# Tender Submission Form

**An electronic version of this form is available on GETS. You should expand the boxes as necessary.**

**<Tenderer to Insert Date>**

Director of Operations

PHARMAC

[By electronic transfer using GETS (https://www.gets.govt.nz)](https://www.gets.govt.nz/)

Dear Madam

**Tender bid for the supply of ibuprofen and paracetamol to DHB** **Hospitals and community pharmacies – commercial in confidence**

In response to your request for tenders (**RFT**) dated 28 August 2020, we put forward the following Tender Bid(s) in respect of ibuprofen and paracetamol products.

Set out below is further information in support of our Tender Bid.

### Our contact details

(ie who communications relating to the attached bid(s) should be made to):

|  |  |
| --- | --- |
| **Name of supplier** |  |
| **Contact person** |  |
| **Address** |  |
| **Phone** |  |
| **Email address** |  |

1. Information about our company structure:
2. Information about our management and technical skills:
3. Information about our financial resources:
4. Information about our, or our supplier’s, existing supply commitments, including other markets supplied:
5. Information about our quality assurance processes (where applicable):
6. Information about our ability to ensure the continuity of supply of the Tender Item(s):
7. Our confirmation of completion of the following Tender Bid on the appropriate worksheets (for more information on the Tender Bid types – refer to Schedule Three of this RFT):

1. Combined Community and Hospital Tender Bid - Compulsory **Yes/No\***

 \*Delete as appropriate

1. Evidence for market approval and any other required consents:

For any Tender Items without market approval, we confirm that we would register our brand of the pharmaceutical with Medsafe upon notification by PHARMAC that our Tender Bid has been accepted

 **Yes/No\***

\*Delete as appropriate

For any pharmaceuticals without market approval, but where the dossier has been submitted to Medsafe, we provide evidence of the submission:

For any pharmaceuticals without market approval and where the dossier has not been submitted to Medsafe, we provide details of the planned submission date and timeframes to achieve registration:

Details of any other consents required for the pharmaceutical(s) and any further details that are relevant to assessing the likelihood and timing of our brand gaining all the necessary consents:

If not available in the Medsafe registration, we provide details of the packaging type (eg blister, bottle) and descriptions (artwork) a description of the tablet(s) (eg size, shape, colour, markings), and shelf-life. We acknowledge that we **MUST** provide a physical sample for review by PHARMAC:

1. The name and location of:

The manufacturer(s) of the finished product(s) (and name and location of the packaging site, if different):

The manufacturer(s) of the active ingredients:

Alternative manufacturers of the finished product(s) and active ingredients (if any):

1. Our proposed distribution and supply arrangements for the Tender Item(s), including batch sizes, approximate manufacturing time, and approximate shipping time:
2. Key features of our Tender Bid (including addressing any matters of environmental sustainability of each Tender Item):
3. Information about our previous supply performance and relevant expertise:

#### Information about sustainability aspects of our company, including any policies, or certification, including meeting expectations under the New Zealand Government Procurement Supplier Code of Conduct, and information about projects we are working on in this area:

1. Any additional information that PHARMAC should consider when evaluating our Tender Bid including any information about our Tender Items that are relevant to PHARMAC’s Factors for Consideration:

Signed for and on behalf of **<insert name of tenderer>** by

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

**<insert name>**

**<insert delegation>**

**Table for bids**

| **Chemical Name** | **Packaging type** | **Presentation** | **Type of bid**  | **Dispensing type** | **Pack****Size** | **Currency** | **Combined****Price/Pack** | **Brand Name** | **Market Approval****(Yes/No)** | **If No Market Approval: Actual or Expected Date of Dossier Submission To Medsafe \*** | **Lead Time****(Months)** | **Comments (including what medicines you are aggregating with if applicable)**  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Ibuprofen blister pack**  | Blister pack | <Tab/Cap> 200 mg | Standard | n/a |  | NZD | $ |  |  |  |  |  |
| Blister pack | <Tab/Cap> 200 mg | Aggregated | n/a |  | NZD | $ |  |  |  |  |  |
| Blister Pack - Sustainable  | <Tab/Cap> 200 mg | Standard | n/a |  | NZD | $ |  |  |  |  |  |
| Blister pack - Sustainable | <Tab/Cap> 200 mg | Aggregated | n/a |  | NZD |  |  |  |  |  |  |
| **Paracetamol blister pack** | Blister pack | <Tab/Cap> 500 mg | Standard | Restricted  |  | NZD |  |  |  |  |  |  |
| Blister pack | <Tab/Cap> 500 mg | Standard | Non-restricted |  | NZD |  |  |  |  |  |  |
| Blister pack | <Tab/Cap> 500 mg | Aggregated | Restricted |  | NZD |  |  |  |  |  |  |
| Blister pack | <Tab/Cap> 500 mg | Aggregated | Non-restricted |  | NZD |  |  |  |  |  |  |
| Blister pack - Sustainable | <Tab/Cap> 500 mg | Standard | Restricted  |  | NZD |  |  |  |  |  |  |
| Blister pack - Sustainable | <Tab/Cap> 500 mg | Standard | Non-restricted |  | NZD |  |  |  |  |  |  |
| Blister pack - Sustainable | <Tab/Cap> 500 mg | Aggregated | Restricted |  | NZD |  |  |  |  |  |  |
| Blister pack - Sustainable | <Tab/Cap> 500 mg | Aggregated | Non-restricted |  | NZD |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Paracetamol bottle pack**  | Bottle pack | <Tab/Cap> 500 mg | Standard | Restricted  |  | NZD |  |  |  |  |  |  |
| Bottle pack | <Tab/Cap> 500 mg | Standard | Non-restricted |  | NZD |  |  |  |  |  |  |
| Bottle pack | <Tab/Cap> 500 mg | Aggregated | Restricted |  | NZD |  |  |  |  |  |  |
| Bottle pack | <Tab/Cap> 500 mg | Aggregated | Non-restricted |  | NZD |  |  |  |  |  |  |
| Bottle pack - Sustainable | <Tab/Cap> 500 mg | Standard | Restricted  |  | NZD |  |  |  |  |  |  |
| Bottle pack - Sustainable | <Tab/Cap> 500 mg | Standard | Non-restricted |  | NZD |  |  |  |  |  |  |
| Bottle pack - Sustainable | <Tab/Cap> 500 mg | Aggregated | Restricted |  | NZD |  |  |  |  |  |  |
| Bottle pack - Sustainable | <Tab/Cap> 500 mg | Aggregated | Non-restricted |  | NZD |  |  |  |  |  |  |

|  |  |
| --- | --- |
| **Key** |  |
|  | Product InformationCombined Bid for Community AND Hospital Sole Supply  |
|  |

\* If available please attach confirmation that the dossier has been submitted to Medsafe

Note: if your bid is an aggregate bid, please note the medicines you are aggregating with in the comments section. Please add more columns/rows or submit multiple tables if you run out of space.