

**Annex II** 

#### LONG TERM AGREEMENT FOR THE PROVISION OF SERVICES

#### TO THE UNITED NATIONS DEVELOPMENT PROGRAMME

10017 (hereinafter "UNDP") and headquarters at	(hereinafter called "Contractor") with its
	ng-Term Agreement for the provision of services by UNDP country offices world-wide can conclude tractor, as provided herein;
WHEREAS pursuant to the Request for Propose accepted;	al[to complete] the offer of the Contractor was
NOW, THEREFORE, UNDP and the Contract follows:	for (hereinafter jointly the "Parties) hereby agree as

This Long Term Agreement is made between the United Nations Development Programme, a subsidiary organ of the United Nations, having its headquarters at 1 UN Plaza, New York, NY

#### **Article 1: SCOPE OF WORK**

- 1. The Contractor shall provide the types of services and deliverables, which are listed in Annex 1 hereto ("Services/Terms of Reference"), as and when negotiated by UNDP headquarters or a UNDP country office and reflected in a contract for professional services, in the form attached hereto as Annex 2.
- 2. Such Services shall be at the discount prices listed in Annex 3. The prices shall remain in effect for a period of two years from Entry into Force of this Agreement.
- 3. UNDP does not warrant that any quantity of Services will be purchased during the term of this Agreement, which shall be for two years.

### **Article 2: CHANGES IN CONDITION**

4. In the event of any advantageous technical changes and/or downward pricing of the Services during the duration of this Agreement, the Contractor shall notify UNDP immediately. UNDP shall consider the impact of any such event and may request an amendment to the Agreement.

#### **Article 3: CONTRACTOR'S REPORTING**

5. The Contractor will report semi-annually to UNDP on the Services provided to UNDP, including its country offices.

#### Article 4: GENERAL AND SPECIAL TERMS AND CONDITIONS

6. The standard UNDP General Conditions for Professional Services, attached as Annex 4, shall apply to this Agreement, and any subsequent contracts concluded in accordance with paragraph 1 above.

## **Article 5: ACCEPTANCE**

- 7. This Agreement supersedes all prior oral or written agreements, if any, between the Parties and constitutes the entire agreement between the parties with respect to the provision of the Services hereunder.
- 8. This Agreement shall enter into force on the date of the last signature by the representatives of the Parties and shall remain in force for a period of two years, and may be extended for [one additional] year by mutual agreement of the Parties.
- 9. IN WITNESS WHEREOF, the duly authorized representative of the PARTIES have signed this agreement.

For and on behalf of:	UNITED NATIONS
	DEVELOPMENT PROGRAMME
	·
Date:	Date:

# ANNEX III

Requesting Person:	Date:	Effective Date of Contract:	Previous Vendor/Staff Member Number IMIS Vendor ID:
First Name / Last Name/Exte	ension	,	UN Index No:
1.1.1. UN CONTRAC	ΓINFORMATION		
☐ 100/200 ☐ ALD ☐ SSA ☐ Service Contract ☐ Meeting Participant ☐ Fellow ☐ United Nations Volunteer ☐ Supplier			
1.1.2. PERSON INFO	RMATION		
Last Name		First Name	Middle Name
District OD MM	Dial along (Cite		
Birth date ( <b>DD-MM- YYYY</b> )	Birth place (City, Country)	Nationality	Sex: Male Female
Address			
City,	State/Province/County	Country	Postal Code(Zip)
E-mail Address		Telephone Number	r: Fax Number:
1.1.3. VENDOR INFO			OOR/SUPPLIER INFORMATION)
Company Name:	Parent Company I applicable)	Name (if	Web Site URL: (if applicable)
MAIN Street Address		SECOND Street Adsecond address)	ddress (please provide purpose of
City State/Province/County	Postal Code	City County Posta	State/Province/
Country		Country	
Contact Person (MAIN Name:	Phone	Fax	E-mail Address
ivallic.			
Contact Person (SECOND Name:	Phone	Fax	E-mail Address

BANKING INFORMATION COMPLETE THIS SECTION FOR BANK INFORMATION			
Name of Banking Institute (e.g BENEFICIARY)	Branch Name		
Street Address			
City State/Province	Country Postal Code		
•	k account located within U.S.A)		
PLEASE COMPLETE THE BANK TRANSWIRE CO			
Bank ID Qualifier:	Bank Account Currency US\$ Other		
	(PLE INDICATE)	ASE	
Bank ID/Fed Wire/ABA No.:	Bank Account Number:		
SWIFT Address :	Account Type:  Checking Savings		
ACH Number (American Clearing House) Special Instructions (If applicable).			
Payment into a International Bank (B	Bank account located outside of U.S.A)		
PLEASE COMPLETE THE BANK TRANSWIRE CO	ODE INFORMATION		
Bank ID Qualifier:	Bank Account Currency U UOther ALL	S\$	
	(PLEASE INDICATE)		
Local Clearing Code:	Bank Account Number:		
SWIFT Address (If available):	Account Type:		
Special Instructions (If applicable, e.g. IBAN).:	Checking Savings		
For samples of "Bank ID Qualifier" and "Local Clearing Code" please see attached instructions on the next page.  INCOMPLETE OR ERRONEOUS INFORMATION WILL PREVENT FINAL CREDIT OF PAYMENTS			

## Bank ID Number and account number

Different formats are used to identify bank and accounts. It is the responsibility of the staff member to provide complete and unambiguous payment instructions. The formats used in several countries are provided below for your reference.

Country where account is located	Bank ID Qualifier	Bank ID (Defining Banks) Local Clearing Code	Description
USA	1	9-digit transit routing number. Exactly 9 numeric numbers w/check digit calculation.	ABA Routing Number
Canada	2	Exactly 3 numeric numbers.	Transit Number
Australia	3	Exactly 3 numeric numbers.	BSB Number
UK (Bank)	5	Exactly 6 numeric numbers (Sort Code).	Sort Code
UK (Building Society)	11	Exactly 6 numeric numbers (Sort Code).	Sort Code
Spain	6	Exactly 4 numeric numbers.	Spanish Bank Code
France	9	Exactly 5 numeric numbers.	Code Banque / Guichet Number
Germany	10	Exactly 8 numeric numbers.	BLZ Number
Switzerland	12	Exactly 6 numeric numbers.	SIC Number
Belgium	13	Exactly 3 numeric numbers.	Rekeningnummer
Japan	14	Exactly 4 numeric numbers.	
Norway	15	Exactly 4 numeric numbers.	Registernummer
Italy	16	Exactly 5 numeric numbers.	ABI and CAB Number

# FORM FOR PRICING PROPOSAL Relates to Request for Proposals for Audit Services for UNHCR Sub-Projects

Audit Firm Name:		
Currency of offer:		
		<u>Total cost</u>
1. Fees for sub-project:		
(name of sub-project & partner		
2) Other expenses not included	in the fees above (if any)	
Total costs:		
DI	11 1	
Please note that a contract wil	i be issuea for only one πn	ne service.
Signature:		
	-	
Title:	1	Date: