Form-10

***Provided to inform Bidders about NIRAS requirement to issue Bank Guarantee in case of advance payment***

# Advance Payment Security (Bank Guarantee)

To: NIRAS SB, *[Address of NIRAS]*

Contract : *[UA-NIRAS-……]: [Insert the name of the procurement from bidding documentation]*

**Gentlemen:**

We have been informed that *[name of Supplier]* (hereinafter called "the Supplier") has entered into Contract No. *[UA-NIRAS-……]* dated *[date]* with you, for the *[Insert the name of the procurement from bidding documentation]* (hereinafter called "the Contract").

Furthermore, we understand that, according to the conditions of the Contract, an advance payment in the sum of *[amount in figures & in words]* is to be made against an advance payment guarantee

At the request of the Supplier, we *[name of Bank]* hereby irrevocably undertake to pay you any sum or sums not exceeding in total an amount of *[amount in figures and in words]* upon receipt by us of your first demand in writing accompanied by a written statement stating that the Supplier are in breach of their obligation under the Contract because the Supplier have used the advance payment for purposes other than toward providing the required Goods and Services under the Contract.

We further agree that no change or addition to or other modification of the terms of the Contract or of Goods to be supplied thereunder or of any of the Contract documents which may be made between NIRAS AB and the Supplier, shall in any way release us from any liability under this Guarantee, and we hereby waive notice of any such change, addition, or modification.

This Guarantee shall remain valid and in full effect from the date of the advance payment under the Contract until NIRAS AB receives full repayment of the same amount from the Supplier.

Yours truly,

Signature and seal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Bank/Financial Institution: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_