

Friday, 15th August 2014

**NOTICE TO ALL PROPOSERS**

Kia Orana,

**RE: Request for Proposals – Sludge Management Assessment for Rarotonga and Aitutaki CW001-2015**

**Notice No. 2**

As requested, please find below the word format for Schedules 1, 2 and 3

For further queries, please do not hesitate to contact myself.

Kind regards





Tangi Taoro

**WATSAN Programme Administrator**

SCHEDULE 1: PRICING SCHEDULE

Pricing information must be provided in the format set out as per Table A below. If a Proposal does not provide pricing information in the format of this Table, it will not be accepted. Proposers may insert additional rows of detail to show costs associated with personnel, travel etc.

1. TABLE A

|  |
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| **PROJECT COST BREAKDOWN** |
| **Item** | **Description** | **Cost**(NZ$) | **Total**(NZ$) |
| (1) | Assessment of the wastewater septage ponds to include the calculation of approximate maximum loads of sludge that will come from the additional sanitation systems and assess whether the ponds current capacity, condition and operation is adequate to deal with the additional sludge volumes calculated |  |  |
| (1)(a) Rarotonga Waste Facility |  |  |
| (b) Aitutaki Waste Facility |  |  |
| (2) | Undertake an environmental impact assessment of existing sludge treatment and disposal arrangements  |  |  |
| (2)(a) Rarotonga Waste Facility |  |  |
| (2)(b) Aitutaki Waste Facility |  |  |
| (3) | Reporting |  |  |
| (4) | Return airfares and accommodation: |  |  |
| (4)(a) Rarotonga |  |  |
| (4)(b) Aitutaki |  |  |
|  |  | SUB-TOTAL |  |
| (5) | Cook Islands VAT (applicable only to goods and services provided in the Cook Islands by companies registered in the Cook Islands  | VAT (15%)  |  |
| (6) | Other applicable taxes (e.g. NZ GST) | Other tax |  |
|  |  | TOTAL |  |

SCHEDULE 2:
REQUEST FOR PROPOSALS ACKNOWLEDGEMENT

**[Date]**

**TO:**

Secretary

Ministry of Infrastructure Cook Islands

COOK ISLANDS

**Attention:**

Tangi Taoro

**REQUEST FOR PROPOSALS ACKNOWLEDGEMENT – SLUDGE MANAGEMENT ASSESSMENT FOR RAROTONGA AND AITUTAKI CW001/2015**

1. We acknowledge receipt of your Request for Proposals dated **[**insert date that RFP is issued**]** for the above project and confirm our acceptance of the RFP terms and conditions set out in that documentation.

2. We nominate the following person(s) to communicate with WATSAN (and its advisers) on our behalf in relation to the Request for Proposals and our Proposals:

Name of Person(s):

Position of Person(s):

Company:

Address:

Telephone Number:

E-mail Address:

**[Name of company signing the acknowledgement]**

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

**[Name of person signing]**

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

Authorised Signatory

**Notes**:

1. Each party comprising the Proposer, if more than one party, should sign this acknowledgement.

2. Please return this acknowledgement duly signed by the Proposer to (…………………………….) by **[**insert date**]**.

SCHEDULE 3:
CONFLICT OF INTEREST DECLARATION

**SLUDGE MANAGEMENT ASSESSMENT FOR RAROTONGA AND AITUTAKI CW001/2015**

The Proposer hereby confirms that it, and its staff, consultants and partners do not have and are not aware of any actual or potential conflicts of interest which may arise between the Cook Islands Government (including any ministry or agency) and the Proposer, or otherwise in connection with the Sludge Management Assessment for Rarotonga and Aitutaki Project (as described in the Request for Proposals) unless indicated below.

Are you aware of any actual or potential conflicts of interest?

❑ No

There are no conflicts of interest.

Please provide details of your strategy for identifying, managing and preventing conflicts of interest during the contract period.

|  |
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|  |

❑ Yes

Please provide details of any engagements, obligations or commitments that the Proposer or any of its staff, consultants and partners have or are likely to acquire which may give rise to any actual or potential conflict of interest with any of the services that may be required as a result of this process or in connection with the proposed contract.

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If “Yes” please advise your strategy for managing the conflicts of interest noted above, and identifying and preventing conflicts of interest during the contract period.

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| --- | --- |
| Proposer Name |  |
| Authorised Signature |  |
| Date |  |