



IOM International Organization for Migration  
OIM Organisation Internationale pour les Migrations  
OIM Organización Internacional para las Migraciones

## **Nigeria Mission**

### **INVITATION TO SUBMIT EXPRESSION OF INTEREST**

(For Short listing Companies/Service Providers)

*2<sup>nd</sup> December 2020*

*REF NO.: [NG20/REI/20/001](#)*

The International Organization for Migration (IOM) is an intergovernmental humanitarian organization established in 1951 and is committed to the principle that humane and orderly migration benefits both migrants and society.

In line with the framework agreement, IOM now invites Expression of Interest (EOI) from **Companies/Service Providers in the Hospitality sector covering Lagos, Edo and Delta States.**

The Expression of Interest shall be submitted in original and duplicate copy and should be received by hand at IOM with office address at *No 1 Isaac John street, GRA , Ikeja , Lagos State OR No 3 Aideyan street, off Ihama road, GRA , Benin City, Edo State.* no later than *16.00hrs (4 pm) on 22<sup>nd</sup> Dec. 2020.*

On the basis of the above information, IOM shall draw up the shortlist of Companies/Service Providers, Only Short-listed Companies/Service Providers will be contacted for the next phase of evaluation and contract process.

Interested Bidders may obtain further information from IOM at the above office address or by sending an email to [iomlagostenders@iom.int](mailto:iomlagostenders@iom.int) .

IOM reserves the right to accept or reject any Expression of Interest, and to annul the selection process and reject all Expression at any time, without thereby incurring any liability to the affected Companies/Service Providers.

Very truly yours,  
*The Bids Evaluation & Awards Committee.*

**IOM is encouraging companies to use recycled materials or materials coming from sustainable resources or produced using a technology that has lower ecological footprints.**



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## Request for Expression of Interest

The International Organization for Migration (IOM) is an intergovernmental humanitarian organization established in 1951 and is committed to the principle that humane and orderly migration benefits both migrants and society.

In the framework agreement, IOM now invites Expression of Interest from [Companies/Service Providers in the Hospitality sector covering Lagos, Edo and Delta States](#).

This document contains instructions on the preparation and submission of the Application including Annex A: (Vendor Information Sheet)

1. The Application must be submitted by hand in sealed envelope to IOM with office address at [No 1 Isaac John street, GRA, Ikeja Lagos State or No 3 Aideyan street, off Ihama road, GRA Benin city, Edo State](#) no later than *16.00hrs (4.00pm) on Monday 22<sup>nd</sup> December 2020*. Late application will not be considered.
2. The Application must be submitted in the English language and in the format prescribed by IOM. All required information must be provided, responding clearly and concisely to all the points set out. Any application which does not fully and comprehensively address this Request for Expression of Interest may be rejected.
3. a. The Application document should comprise of the following:
  - i. Letter of Introduction
  - ii. A copy of this Request for Expression of Interest duly signed on all pages by the Company/Service Provider's Authorized Representative; and
  - iii. Duly Accomplished Annex A (Vendor Information Sheet) with All requested information and required documentation attached.
- b. Companies/Service Providers requiring any clarifications on the content of this document may notify the IOM in writing via email at [iomlagostenders@iom.int](mailto:iomlagostenders@iom.int) IOM will respond to any request for clarification received on or before *16<sup>th</sup> December 2020 by 1600hrs*.
- c. Applications shall be evaluated in accordance with the following criteria:

No.	Requirements	Compliance Rating
1.	Letter of Introduction	5 marks
2.	Company Profile (including the names of owners, key officers, technical personnel)	5 marks
3.	<ol style="list-style-type: none"><li>i. Certified true copy of Certificate of Registration/ Incorporation</li><li>ii. Form Co2</li></ol>	15 marks

iii. Form Co7		
4.	Tax Certificate	10 marks
5.	Evidence of Tax payment for the last three (3) years	10 marks
6.	Audited Financial Statements for the last three (3) years	10 marks
7.	Letters of Recommendation from three of your major clients. These include UN Agencies, INGOs, Parastatals, Multinationals	10 marks
8.	Hotel/Conference facility price list	5 marks
9.	Certificates from the authorizing bodies (e.g. Nigeria Hotel Association-NHA, Nigerian Tourism Development Corporation – NTDC and State Hotel Licensing Authority)	15 marks
10.	Hotel star rating	5 marks
11.	Dully filled, signed, and stamped Annex A and B (vendor Information Sheet and Vendor code of Conduct)	5 marks
12.	Curriculum vitae of the key supervisory staff	5 marks

*\* Only companies that score 60 and above will proceed to the next phase of prequalification.*

Only eligible and qualified Hotels/Conference Facilities based on the above selection criteria shall be contacted for possible agreement process.

- d. Applications may be modified or withdrawn in writing, prior to the closing time specified in this Request for EoI. Applications shall not be modified or withdrawn after the deadline.
- e. The Company/Service Provider shall bear all costs associated with the preparation and submission of the Application and IOM will not in any case be responsible and liable for the costs incurred.
- f. All information given in writing to or verbally shared with the Company/Service Provider in connection with this Request for EoI is to be treated as strictly confidential. The Company/Service Provider shall not share or invoke such information to any third party without the prior written approval of IOM. This obligation shall continue after the procurement process has been completed whether or not the Company/Service Provider is successful.
- g. IOM reserves the right to accept or reject any Application, and to cancel the procurement process and reject all Applications, at any time without thereby incurring any liability to the affected Companies/Service Providers or any obligation to inform the affected Companies/Service Providers of the ground for IOM's action.

