



Request for Quotation - RFQ 004	
RFQ Date: 21-01-2025	Request no: RFQ 004
Quotation for: Assistive Devices	Submitted by:

The Forum for the Rights of Persons with Disabilities - FRPD, requests your price quotation for the items specified in this Request for Quotation (RFQ).

All quotes provided should meet the specification(s) listed, and include the following information for the criterion listed, which shall be used in evaluating the best bidder:

- Price **(40 points)**
- MOF and VAT Registration **(25 points)**
- Previous experience **(25 points)**
- Delivery Time **(10 points)**

Delivery information
Address: North Lebanon, Tripoli, Mina, Port Said Street, Behind APEC station, FRPD, GF
Wire Banking Information: N/A
Transportation cost: The transportation cost should be covered by the supplier.

Submission Deadline: The quote should be submitted no later than **February 11th at 4:00 pm.**

Submission means: The quote should be submitted via email to the below-mentioned person:

Name: Abed El Qader Najjar
Position: Procurement Officer
Email: procurement@theforum-lb.org
Phone: 06-610195.

Special Conditions:

● **Validity of Quotes**

Quotes submitted shall remain open for acceptance for one month at least from the last date specified for receipt of quotes. The selected Bidder(s) shall supply the amounts of goods requested at the quoted prices for the delivery/performance period specified in this RFQ.

● **Basis of Selection**

- Bidders should provide their most competitive quotes.
- All Bidders will be notified in writing should there be a significant change to the listed requirements.
- A Long-Term Purchase Agreement will be issued to the responsible bidder that is judged to be most advantageous to FRPD in terms of ***the criteria specified on page 1.***
- FRPD may accept any item or group of items of a bid.



- FRPD reserves the right to make an award on any item for a quantity less than the quantity stated, at the unit prices quoted.
- FRPD may reject any quote that is determined to be nonresponsive. A responsive quote is one that complies with all terms and conditions of the RFQ. A quote must be complete, signed by an authorized signatory, and delivered by the submission time and date indicated on the first page of this RFQ. FRPD may reserve the right to waive any minor discrepancies in a quote.
- This RFQ does not legally obligate FRPD to award a contract. FRPD reserves the right to fund/award any or none of the submitted quotes. No commitment is made, either expressed or implied, to compensate Bidders for costs incurred in the preparation and submission of their quotes.

Response to Request for Quotes:

To:	Abed El Qader Najjar	Procurement Officer
From:		
Subject:	Response to RFQ number:	004

The following quote is submitted in response to the RFQ from FRPD for the following items. This quote takes into consideration any additional specifications listed on page one (1) of the RFQ.

Assistive Devices Description:

Items	Description	Size	Qty	Unit Cost (\$)	VAT 11%
كرسي متحرك اليدين و الرجلين متحركين	دواليب رص رمادي/ نفخ - دواليب امامية صغيرة	30-35-40-45-50-55	1		
كرسي متحرك اليدين و الرجلين متحركين	ظهر عالي و متحرك	35-45	1		
كرسي متحرك اليدين و الرجلين متحركين	ألمنيوم - وزن خفيف	40-45	1		
كرسي حمام ثابت		Standard	1		
كرسي حمام مدولب	دواليب صغيرة	Standard	1		
كرسي حمام مدولب منجد	دواليب صغيرة - اليدين و الرجلين متحركين	45-50-55	1		
كرسي متحرك للحمام	دواليب كبيرة	45-50-55	1		
عصا عادية			1		
عصا مع ركائز	قاعدة صغير / قاعدة كبيرة		1		
عكازات تحت الابط		وسط - كبير	1		
عكازات ساعد	كوع متحرك / كوع ثابت	وسط - كبير	1		
واكر بدون دواليب		صغير - وسط - كبير	1		
واكر مع دواليب	دولابين اماميين	صغير - وسط - كبير	1		
Kaye walker		صغير - كبير	1		
Rollator واكر قفص	4 دواليب	صغير - كبير	1		
جلود عكازات			1		
طراحة هواء			1		
طراحة جل			1		
طراحة فوم و جل			1		
طراحة فوم			1		
فرشة ماء			1		
فرشة هواء			1		
كرسي خاص بالشلل الدماغى			1		
لوحة وقوف			1		



1. If selected as the supplier for Assistive Devices, kindly specify the number of days required to deliver them to FRPD premises following the issuance of the release order.

2. Are you registered in MOF?

Yes *(kindly attach the MOF Registration Form with the filled RFQ).*

No

3. Are you registered in VAT?

Yes *(kindly attach the VAT Registration Form with the filled RFQ).*

No

4. Do you have previous experience in the supply of Assistive Devices?

Yes *(kindly attach the proof of previous experience with the filled RFQ).*

No

Supplier Name:

Financial Number:

Title:

Date:

Tax Registration Number:

Signature & Stamp: