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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **CFC PROPOSAL FORM**  Project Name : Digital Access – CFC – for the Provision of Infocomm devices by Infocomm Device Providers  Company Name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  **Call For Collaboration**  **for Digital Access programme** | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
|  |  | |  | | | **INFO-COMMUNICATIONS MEDIA DEVELOPMENT AUTHORITY** | | | | | | |  |
|  |  | |  | | | 10 Pasir Panjang Road  #03-01 Mapletree Business City  Singapore 117438  Tel : (65) 6377 3800  Website : www.imda.gov.sg | | | | | | |  |
| **For IMDA Internal Use** | | | | | | | | | | | | | |
| Date Received | | : |  |  |  | |  |  |  |  |  |  | |
| Officer-in-charge | | : |  |  |  | |  |  |  |  |  |  | |
|  | | | | | | | | | | | | | |

**Notes to Participating Company/Consortia**

1. Participants may participate in **this Call for Collaboration (“CFC”)** either as a single company or as a Consortium.
2. **Where the Participant is a single company**, the Participant must obtain a copy of this proposal submission form and submit the proposal to IMDA with all Parts and Annexes herein (with the exception of Part II) duly completed.
3. Where the Participant is a **Consortium**, each member of the Consortium is required to obtain a copy of this CFP Proposal Form. For submission purposes, only one Proposal need be submitted by **the Consortium Lead** on behalf of all members of the Consortium, duly completed as follows:

i. **The Declaration in Part I** must be signed by authorized representatives of each and every member in the Consortium.

ii. **Parts II, IV, V, VI and including all the required Annexes** are to be completed and submitted by the Consortium Lead on behalf of the Consortium it is representing.

iii. Every member of the Consortium, including the Consortium Lead, must each complete **a copy of Part III** and the Consortium Lead shall submit **the copies of Part III** completed by each member of the Consortium as part of the Proposal.

1. The Consortium Lead shall be primarily responsible for the submission of the Proposal. In the event that an award of Grant is made to the Consortium in respect of its proposal, the Consortium Lead shall also be primarily responsible for directing and coordinating the implementation of the project and all other matters which are to be performed by the Consortium.
2. For the avoidance of doubt, this CFC Proposal Form shall be read with and shall be subject to the Important Notices as set out in **Annex A of the Public Document** for the Digital Access **CFC for the provision of infocomm devices by Infocomm Device Providers**.

6. Participants are to submit the following **by Monday, 7 February 2022, 5:00pm:**

* One (1) softcopy of the proposal, via e-mail to [DAP@imda.gov.sg](mailto:DAP@imda.gov.sg) must be submitted in accordance to the Format of Submission, as specified in paragraph 14.2 under the CFC Public Document.
* The email subject header must be clearly indicated as Email Subject:

<< Organisation Name >> - **Proposal Submission** - CFC for the provision of infocomm devices

Participant (s) are to ensure that their proposals are submitted by the closing date and time.

An email confirmation will be issued when the application is successfully received by IMDA.

Proposal submission received after the closing date and time will not be accepted /processed.

IMDA reserves the right to reject Incomplete Proposals or Proposals not submitted in accordance with the Format of Submission.

7. For enquiries on the submission of the proposal, please email before **Thursday, 27**

**January 2022, 5:00pm**, to:

Digital Inclusion Division, IMDA

Email: [DAP@imda.gov.sg](mailto:DAP@imda.gov.sg)

Subject line: << Organisation Name >> - Digital Access CFC Enquiry - CFC for the provision of infocomm devices

# 

**PART I – DECLARATION**

**I / We, the Company / Consortium, declared that** *(please strike out, if not applicable):*

1. I / We have read and understood the requirements and notices in the Digital Access Call for Collaboration (CFC) for the provision of infocomm devices by Infocomm Device Providers document issued by IMDA on **11 January 2022** and this Proposal is submitted in response thereto. I / We acknowledge that the submission of this proposal does not impose any obligations or constitute the acceptance of any terms and conditions on the part of IMDA. I / We hereby declare that the information submitted pursuant to this Proposal is accurate, true and complete.

