**Alternative Commercial Proposal Submission Form**

Instructions for respondents:

1. Check that you have all the relevant documents, including:
	* the relevant draft ITT document, including Schedule Two
	* the Alternative Commercial Proposals (ACP) guidance document
	* Pharmac’s standard terms
2. Please email the ACP to tender@pharmac.govt.nz by the deadline outlined in the relevant draft ITT. Pharmac will not consider any ACPs received after this date.

***Respondent details***

1. Profile

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| **Item** | **Detail** |
| **Full legal name:** |  |
| **Trading name (if different):** |  |
| **Physical address:** |  |
| **Postal address:** |  |
| **Registered office:** |  |
| **Business website:** |  |
| **Type of entity (legal status):** |  |
| **NZBN number:** |  |
| **Country of residence:** |  |
| **GST registration number:** |  |

1. Point of contact

|  |  |
| --- | --- |
| **Item** | **Detail** |
| **Contact person:** |  |
| **Position:** |  |
| **Phone number:** |  |
| **Mobile number:** |  |
| **Email address:** |  |

***Proposal details***

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| **Item(s) from 2025/26 ITT:** |
| **Pharmaceutical (brand name)** | **Formulation** | **List price**  | **Unit price**  | **Pack Size**  | **Lead time** | **Medsafe approval (Y/N)** | **Community/Hospital supply** |
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| **Other Pharmaceuticals**  |
| **Pharmaceutical (brand name)** | **Formulation** | **List price**  | **Unit price**  | **Pack Size**  | **Lead time** | **Medsafe approval (Y/N)** | **Community/Hospital supply** | **Schedule/ Options for Investment listing** |
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1. Proposal summary (description of the proposal, including any proposed rebates and/or other special terms):
2. Confirmation that there are no intellectual property barriers (including patent barriers) to supply this product for the proposed indications in New Zealand, with additional information if required:
3. Description of any available implementation support:

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