**REPUBLIC OF GHANA**

FORM SFMP



***PUBLIC PROCUREMENT AUTHORITY***

**STANDARD FORMAT FOR MINOR PROCUREMENT**

*( PROCUREMENT OF MINOR CONSULTING SERVICES)*

*(AFTER EXPRESSION OF INTEREST)*

**Use of Document**

This document, FORM SFMP,should be used for procurement of, consulting services **whose estimated value does not exceed GHS50,000.**

**Explanation:**

In the SFMP form, the contents of the brackets “[ ]” or {} denote *information to be inserted* when drafting the RFP, or *an explanation to procurement staff* when preparing the RFP, or an *explanation to the tenderer* when preparing the proposals.



**FORM SFMP**

Name of Procurement Entity: **…………………………………………………**

Address of Procurement Entity: ………………………………...................

**REQUEST FOR PROPOSALS FOR PROCUREMENT OF MINOR CONSULTING SERVICES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Package Number: | | | | |
| Procurement Entity | Department/Project | Financial Year | Type of Procurement | RFP NO. |
|  |  |  |  |  |

Date: [*Date of Transaction*]

To:

…………………………………………… …………………………………………..

…………………………………………… …………………………………………..

The [*name of Procurement Entity*] invites you to submit your proposals for the consulting services for:

**……………………………………………………………………………………………………………………...………………………………………………………………………………………………………………………**

**(See Section C of this document for details).** Consultants shall submit technical and detailed financial proposals for the services. The contract shall be subject to the Government of Ghana General Conditions of Contract covering Consultant Services (available on request) except where modified by this Request for Proposals.

**SECTION A: PROPOSALS REQUIREMENTS**:

1. The Completion Date for the whole of the Consulting services shall be…………from the Start date.
2. Proposals must be valid for ***……………….*** from the Closing Date for submission of proposals.
3. Packaging of Proposals:

i. The Technical Proposal shall be placed inside a sealed envelope clearly marked “TECHNICAL

PROPOSAL – Procurement Number”, [name and address of the Consultant].

ii. Similarly, the original Financial Proposal shall be placed inside of a separate sealed envelope clearly

marked “FINANCIAL PROPOSAL - Procurement Number” [name and address of the Consultant]

iii. The sealed envelopes containing the Technical and Financial Proposals shall be placed into one

outer envelope and sealed. This outer envelope shall be addressed to the Client and bear the

Procurement Number, and the Consultant’s name and address.

1. The Consultant must complete the Forms for Technical and Financial Proposals in Sections B and Sections C respectively; and must be marked with the Procurement Number above and an indication of the acceptance of the terms and conditions. of the Request for Proposals.
2. Closing Date for Submission of Proposals: The Proposals shall be submitted latest by***………………****[time]* on *[date].*
3. Proposals must be delivered to: [ *Entity details and place*]
4. The Terms and Reference for the Services are detailed in Annex 1.
5. Criteria and point system for the evaluation of the Technical Proposals are:

(i) Experience of the firm ***10 points***

(ii) Adequacy and quality of the proposed methodology, and work plan in responding to the Terms of

Reference – ***40 points***

(ii) Key Personnel qualifications and competence (specific experience) for the Assignment: ***50 points.***

Total points for the two criteria: **100**

**The minimum qualifying technical score is 70 %**

Negotiations and Award of contract will be made to the Consultant who has qualified using the *least cost selection method (or other methods)*. Payments shall be made according to the following schedule:

Payment must be made in instalments and shall be linked to the deliverables specified in the Terms of Reference in Appendix A. Progress shall be made subject to certification by the Entity that the deliverables have been rendered satisfactorily.

Example:

* 1st instalment: Inception report -10% of the Total Contract Amount
* 2nd instalment: Draft final report- 70% of the Total Contract Amount
* 3rd instalment: Final report - 20% of the Total Contract Amount

Payments shall be made to the **Consultant**  within 14 days of the certifications of the payment requests. The final payment will be made within thirty (30) days of certification of approval of the payment request.

Signed: …………………… Name: **………………………………….....** Title/Position: ……………………….

For and on behalf of [Procurement Entity]

*PPA FORM SFMP*

**SECTION B: TECHNICAL PROPOSALS FORMS**

**FORM B1: Technical Proposal Submission Form**

To: [Name and address of Procurement Entity]

{Date}

Procurement Number: ………

Dear Sirs:

I, the undersigned, offer to provide the consulting services for [Insert title of assignment] in accordance with your Request for Proposals (RFP) dated [Insert Date] and our Proposal. We are hereby submitting our Proposal, which includes this Technical Proposal and a Financial Proposal sealed in a separate envelope.

We undertake, if our Proposal is accepted and the Contract is signed, to undertake the Services with the highest standards of professional and ethical competence and integrity

Yours sincerely, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Consultant {In full and initials}:

Signature:

***FORM B2: Description of Approach, Methodology, and Work Plan for Performing the Assignment***

*(Maximum three (3) pages of A4 Sheet)*

{The Technical Proposal must have the following structure:}

* ***a)  Technical Approach, Methodology, and Organization of the Consultant’s team***.

