**Appendix II**

***[Manufacturer’s / Distributor’s]* Authorization Certificate**

|  |  |
| --- | --- |
| **Reference Number:** | **SIHHAT/2025/SUP/INT/07** |
| **Title of Contract:** | **Supply of Vaccines and Syringes (Injectors)** |
| **Tender Lot No:** | …. |
| **To:** | Republic of Turkey Ministry of Health, Directorate General of Public Health  Üniversiteler Mahallesi Şehit Mehmet Bayraktar Caddesi No:3, Kat 1, Çankaya/Ankara-Türkiye |

WHEREAS

We, ***[Manufacturer’s / Distributor’s full name]*** who are official manufacturer’s / distributor’s***,*** *of the Product*having [***factories / headquarters]*** at *[****Factories / Headquarters full address****]*,do hereby, authorize ***[Tenderer’s full name]*** at address ***[Tenderer’s full address]***, to supply the following Goods stated in the table below, manufactured by us:

|  |  |  |  |
| --- | --- | --- | --- |
| **ITEM** | **DESCRIPTION** | **MODEL / TYPE** | **MANUFACTURER** |
| ***[Item number under specified c4f\_annexiitechspeciiitechoffer\_en.doc]*** | ***[Name of the goods under specified c4f\_annexiitechspeciiitechoffer\_en.doc]*** | ***[Name of the model and type]*** | ***[Manufacturer’s full name]*** |

We hereby extend our full guarantee and warranty as stated under specifications provided in tender dossier and General Conditions of tender documents, with respect to the Goods offered by the above Tenderer.

Signed:

Name:

Title:

Date: