Plan International Nepal  
Nepal Country Office  
Maitri Marga, Bakhundole, Lalitpur-3

Please find the competitive price quote of the **Kitchen and Toiletries Items** in Newspaper as mentioned below as per your request:

<table>
<thead>
<tr>
<th>SN</th>
<th>Name of Items</th>
<th>Brand</th>
<th>Qty</th>
<th>Unit</th>
<th>Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>(A) Kitchen Items</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Remarks (please mention brand if different than mentioned also weight of the item)</td>
</tr>
<tr>
<td>1</td>
<td>Sugar</td>
<td></td>
<td>1</td>
<td>Kg</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Tea Bags</td>
<td>Tokala or similar</td>
<td>1</td>
<td>Box [100Pcs /Box]</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Coffee</td>
<td>Nescafe or similar</td>
<td>1</td>
<td>Pkt/Bottle [400 grm]</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Milk Powder</td>
<td>Everyday or similar</td>
<td>1</td>
<td>Grm [800 grm Pkt]</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Green Tea Bags</td>
<td>Rakura, Lipton or similar</td>
<td>1</td>
<td>Box [100Pcs] /Box</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Dishwashing Liquid Soap</td>
<td>Pril or similar</td>
<td>1</td>
<td>Bottle [200-250 ml/bottle]</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Scrub</td>
<td></td>
<td>1</td>
<td>Pc</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Grill Pad</td>
<td></td>
<td>1</td>
<td>Pc [10 pcs/pad]</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Surf</td>
<td>Wheel Active or similar</td>
<td>1</td>
<td>Pkt [500 grm Pkt]</td>
<td></td>
</tr>
</tbody>
</table>

**Total of Kitchen Items (A)**

| **(B) Toiletries** |                        |                        |     |                       |                                   |
|1  | Glass Cleaner         | Colin or similar       | 1   | Bottle [500ml/bottle] |                                   |
|2  | Sanitary Napkin       | Stayfree or similar    | 1   | Pkt [8 pcs/pkt]      |                                   |
|3  | Hand washing Liquid Soap| Dettol or similar     | 1   | Bottle [500ml/bottle] |                                   |
|4  | Tissue Paper          | Premier or similar     | 1   | Box 100 sheet/per pkt|                                   |
|5  | Toilet Paper, Soft 3 ply | Good quality         | 1   | Roll                 |                                   |
|6  | Paper towel - (size 20cm×23cm) | Pasio or similar | 1   | Pkt [150 sheet/per pkt]|                                   |

**Total of Toiletries (B)**
Note:
Above mentioned brand represent the market trend, they does not represent any specific brand of Plan International Nepal. Vendors are recommended to quote for same or similar brand.
(a) Above price is valid from **January, 2021 till December, 2021** - for One year period
(b) Vendor agree all the terms and conditions attached herewith.
(c) Quoted rates are inclusive of all government taxes.
(d) Vendor agree to provide the office delivery facility.
(e) If any conditions by vendor: (please use extra sheet if required) ........................................................
(f) Required delivery time by Plan: on a need basis, ready stock preferable.

Signature of Authorized Person:

Name of Authorized Person: ……………………………………………………………………………………………

Name of Firm/Company: …………………………………………………………………………………………………

Address: …………………………………………………………………………………………………………………

E-mail ID: …………………………………………………………………………………………………………………

Company Seal/Stamp Date:
Terms & Conditions for Submission of Quotation

1. All VAT/PAN registered, established, reputed and reliable firms which deals in the services/items as mentioned in the Quotation Form are eligible to bid.

2. The supplier should submit this sealed quotation by 5:00 pm of **18th December, 2020** to the address as mentioned below:
   a. Must reach Plan office by **5:00 pm of 18th December, 2020, at 5:00 PM, at Maitri Marga, Bakhundole, Lalitpur Nepal.** Sealed bid clearly marked “Sealed Quotation/Tender for “Kitchen and Toiletries Items”.

   b. **Deadline for Submission**
      The quotation with supporting documents should be reached and received before **5:00 PM, 18th December 2020**.

      We are aware about the current scenario, hence the **quotation can be accepted through Plan International Nepal email address at** nepal.procurement@plan-international.org. Due to the current COVID pandemic situation, procurement panel will evaluate the bids through online conference call and bidders may be invited for clarity/negotiation.

      Plan International Nepal,
      Nepal Country Office
      Lalitpur-3, Maitri Marga, Bakhundole, Lalitpur, Nepal
      Phone: 01-5535580

3. Price should be mentioned inclusive of VAT clearly without any correction of rate and amount.

4. Quotation documents **should be signed by authorized** person with company seal.

5. The copies of the following documents should be attached along with the Quotation Form.
   a. Firm registration/latest renewal document,
   b. VAT registered document,
   c. Tax Clearance Certificate, latest.

6. Plan Nepal reserves the right to accept or reject any/all submitted Quotation without assigning any reason.

7. Plan International Nepal, will be final authority for settlement of dispute if any.

8. **Quotation Form must be submitted in the specified format as provided by Plan International Nepal.**

9. Submission of this Quotation does not guarantee for selection of supplier.

10. The payments will be made within 1 month/as per Plan International standard policy.

11. Plan International Nepal may reject the goods found not genuine or as specified in quotation form. Plan International Nepal requires/prefers quality services/goods.

12. The bidder will be offered to supply the goods/services on the basis of the lowest bid amount in total, conformity of specification/quality and early delivery time.

13. Penalty @1% per month on the value of undelivered quantities will be imposed after agreed due date of job completion. If delay of delivery is requested by Plan in writing prior to the job completion date, no penalty will be levied.
Submitted by:

Name of the Firm: ..................................................................................................................

Address: ...........................................................................................................Contact No: .................................................................

Name of the Supplier’s Authorized Person: ..........................................................................

Stamp of the Firm: ..........................................................