## ANNEX A: VENDOR INFORMATION SHEET



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FPU.SF-19.6

### VENDOR INFORMATION SHEET (VIS)

Name of the Company \_\_\_\_\_

Address  Leased  Owned Area: \_\_\_\_\_sqm

House No \_\_\_\_\_

Street Name \_\_\_\_\_

Postal Code \_\_\_\_\_

City \_\_\_\_\_

Region \_\_\_\_\_

Country \_\_\_\_\_

Contact Numbers/Address

Telephone Nos. \_\_\_\_\_ Contact Person: \_\_\_\_\_

Fax No. \_\_\_\_\_

E mail Address \_\_\_\_\_ Website: \_\_\_\_\_

Location of Plant/Warehouse  Leased  Owned Area: \_\_\_\_\_sqm  
\_\_\_\_\_  
\_\_\_\_\_

Business Organization  Corporation  Partnership  Sole Proprietorship

Business License No.: \_\_\_\_\_ Place/Date Issued: \_\_\_\_\_ Expiry Date \_\_\_\_\_

No. of Personnel \_\_\_\_\_ Regular \_\_\_\_\_ Contractual/Casual \_\_\_\_\_

Nature of Business/Trade

<input type="checkbox"/> Manufacturer	<input type="checkbox"/> Authorized Dealer	<input type="checkbox"/> Information Services
<input type="checkbox"/> Wholesaler	<input type="checkbox"/> Retailer	<input type="checkbox"/> Computer Hardware
<input type="checkbox"/> Trader	<input type="checkbox"/> Importer	<input type="checkbox"/> Service Bureau
<input type="checkbox"/> Site Development/ Construction	<input type="checkbox"/> Consultancy	<input type="checkbox"/> Others _____ _____

Number of Years in business: \_\_\_\_\_

Complete Products & Services

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

Payment Details

Payment Method  Cash  Check  Bank Transfer  Others

Currency  Loc.Currency  USD  EUR  Others

Terms of Payment  30 days  15 days  7 days upon receipt of invoice

Advance Payment  Yes  No  % of the Total PO/Contract

Bank Details:

Bank Name \_\_\_\_\_  
Bldg and Street \_\_\_\_\_

City \_\_\_\_\_  
 Country \_\_\_\_\_  
 Postal Code \_\_\_\_\_  
 Country \_\_\_\_\_  
 Bank Account Name \_\_\_\_\_  
 Bank Account No. \_\_\_\_\_  
 Swift Code \_\_\_\_\_  
 Iban Number \_\_\_\_\_

**Key Personnel & Contacts (Authorized to sign and accept PO/Contracts & other commercial documents)**

Name	Title/Position	Signature
_____	_____	_____
_____	_____	_____
_____	_____	_____

Companies with whom you have been dealing for the past two years with approximate value in US Dollars:

Company Name	Business Value	Contact Person/Tel. No.
_____	_____	_____
_____	_____	_____
_____	_____	_____

Have you ever provided products and/or services to any mission/office of IOM?

Yes       No

If yes, list the department and name of the personnel to whom you provided such goods and/or services.

Name of Person	Mission/Office	Items Purchased
_____	_____	_____
_____	_____	_____
_____	_____	_____

Do you have any relative who worked with us at one time or another, or are presently employed with IOM? If yes, kindly state name and relationship.

_____	_____	_____
_____	_____	_____
_____	_____	_____

Trade Reference

Company	Contact Person	Contact Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

Banking Reference

Bank	Contact Person	Contact Number
_____	_____	_____
_____	_____	_____
_____	_____	_____

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**REQUIREMENTS CHECK LIST**

Please submit the following documents together with the Information Sheet:

No.	Document	For IOM use only	
		Submitted	Not Applicable
1	Company Profile (including the names of owners, key officers, technical personnel)		
2	Company's Articles of Incorporation, Partnership or Corporation, whichever is applicable, including amendments thereto, if any.		
3	Certificate of Registration from host country's Security & Exchange Commission or similar government agency/department/ministry		
4	Valid Government Permits/Licenses		
5	Audited Financial Statements for the last 3 years*		
6	Certificates from the Principals (e.g. Manufacturer's Authorization, Certificate of Exclusive Distributorship, Any certificate for the purpose, indicating name, complete address and contact details)		
7	Catalogues/Brochures (if applicable)		
8	List of Plants/Warehouse/Service Facilities (if applicable)		

9	List of Offices/Distribution Centers/Service Centers (if applicable)		
10	Quality and Safety Standard Document / ISO 9001 (if applicable)		
11	List of major contracts entered into for the last 3 years (indicate whether completed or on going) *		
12	Certification that Non-performance of contract did not occur within the last 3 years prior to application for evaluation based on all information on fully settled disputes or litigation		
13	For Construction Projects: List of machines & equipment ( <i>include brand, capacity and indication if the equipment is owned or leased by the Contractor</i> )		

\* For Competitive Biddings, number of years may increase depending on the estimated contract amount.

\*\* Indicate if an item is not applicable. Failure to provide any of the documents mentioned above will result in automatic "failed" rating.

I hereby certify that the information above are true and correct. I am also authorizing IOM to validate all claims with concerned authorities



Received by:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Position/Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Position/Title

\_\_\_\_\_  
Date

**FOR IOM USE ONLY**

Purchasing Organization \_\_\_\_\_  
Account Group \_\_\_\_\_

Industry  001       002       003

where 001 - Transportation related to movement of migrants  
002 - Goods (e.g. supplies, materials, tools)  
003 - Services (e.g. professional services, consultancy, maintenance)

Vendor Type  Global       Local