|  |
| --- |
| **Company/Consortium Lead** |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name, Designation and Company Stamp and Date  Signature of Company/  Consortium Lead’s representative  (The signatory should be the Chief Executive Officer, Managing Director or equivalent in the company) |
| **Other Members of Consortium (if applicable)**  *Note: Please add rows if needed.* |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name, Designation and Company Stamp and Date  Signature of Consortium Member’s  representative  (The signatory should be the Chief Executive Officer, Managing Director or equivalent in the company) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name, Designation and Company Stamp and Date  Signature of Consortium Member’s  representative  (The signatory should be the Chief Executive Officer, Managing Director or equivalent in the company) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name, Designation and Company Stamp and Date  Signature of Consortium Member’s  representative  (The signatory should be the Chief Executive Officer, Managing Director or equivalent in the company) |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Name, Designation and Company Stamp and Date  Signature of Consortium Member’s  representative  (The signatory should be the Chief Executive Officer, Managing Director or equivalent in the company) |

*Note: Please add rows if needed.*

# PART II – CONSORTIUM INFORMATION

## (Not applicable where a Participant is submitting a Proposal as a single company; to be completed and submitted by the Consortium Lead only, on behalf of the Consortium it is representing.)

## Contact Person for Future Correspondence (Consortium Lead)

|  |  |  |  |
| --- | --- | --- | --- |
| Lead Company |  | | |
| Contact Person |  | | |
| Designation |  | | |
| DID |  | Fax |  |
| Mobile No. |  | Email |  |

## Consortium Composition

There are two categories of participating companies, Type 1 or Type 2:

**Type 1** companies incur costs directly to complete the proposed project. Therefore, they are eligible to claim costs incurred from IMDA. However, Type 1 companies are not allowed to charge other Type 1 companies in the consortium for costs incurred in the project.

**Type 2** companies charge Type 1 companies in the consortium for provision of products and / or services. Type 2 companies are not eligible to claim costs incurred from IMDA.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Company** | **Role of Company in Consortium** | **Principal Business Activity** | **Type** |
| 1 | Consortium Lead |  |  |  |
| 2 | Participating Company 1 |  |  |  |
| 3 | Participating Company 2 |  |  |  |
| 4 | Participating Company 3 |  |  |  |
| 5 | Participating Company 4 |  |  |  |

*Note: Please add rows if needed.*

# PART III – COMPANY INFORMATION

*(Where a Participant is a consortium,* ***each*** *member of the consortium, including the consortium lead, is required to complete a copy of Part III and all copies of Part III completed by each member of the consortium shall be submitted by the consortium lead as part of the proposal.)*

## Company Data

|  |  |  |  |
| --- | --- | --- | --- |
| Company Name |  | | |
| Mailing Address (if different from registered address) |  | | |
| Telephone |  | Fax |  |
| Country of Incorporation |  | Corporate  Web Site URL |  |
| ACRA Number / Unique Entity Number (UEN) |  | Date of Registration |  |
| Paid -up Capital (S$) |  | | |

### Organisation Registration: (please tick one)

□ Private Limited (non-exempt limited by shares)

□ Public Limited (limited by shares)

□ Others (please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Supporting Document to be submitted**

1. **Latest** ACRA search of the Company’s business profile or UEN search, if company is not ACRA registered (Not more than 3 months)
2. Certified copies of 3 years of FULL set of the **latest** audited financial / management report (if Organisation is exempted from audit under Companies Act)

## Corporate Relations

|  |  |  |  |
| --- | --- | --- | --- |
| Substantial Shareholders | *Name of Stakeholder* | *Country registered / Nationality* | *% Share* |
| 1. |  |  |
| 2. |  |  |
| 3. |  |  |
|  | *Name of Company* | *Business Activities* | *% Share* |
| **Parent Company** |  |  |  |
| **Subsidiaries** | 1. |  |  |
| 2.. |  |  |
| 3.. |  |  |
| **Other related companies**  (For Corporate share ≥ 20%) | 1. |  |  |
| 2.. |  |  |
| 3.. |  |  |

Additional information may be provided in separate attachments.

## Company Structure

(Please attach organisational chart and operational chart if available)

Total number of full time employees :

Number of technical personnel :

Key Management Personnel (Please attach biography if available):

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Designation** | **Years of Related Experience** | **Professional/Academic Qualification** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

## Other Grants awarded to / Application in process by the Company \*\*

|  |  |  |  |
| --- | --- | --- | --- |
| **Awarding Organisation** | **Description of Grants / Awards** | **S$** | **Status (ongoing / completed)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

*\*\* Please indicate incentives, grants and/or loans awarded to you by Infocomm Development Authority of Singapore (IMDA), and/or other government agencies and other financial institutions.*

## Contact Person for Future Correspondence

|  |  |  |  |
| --- | --- | --- | --- |
| **Main Contact** | | | |
| Name |  | | |
| Designation |  | | |
| DID |  | Fax |  |
| Mobile No. |  | Email Address |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Secondary Contact (if any)** | | | |
| Name |  | | |
| Designation |  | | |
| DID |  | Fax |  |
| Mobile No. |  | Email Address |  |

# PART IV – DETAILS OF PROPOSED INFOCOMM DEVICES

## (Where a Participant is a consortium, Part IV shall be completed and submitted by the consortium lead only, on behalf of the consortium it is representing.)

