* *[insert "as shown in the attached duly notarized Special Power of Attorney" for authorized representative]*;

*If a partnership, corporation, cooperative, or joint venture:* I am granted full power and authority to do, execute and perform any and all acts necessary to participate, submit the proposal/bid, and to sign and execute the ensuing contract for *[Name of the Project]* of the *[Name of the Procuring Entity]*, accompanied by the duly notarized Special Power of Attorney, Board/Partnership Resolution, or Secretary's Certificate, whichever is applicable;

3. *[Name of Consultant]* is not "blacklisted" or barred from procurement/bidding by the Government of the Philippines or any of its agencies, offices, corporations, or Local Government Units, foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board;

4. Each of the documents submitted in satisfaction of the procurement/bidding requirements is an authentic copy of the original, complete, and all statements and information provided therein are true and correct;

5. *[Name of Consultant]* is authorizing the Head of the Procuring Entity or its duly authorized representative(s) to verify all the documents submitted;

6. **Select one, delete the rest:**

*If a sole proprietorship:* The owner or sole proprietor is not related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;



*If a partnership or cooperative:* None of the officers and members of *[Name of Proponent/Bidder]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

*If a corporation or joint venture:* None of the officers, directors, and controlling stockholders of *[Name of Consultant]* is related to the Head of the Procuring Entity, members of the Bids and Awards Committee (BAC), the Technical Working Group, and the BAC Secretariat, the head of the Project Management Office or the end-user unit, and the project consultants by consanguinity or affinity up to the third civil degree;

7. *[Name of Consultant]* complies with existing labor laws and standards; and
8. *[Name of Consultant]* is aware of and has undertaken the following responsibilities as a Proponent/Bidder:
  - a) Carefully examine all of the Proposal/Bidding Documents;
  - b) Acknowledge all conditions, local or otherwise, affecting the implementation of the Contract;
  - c) Made an estimate of the facilities available and needed for the contract to be procured/bid, if any; and
  - d) Inquire or secure Supplemental/Bid Bulletin(s) issued for the *[Name of the Project]*.
9. *[Name of Proponent/Bidder]* did not give or pay directly or indirectly, any commission, amount, fee, or any form of consideration, pecuniary or otherwise, to any person or official, personnel or representative of the government in relation to any procurement project or activity.

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_ day of \_\_\_, 20\_\_\_ at \_\_\_\_\_,  
Philippines.

\_\_\_\_\_  
*[Proponent's/Bidder's Representative/Authorized Signatory]*

**SUBSCRIBED AND SWORN** to before me this \_\_\_ day of *[month]* *[year]* at *[place of execution]*, Philippines. Affiant/s is/are personally known to me and was/were identified by me through competent evidence of identity as defined in the 2004 Rules on Notarial Practice (A.M. No. 02-8-13-SC). Affiant/s exhibited to me his/her *[insert type of government identification card used]*, with his/her photograph and signature appearing thereon, with no. \_\_\_\_\_.

Witness my hand and seal this \_\_\_ day of *[month]* *[year]*.

**NAME OF NOTARY PUBLIC**

**Serial No. of Commission** \_\_\_\_\_

**Notary Public for** \_\_\_\_\_ **until** \_\_\_\_\_

**Roll of Attorneys No.** \_\_\_\_\_

**PTR No.** \_\_, *[date issued]*, *[place issued]*

**IBP No.** \_\_, *[date issued]*, *[place issued]*

**Doc. No.** \_\_\_\_

**Page No.** \_\_\_\_

**Book No.** \_\_\_\_

**Series of** \_\_\_\_.

**FORM B:**

<b>Statement of Completed Contracts</b>						
This is to certify that _____ has the following completed contracts for the period CY _____						
<b>Name and Location of the Contract</b>	<b>Client</b>	<b>Date of Award of the Contract</b>	<b>Type and Brief Description of Consulting Services</b>	<b>Consultant's Role (Main Consultant, Sub-Contractor, Partner in a JV, etc.)</b>	<b>Amount of Contract</b>	<b>Contract Duration</b>
				<b>Note:</b> Include description of the activities conducted /undertaken by the consultant.		<b>Note:</b> Include month/s and year/s

_____ Name and Signature of Authorized Representative	_____ Date
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**Instructions:**

- a) Cut-off date: The day before the deadline of submission of eligibility documents.
- b) State completed contracts for the last twenty (20) years. Contracts that are similar to the project being procured/bid in terms of nature and amount shall be prioritized in inclusion in the list.

**FORM C:****Statement of Ongoing and Awarded But Not Yet Started Contracts**

This is to certify that \_\_\_\_\_ has the following ongoing and awarded but not yet started contracts:

<b>Name and Location of the Contract</b>	<b>Client</b>	<b>Date of Award of the Contract</b>	<b>Type and Brief Description of Consulting Services</b>	<b>Consultant's Role (Main Consultant, Sub-contractor, Partner in a JV, etc.)</b>	<b>Amount of Contract</b>	<b>Contract Duration</b>
				<b>Note:</b> Include description of the activities to be conducted/undertaken by the consultant.		<b>Note:</b> Include month/s and year/s

\_\_\_\_\_  
Name and Signature of Authorized Representative

\_\_\_\_\_  
Date

**Instructions:**

- State all ongoing contracts including those awarded but not yet started (government and private contracts which may be similar or not similar to the project called for procurement/bidding) as of the day before the deadline of submission of eligibility documents.
- If there is no ongoing contract including awarded but not yet started as of the aforementioned period, state none or equivalent term.

