APPENDIX A

BIDDER INFORMATION

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contact Information** | | | | |
| Contractor/Individual Name: |  | | | |
| Bidder Reference Number |  | | | |
| Email: |  | | | |
| Contractor Website: |  | | | |
| Primary Contact Name: |  | | | |
| Primary Contact Phone Number: |  | | | |
| Secondary Contact Name: |  | | | |
| Secondary Contact Phone Number: |  | | | |
|  | | | | |
| **Professional information** | | | | |
| **Main Team Member Name** | **Position/role** | **OEA registration #** | | **OEA registration Location (Beirut/Tripoli)** |
| 1 |  |  | |  |
| 2 |  |  | |  |
| 3 |  |  | |  |
| 4 |  |  | |  |
|  | | | | |
| Company registration #, if applicable: |  | | | |
| Stamp (OEA or Company) |  | | | |
| Years of experience in adaptation and rehabilitation work: | |  | | |
| Previous experience with NGOs/INGOs: | |  | | |
|  | | | | |
| **Main Subcontractors Name** | **Position/role** | **Domain** | | |
| 1 |  |  | | |
| 2 |  |  | | |
| 3 |  |  | | |
| 4 |  |  | | |
|  |  |  |  |  |
| **Conflict of Interest** | | | | |
| Do you or any of your employees have an affiliation with any of Nusaned’s staff or board members, or a member of their family? (Yes or NO) | | | |  |
| If yes, please identify the pertinent individual(s) and their relationship to you (or your employees). | Name | | Affiliation | |
|  | |  | |
|  | |  | |
|  | |  | |
|  |  |  |  |  |
|  |  | Date: | |  |
|  |  | Signature: | |  |