## EXECUTIVE SUMMARY

Please provide an overview of the proposal in one paragraph or two, introduction with company background, the Mandatory products/services and support offered, the Value added services proposed, prices, project team, documentation and any assumptions made by the Participant.

## DETAILS OF THE PROPOSAL (SCOPE AND REQUIREMENTS)

Please provide the following information in accordance to the Format of Submission, as specified under **paragraph 14.2 under the CFC Public Document**.

In addition, please provide details on **the redemption (including delivery and collection) of infocomm device (laptop / tablet bundled with software) by IMDA approved applicants under paragraph 7 of the CPC Public Document.**

## CRITICAL SUCCESS FACTORS

Describe the factors that may affect the success of this Project and the measures the Company/Consortium intends to take to manage the risk.

## PROJECT PLANS AND STRATEGY

Describe the pre-implementation, post-implementation and support strategy and plans of the Company/Consortium to ensure smooth end-to-end execution of Digital Access Programme, integrating with other partners, other suppliers/providers, schools, etc.

## PROJECT TEAM

Please outline the composition of the project team including but not limited to the installation, delivery, technical support, service centre staffsand provide pre-implementation, post-implementation support in this Programme. At least one of the persons listed must be **the project manager**. Please attach a **Project Organisation chart**, and **resumes of the project team** in addition to completing the following table:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Name** | **Company** | **Job title** | **Role in Project** | **Relevant experience** | **Existing / New Hire** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

*Note: Please add rows if needed.*

# PART V – SUBMISSION CHECKLIST

Please ensure that the following documents are provided in your submission and indicate accordingly to below.

| **S/N** | **Document** | **Description** | **Submitted**  **(Y/N/NA)** |
| --- | --- | --- | --- |
|  | **CFC Proposal Form** | **Original signed and completed proposal form**  (Blank form can be downloaded from **IMDA website -> for industry -> for Collaboration and Partnership)** |  |
|  | **Annex A - ACRA Business Profile** | **Latest** **updated** ACRA Business Profile. *(not more than 6 months ago)* |  |
|  | **Annex B - Audited Financial Statements / Certified true copy of Management Report** | Audited financial statements of the Participant for the last three (3) years (not more than 18 months).  If audited financial statements are not available, management accounts of the Participant for the last three (3) years (certified true copy by a director as indicated in the ACRA business profile of the Participant). |  |
|  | **Annex C - Track Record / Client References** | Track Record / Client References  Please refer to **Appendix B under CFC Public Document** on the submission format. |  |
|  | **Annex D – Details of Proposal** | Proposal, which state details including but not limited to:   1. Specification details of proposed offerings 2. Provisioning support 3. Methodology to support seamless sign up by Approved Applicant 4. List of retail or distribution points across Singapore   Please refer to **Appendix C under CFC Public Document** for an example of the minimum details required, as part of proposal. |  |
|  | **Annex E - Value-added services, support programme, tie-ups or any other customer and technical support.** | Value-added services, support programme, tie-ups or any other customer and technical support. |  |
|  | **Project Organisation Chart (as per CFC proposal form)** | Outline the composition of the project team including the installation, delivery, technical support, service centre staffs, etc and provide pre-implementation, post-implementation support in this Programme. At least one of the persons listed must be the project manager. Please attach a Project Organisation chart |  |
|  | **Resumes of project team**  **(as required under CFC proposal form)** | A copy of the resumes of the project team. |  |
|  | **Authorisation Letter from Product Principal of proposed hardware / software**  **(if applicable)** | An official letter or equivalent from the product principal indicating that the Participants / Industry Players is an authorised reseller / partner of the licensed software / hardware provided.  *[Applicable only to the Participants / Industry Players who is not the product principal of the licensed software / hardware provided]* |  |
|  | **EPPU Registration**  **(if applicable - for reference)** | Proof of registration with the Expenditure and Procurement Policies Unit (EPPU) of the Ministry of Finance, Singapore.  Please provide **the latest copy** of this EPPU registration. |  |

- End of Document -