 

**CHECKLIST FOR REQUEST FOR SERVICES FOR UNOPS CONTRATORS**

**(This checklist constitutes a formal request by authorized PMOs/Focal Points for contracts from UNOPS)**

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| 1. **Name of contractor:**
 | Last Name: |  |
| First and other names: |  |
| 1. **Title/Position:**
 |  |
| 1. **Type of contract:**
 | LICA or IICA |  |
| 1. **Status of contract:**
 | New or Extension |  |
| 1. **Payment type:**
 | Monthly or Lumpsum |  |
| 1. **Duty station:**
 |  |
| 1. **Duration of Contract:**
 | Start date: |  | End date: |  |
| Number of months: |  |
| 1. **Contract details:**
 | Currency of Contract: |  |
| Fee per month: |  |
| 1. **Funds commitment No.:**
 |  |
| 1. **Supporting documents:**
 | RPA/CV or P11/TOR |  |
| 1. **Office or Branch name:**
 |  |
| 1. **Requesting Officer:**
 | Name  |  |
| Signature: |  | Date: |  |
| 1. **Focal Person (PMO):**

*(Only Designated PMOs are authorized to send requests for contracts to UNOPS!)* | Name: |  |
| Signature: |  | Date: |  |