Attachment 2- Cost Proposal-Deliverable Specifications and Price table

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| **No** | **Deliverable** | **Criteria for Acceptance** | **Delivery time** | **Percentage (%) of total contract sum** | **Total Price-LKR** |
| 1. | Assessment Report that:   * Identifies the gaps in the current organization web portal and its member outreach initiatives. * Determines the internal requirements and technical aspects needed based on the expected outcomes and objectives. * Proposes a Course of Action and Project Timeline | Written report / presentation with copy to PSD signed and acknowledged by the designated officer of WCIC | 30 Days from the date of commencement | 20% |  |
| 2. | Execute and complete web portal design & marketing workplan as per projected timeline. | Workplan completion report signed and acknowledged by the designated officer of WCIC | 90 Days from the date of commencement | 50% |  |
| 3. | Analysis & evaluation of the effectiveness of the implemented improvements and a roadmap for medium- and long-term developments | Written campaign execution report/ presentation detailing learnings and results and roadmap for future development signed and acknowledged by the designated officer of WCIC | 120 Days from the date of commencement | 20% |  |
| 4 | Signing of agreement on maintaining the relaunched website for a period of one calendar year from activity completion. | Copy of the signed agreement between WCIC & the Service Provider. | 120 days from the date of commencement | 10% |  |
| **Total Price (LKR)-** | | | | |  |

Note:

Validity of Offer (Minimum 90 days) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Currency of Offer (should be in LKR): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Payment Terms: Minimum two weeks accepted after completion of each deliverable as described above:

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| Service Provider details  Service Provider Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Postal Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Tel No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

Date Authorized Signature

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