**FORM D:**

**Format of Curriculum Vitae (CV)**

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Proposed Position: \_\_\_\_\_

Name of Firm: \_\_\_\_\_

Name of Staff: \_\_\_\_\_

Profession: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Years with Firm/Entity: \_\_\_\_\_ Nationality: \_\_\_\_\_

Membership in Professional Societies: \_\_\_\_\_

\_\_\_\_\_

Detailed Tasks Assigned: \_\_\_\_\_

\_\_\_\_\_

**Key Qualifications:**

*[Give an outline of staff member's experience and training most pertinent to tasks on project (in months and years with detailed description/discussion on the nature and scope of work). Describe degree of responsibility held by staff member on relevant previous projects and give dates and locations. ]*

\_\_\_\_\_

**Education:**

*[Summarize college/university and other specialized education of staff members, giving names of schools, dates attended, and degrees obtained. ]*

\_\_\_\_\_

**Employment Record/Contracts/Projects:**

*[Starting with present position, list in reverse order every employment held. List all positions held by staff member since graduation, giving dates, names of employing organizations, titles of positions held, and locations of projects. **For experience in last twenty years (in man-months/ man-days), also indicate role played and types of activities performed and client references, where appropriate. Failure to indicate details of role and duration shall merit zero points.**]*

\_\_\_\_\_

**Trainings Attended:**

*[Summarize trainings/seminars attended as participant indicating topic and specific duration (in hours/days).*

\_\_\_\_\_

**Languages:**

*[For each language, indicate proficiency: excellent, good, fair, or poor in speaking, reading, and writing.]*

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**Certification:**

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

\_\_\_\_\_  
*[Signature of staff member and authorized representative of the firm]* Date: \_\_\_\_\_  
Day/Month/Year

Full name of staff member: \_\_\_\_\_

Full name of authorized representative: \_\_\_\_\_

**FORM E:****Team Composition and Tasks**

<b>Name</b>	<b>Position</b>	<b>Task</b>

*Where applicable, indicate relationships among the Consultant and any partner and/or subconsultant, the Procuring Entity, the Funding Source and other parties or stakeholders.*

**FORM F:****Time Schedule for Professional Personnel**

			Months (in the Form of a Bar Chart)												
Name	Position	Reports Due/ Activities	1	2	3	4	5	6	7	8	9	10	11	12	Number of Months
															Subtotal (1)
															Subtotal (2)
															Subtotal (3)
															Subtotal (4)

Full-time: \_\_\_\_\_

Part-time: \_\_\_\_\_

Reports Due: \_\_\_\_\_

Activities Duration: \_\_\_\_\_

Location: \_\_\_\_\_

Signature: \_\_\_\_\_

(Authorized representative)

Full Name: \_\_\_\_\_

Title: \_\_\_\_\_

Address: \_\_\_\_\_



**FORM G:****Activity (Work) Schedule****A. Field Investigation and Study Items**

	<i>[1st, 2nd, etc. are months from the start of project.]</i>												
	1st	2nd	3rd	4th	5th	6th	7th	8th	9th	10th	11th	12th	
Activity (Work)													
_____													
_____													
_____													
_____													

**B. Completion and Submission of Reports**

Reports	Date

## Financial Proposal Form 1

### Financial Proposal Submission Form

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*[Date]*

*[Name and address of the Procuring Entity]*

Ladies/Gentlemen:

We, the undersigned, offer to provide the consulting services for *[Title of Project]* in accordance with your Terms of Reference and our Proposal (Technical and Financial Proposals). Our attached Financial Proposal is for the sum of *[amount in words and figures]*. This amount is exclusive of the local taxes, which we have estimated at *[amount(s) in words and figures]*.

Our Financial Proposal shall be binding upon us subject to the modifications resulting from Contract negotiations, up to signing of Contract.

We acknowledge and accept the Procuring Entity's right to inspect and audit all records relating to our proposal irrespective of whether we enter into a contract with the Procuring Entity as a result of this proposal.

We confirm that we have read, understood and accept the contents of the TOR, the provisions relating to the eligibility of Consultant and the applicable guidelines for the procurement rules of the Funding Source, any and all Supplemental/Bid bulletins issued.

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

We remain,

Yours sincerely,

Authorized Signature:

Name and Title of Signatory:

Name of Firm:

Address:

**Financial Proposal Form 2**

**Summary of Costs**

Costs	Amount in Philippine Peso
Subtotal	
Local Taxes	
Total Amount of Financial Proposal	<hr/>

**Financial Proposal Form 3**

**Breakdown of Price per Activity**

Activity No.: _____	Activity No.: _____	Description: _____
Price Component		Amount in Philippine Peso
Remuneration		
Reimbursables		
Miscellaneous Expenses		
Subtotal		_____

**Financial Proposal Form 4**

Breakdown of Remuneration per Activity

Activity No. _____		Name: _____		
—				
Names	Position	Input <sup>1</sup>	Remuneration Rate	Amount
Lead Auditor				
Team Members				
Grand Total				_____

<sup>1</sup> Staff months, days, or hours as appropriate.