{Please explain your understanding of the objectives of the assignment as outlined in the Terms of Reference (TOR), the technical approach, and the methodology you would adopt for implementing the tasks to deliver the expected output(s) and the degree of detail of such output. Please do not repeat/copy the TORs in here.}

* ***b)  Work Plan and Staffing.***
* {Please outline the plan for the implementation of the main activities/tasks of the assignment, their content and duration, phasing and interrelations, milestones (including interim approvals by the Client), and tentative delivery dates of the reports. The proposed work plan should be consistent with the technical approach and methodology.}

*{Structure of the Work plan}:*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| No. | Deliverable1 | Duration (months/weeks) | | | | |
| 1 | 2 | ….. | n | Total |
| D-1 | {e.g., Deliverable #1: Report A |  |  |  |  |  |
|  | 1) data collection |  |  |  |  |  |
|  | 2) drafting |  |  |  |  |  |
|  | 3) inception report |  |  |  |  |  |
|  | 4) incorporating comments |  |  |  |  |  |
|  | 5) delivery of final report to Client} |  |  |  |  |  |
|  |  |  |  |  |  |  |
| D-2 | {e.g., Deliverable #2: ……..} |  |  |  |  |  |
|  |  |  |  |  |  |  |

1. List the deliverables with the breakdown for activities required to produce them and other benchmarks

such as the Client’s approvals.

1. Duration of activities shall be indicated in a form of a bar chart.
2. Include a legend, if necessary, to help read the chart.

***c)***  ***Comments on the TOR and on counterpart staff and facilities***

{Your suggestions should be concise and to the point, and incorporated in your Proposal. Please also include comments, if any, on counterpart staff and facilities to be provided by the Client. For example, administrative support, office space, local transportation, equipment, data, background reports, etc.}

***FORM B3: Curriculum Vitae of Consultant***

*(Maximum four (4) pages of A4 Sheet)*

{The Curriculum Vitae must have the following structure:}

Name:

Date of Birth:

Country of Citizenship:

Education:

{List college/university or other specialized education, giving names of educational institutions, dates attended, degree(s)/diploma(s) obtained}

Employment record relevant to the assignment:

{Starting with present position, list in reverse order. Please provide dates, name of employing organization, titles of positions held, types of activities performed and location of the assignment, and contact information of previous clients and employing organization(s) who can be contacted for references. **Past employment that is not relevant to the assignment does not need to be included.}**

Membership in Professional Associations:

Certification:

I, the undersigned, certify that to the best of my knowledge and belief, this CV correctly describes myself, my qualifications, and my experience, and I am available, as and when necessary, to undertake the assignment in case of an award. I understand that any misstatement or misrepresentation described herein may lead to my disqualification.

      

Name: Signature: Date:

**SECTION C: FINANCIAL PROPOSALS FORMS**

**FORM C1: Financial Proposal Submission Form**

To: [Name and address of Client] Dear Sirs:

Procurement Number: ………

{Date}

Dear Sir,

I, the undersigned, offer to provide the consulting services for [Insert title of assignment] in accordance with your Request for Proposal dated [Insert Date] and our Technical Proposal.

Our attached Financial Proposal is for the amount of {Indicate the corresponding to the amount)} {Insert amount in words and figures}, including taxes.

Our Financial Proposal shall be valid and remain binding upon us, subject to the modifications resulting from Contract negotiations, for the proposal validity period specified in the Request for Proposals.

Yours sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Consultant:

Signature :

***FORM C2:* Summary of Costs**

|  |  |
| --- | --- |
| **Item** | **Cost (GHS)** |
| **Cost of the Financial Proposal** |  |
| (1) Remuneration |  |
| (2) Reimbursables |  |
| **Total Cost of the Financial Proposal:** |  |

***FORM C3:* Breakdown of Remuneration**

(1) Remuneration

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Consultant | Rate  (per working day or months in GHS) | Duration  (Number of working days or moths) | Sub Total  (GHS) |
| Professional Fee\* |  | 180 |  |
| Sub Total (1) |  |  |  |

***FORM C4:* Breakdown of Reimbursable Expenses**

(2) Reimbursables

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Item | Units | Rate (GHS) | Sub-Total  (GHS) | Remarks |
| ({e.g., Per diem allowances\*\*} | Day |  |  |  |
| {e.g., transportation} | Trip |  |  |  |
| {e.g., Communication costs between Insert place and Insert place) |  |  |  |  |
| (e) { e.g., reproduction of reports} | Number |  |  |  |
| Sub Total (2) |  |  |  |  |

**ANNEX 1**

**TERMS OF REFERENCE**

*Sample*

***Name of Assignment:***

***Procurement Number:***

Subtitles:

# Background

# Objective of the assignment

# Scope of work

# Reporting requirements and schedules of deliverables/outputs

# Duration of the assignment

# Location of the assignment

# Facilities to be provided by the procurement entity

# Qualifications and experience