

**Association of Caribbean States (ACS)**

**Request for Proposal (RFP) Response Form**

In response to the Request for Proposal

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| Reference: | RFP.OSG WebDevelopment 2024 |
| Preparation Date: | December 7, 2023 |
| Approval Date: | December 13, 2023 |
|  |  |
| Date of this Response: | [insert date you have completed this document] |

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Instructions for Respondents

1. Check that you have all the relevant documents, including:

* The Request for Proposal (RFP) which outlines what information is needed.
* The Response Form (this one) to fill out your response.
* Bid Submission Compliance and Risk Data Annex Form included in this RFP as Annex D
* Rough Order of Magnitude (ROM) or Definitive cost proposals in accordance with the ROM Price Sheet(s) included in this RFP as Annex B.
* Question Template included in this RFP as Annex E

1. Before filling out this form, ensure that you read the RFP carefully, particularly Section 3.0 (Background & Scope of Work).
2. Please follow the layout of this Response Form:

* Don’t change the section headings and sequence as this needs to be consistent across all Respondents.
* Insert any extra images or graphs either as part of your answer or in a separate attachment (but make it clear in the Response Form that you have done so).
* You can insert links to videos up to 50 MB in size.
* Do **not** insert links to long documents if possible. They may not be viewed.

1. Everything highlighted in **PURPLE** in this document is information for the Respondent (you). Delete these **PURPLE** parts before sending the Response Form. Everything shaded in BLUE is customisable by you and made available as a field to facilitate your response. When you have completed these areas please un-shade them.

The purple boxes are Respondent Tips. You can delete these after reading.

Write your response in the blue sections. Un-shade the blue once you have filled these out.

1. The response should be submitted as a combination of Microsoft Word, Excel and Adobe Acrobat PDF document formats no larger than four megabytes (4MB) in size. If your response exceeds this size you should submit your response in separate email messages not exceeding 4MB.
2. Please remember to make a note of the Deadline for Questions. If you have any challenges or require any clarification on the RFP contents please do not hesitate to ask us anything at your earliest opportunity before the deadline.
3. Respondent Details

|  | **RESPONDENT TIP**  **i**   * This section provides the ACS with basic information about your organisation and identifies your Point of Contact for the RFP process. * If an item is not applicable, e.g. you do not have a registered office, complete the box by stating 'not applicable'. |  |
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* 1. Respondent Profile

**Choose one of these statements to complete, and delete the others**

This is a Response by [insert the name of your organisation] (the Respondent) to provide information.

**OR**

This is a [joint/consortium] Response, by [insert the name of your organisation] and [insert the name of the other organisation/s] (together the Respondents) to supply information.

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| **Requirement** | **Description** |
| Full Legal Name: | [insert the name that you do business under] |
| Trading or business name  (if different from legal name): | [if applicable] |
| Physical address: | [insert the address of your head office] |
| Postal address: | [e.g. P.O Box address] |
| Registered office: | [if you have a registered office insert the address here] |
| Business website: | [url address] |
| Type of entity (legal status): | [sole trader / partnership / limited liability company / registered charity / other please specify] |
| Country of residence: | [insert country where you are operating from or your organisation is resident for tax purposes] |

* 1. Your Official Point(s) of Contact

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| --- | --- |
| **Requirement** | **Description** |
| Contact person: | [name of the person representing the Respondent and responsible for communicating with the ACS Secretariat] |
| Position: | [job title or position] |
| Phone number: | [landline] |
| Mobile number: | [mobile] |
| Email address: | [work email] |

* 1. Your Technical Team Resources

|  |  |
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| **Requirement** | **Description** |
| Contact person | [name of the person intended to be assigned to your Technical Team] |
| Position: | [webmaster, web designer, web developer, project manager or relevant job title or position] |
| Tenure: | [how long official has been engaged by your firm] |

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| **Requirement** | **Description** |
| Contact person | [name of the person intended to be assigned to your Technical Team] |
| Position: | [webmaster, web designer, web developer, project manager or relevant job title or position] |
| Tenure: | [how long official has been engaged by your firm] |

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| --- | --- |
| **Requirement** | **Description** |
| Contact person | [name of the person intended to be assigned to your Technical Team] |
| Position: | [webmaster, web designer, web developer, project manager or relevant job title or position] |
| Tenure: | [how long official has been engaged by your firm] |

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| --- | --- |
| **Requirement** | **Description** |
| Contact person | [name of the person intended to be assigned to your Technical Team] |
| Position: | [webmaster, web designer, web developer, project manager or relevant job title or position] |
| Tenure: | [how long official has been engaged by your firm] |

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| **Requirement** | **Description** |
| Contact person | [name of the person intended to be assigned to your Technical Team] |
| Position: | [webmaster, web designer, web developer, project manager or relevant job title or position] |
| Tenure: | [how long official has been engaged by your firm] |

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| **Requirement** | **Description** |
| Contact person | [name of the person intended to be assigned to your Technical Team] |
| Position: | [webmaster, web designer, web developer, project manager or relevant job title or position] |
| Tenure: | [how long official has been engaged by your firm] |

1. Assumptions and Exclusions

|  | **RESPONDENT TIP**  **i**   * An assumption is something that is accepted as true or as certain to happen without proof e.g. that the ACS Secretariat (or a third party) will provide certain information or assistance so that the Respondent can deliver on the Requirements. |  |
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* 1. Please state any assumptions you have made in relation to the Response.

