**Attachment 5: Checklist of evidence and information required for RFP submission, and additional documents you have provided.**

### Proposal for the supply of Dental and Oral Health Products to DHB Hospitals

**[Company name]**

Please fill out the table below with details of all documents submitted as part of your proposal (we have prepopulated some rows)- add additional rows as required. Refer to main RFP document for full details regarding required documents and information.

| **Documents & Information Requested in RFP** | **Attached****(Yes/ No)** | **Document name** |
| --- | --- | --- |
| **2019-09-19 Schedule 4:** Proposal Form for Dental & Oral Health Device Suppliers (word) |  |  |
| **Attachment 1.** Dental and Oral Health Proposed Product List (excel) |  |  |
| **Attachment 2.** Financial Impact Oral & Dental Health Products (excel) |  |  |
| **Attachment 4.** Acceptance of PHARMAC's standard terms and conditions (word) |  |  |
| **Attachment 5.** Document and information checklist for Dental and Oral Health Products RFP (word) |  |  |
| Organisational chart |  |  |
| Evidence of financial stability and ability to cover financial liabilities |  |  |
| Evidence of your company’s Quality Management System(s) certification |  |  |
| Evidence of your manufacturer’s Quality Management System(s) certification |  |  |
| Evidence of compliance to other relevant standards for the proposed products |  |  |
| DHB Transition plan |  |  |
| Copies of international compliance certificates for proposed products |  |  |
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