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| **Topic** | **Description of Assumption** |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |

|  | **RESPONDENT TIP**  **i**   * An exclusion is something that is accepted as a product, service or related item which the Respondent will explicitly not provide. |  |
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* 1. Please state any exclusions which are applicable to your response

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| **Topic** | **Description of Exclusion** |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |
| insert Topic here] | [insert answer here] |

1. Work Experience Information

|  | **RESPONDENT TIP**  **i**   * Respondents must list references that clearly demonstrate their proven capabilities in delivering solutions or services a similar size and scope to those required by this RFP. It is requested that references be given in the format below. |  |
| --- | --- | --- |

* 1. Client Reference #1.

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| **Requirement** | **Description** | | |
| Name of entity provided as a reference for your firm: | [name of the client reference] | | |
| Address: | [address of client reference] | | |
| Name of entity’s management person that the ACS may contact to verify reference: | [name of official point of contact at client reference] | | |
| Phone number of individual listed above: | [telephone number of client reference] | | |
| Email address of individual listed above: | [email address of client reference contact] | | |
| Dates under contract: | [start date] | **TO:** | [end date] |
| Provide a brief description of services that your firm provided for this entity under contract. Emphasize services that are similar to those required by this RFP: | [What professional services were provided to client] | | |

* 1. Client Reference #2.

|  |  |  |  |
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| **Requirement** | **Description** | | |
| Name of entity provided as a reference for your firm: | [name of the client reference] | | |
| Address: | [address of client reference] | | |
| Name of entity’s management person that the ACS may contact to verify reference: | [name of official point of contact at client reference] | | |
| Phone number of individual listed above: | [telephone number of client reference] | | |
| Email address of individual listed above: | [email address of client reference contact] | | |
| Dates under contract: | [start date] | TO: | [end date] |
| Provide a brief description of services that your firm provided for this entity under contract. Emphasize services that are similar to those required by this RFP: | [What professional services were provided to client] | | |

* 1. Client Reference #3.

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| **Requirement** | **Description** | | |
| Name of entity provided as a reference for your firm: | [name of the client reference] | | |
| Address: | [address of client reference] | | |
| Name of entity’s management person that the ACS may contact to verify reference: | [name of official point of contact at client reference] | | |
| Phone number of individual listed above: | [telephone number of client reference] | | |
| Email address of individual listed above: | [email address of client reference contact] | | |
| Dates under contract: | [start date] | TO: | [end date] |
| Provide a brief description of services that your firm provided for this entity under contract. Emphasize services that are similar to those required by this RFP: | [What professional services were provided to client] | | |

* 1. Client Reference #4.

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| **Requirement** | **Description** | | |
| Name of entity provided as a reference for your firm: | [name of the client reference] | | |
| Address: | [address of client reference] | | |
| Name of entity’s management person that the ACS may contact to verify reference: | [name of official point of contact at client reference] | | |
| Phone number of individual listed above: | [telephone number of client reference] | | |
| Email address of individual listed above: | [email address of client reference contact] | | |
| Dates under contract: | [start date] | TO: | [end date] |
| Provide a brief description of services that your firm provided for this entity under contract. Emphasize services that are similar to those required by this RFP: | [What professional services were provided to client] | | |

* 1. Client Reference #5.

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| **Requirement** | **Description** | | |
| Name of entity provided as a reference for your firm: | [name of the client reference] | | |
| Address: | [address of client reference] | | |
| Name of entity’s management person that the ACS may contact to verify reference: | [name of official point of contact at client reference] | | |
| Phone number of individual listed above: | [telephone number of client reference] | | |
| Email address of individual listed above: | [email address of client reference contact] | | |
| Dates under contract: | [start date] | TO: | [end date] |
| Provide a brief description of services that your firm provided for this entity under contract. Emphasize services that are similar to those required by this RFP: | [What professional services were provided to client] | | |

1. Respondent’s declaration

|  | **RESPONDENT TIP**  **i**   * Here you are asked to make a formal declaration. Select 'agree' or 'disagree' at the end of each row. If you don't, you will be deemed to have agreed. * Have the declaration signed by someone who is authorised to sign and able to verify the declaration, e.g. chief executive or a senior manager. * If you are submitting a joint or consortium Response each party involved in the joint or consortium Response must complete a separate declaration. |  |
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| **Topic** | **Description** | **Respondent’s declaration** |
| RFP-Terms: | I/we have read and fully understand this RFP, including the RFP-Terms and Conditions in Section 2.4.  I/we confirm that the Respondent agrees to be bound by them. | [agree / disagree] |
| Conflict of Interest declaration: | The Respondent warrants that it has no actual, potential or perceived Conflict of Interest in submitting this Response.  Where a Conflict of Interest arises during the RFP process the Respondent will report it immediately to the ACS’s Point of Contact as referenced in the RFP. | [agree / disagree] |
| Details of conflict of interest: | [if you think you may have a conflict of interest briefly describe the conflict and how you propose to manage it or write ‘not applicable’]. | |

**DECLARATION BY THE RESPONDENT**

I/we declare that in submitting the Response and this declaration:

* the information provided is true, accurate and complete and not misleading in any material respect
* the Response does not contain any material that will infringe a third party’s intellectual property rights
* I/we have secured all appropriate authorisations to submit this Response, and to make the statements and to provide the information in the Response.

I/we understand that the falsification of information, supplying misleading information or the suppression of material information in this declaration and the Response may result in the Respondent being eliminated from further participation in any procurement process flowing out of the RFP, and may be grounds for termination of any Contract awarded as a result of such a procurement process.

By signing this declaration the signatory below represents, warrants and agrees that they have been authorised by the Respondent to make this declaration on its/their behalf.

|  |  |
| --- | --- |
| Date: |  |
| Full Name (BLOCK LETTERS): |  |
| Title (BLOCK LETTERS): |  |
| Signature: |  |
| Official Stamp: |  |

\* \* \*