

PURCHASE ORDER

Contract No: SPSCM/01079

Contract Name: The Provision of SEEK II Repair Services

Dated: 30/03/2017

Supply the Deliverables described in the Schedule to this Purchase Order, subject to the attached MOD Terms and Conditions for Less Complex Requirements (up to £106,047) (Edn 12/16)

| Contractor | Quality Assurance Requirement (Clause 8) |
|-----------------------------|--|
| Name: | ISO 9001:2015 |
| Cross Match Technology GmbH | 130 9001.2013 |
| Registered Address: | |
| [Redacted] | |

| Consignor (if different from Contractor's registered address) | Transport Instructions (Clause 10) | | | | | | |
|---|---|--|--|--|--|--|--|
| | Select method of transport of Deliverables | | | | | | |
| Name: | To be Delivered by the Contactor | | | | | | |
| Address: | Each consignment of the Deliverables shall be accompanied by a delivery note. | | | | | | |

| Progress Meetings (Clause 13) | Progress Reports (Clause 13) |
|--|---|
| The Contractor shall be required to attend the following meetings: | The Contractor is required to submit the following Reports: |
| Not used | Subject: Assessment and Repair Report. |
| | Frequency: No later than twenty (20) Business Days post each repair completion. |
| | Method of Delivery: Electronic |
| | Delivery Address: [Redacted] |

Payment (Clause 14)

Payment is to be enabled by CP&F.

| | Supply of Hazardous Deliverables (Clause 9) |
|--|---|
| https://www.aof.mod.uk/aofcontent/tactical/toolkit (Registration is required). https://www.gov.uk/government/organisations/ministry-of-defence/about/procurement#invoice-processing https://www.dstan.mod.uk/ (Registration is required). The MOD Forms and Documentation referred to in the Conditions are available free of charge from: Ministry of Defence, Forms and Pubs Commodity Management Date of the processing of the pro | A completed DEFFORM 68 and, if applicable, Safety Data Sheet(s) are to be provided by email with attachment(s) in Adobe PDF or MS WORD format to: a. The Commercial Officer detailed in the Purchase Order, and b. [Redacted] by the following date: or if only hardcopy is available to the addresses below: Hazardous Stores Information System (HSIS) Defence Safety Authority (DSA) [Redacted] |

DEFFORM 111 (Edn 11/16)

Appendix - Addresses and Other Information

1. Commercial Officer

Name: [Redacted]

Address: [Redacted]

Email: [Redacted]

8. Public Accounting Authority

- 1. Returns under DEFCON 694 (or SC equivalent) should be sent to DBS Finance ADMT [Redacted]
- 2. For all other enquiries contact DES Fin FA-AMET Policy, [Redacted]

2. Project Manager, Equipment Support Manager or PT Leader (from whom technical information is available)

Name: [Redacted]

Address: [Redacted]

Email: [Redacted]

9. Consignment Instructions

This address shall be used by the Contractor when repaired equipment is returned to MoD Donnington:

Trade Receipts, [Redacted]

This address shall be used when the Contractor sends back the Returns Issue Voucher to the UK to confirm that they are in receipt of equipment to be repaired:

Logistic Services RSG

[Redacted]

Note: Logistic Services is in the process of moving buildings so always check the Returns Issue Voucher for the correct Address.

3. Packaging Design Authority

Organisation & point of contact:

(Where no address is shown please contact the Project Team in Box 2)

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10. Transport. The appropriate Ministry of Defence Transport Offices are:

A. DSCOM, [Redacted]

Air Freight Centre

IMPORTS ☎ [Redacted] EXPORTS ☎ [Redacted]

Surface Freight Centre

IMPORTS **☎** [Redacted] EXPORTS **☎** [Redacted]

B. JSCS

JSCS Helpdesk No. [Redacted]

JSCS Fax No. [Redacted]

www.freightcollection.com

4. (a) Supply / Support Management Branch or Order Manager:

Branch/Name:

See Box 2.

(b) U.I.N.

| | Ministry of Defence ☎ [Redacted] |
|--|--|
| | DBS Finance |
| | [Redacted] |
| | Website is: |
| | https://www.gov.uk/government/organisations/ministry-of- |
| | defence/about/procurement#invoice-processing |
| | |
| | |
| 6. Intentionally Blank | 12. Forms and Documentation are available through *: |
| | Ministry of Defence, Forms and Pubs Commodity |
| | Management |
| | [Redacted] |
| | Applications via fax or email: [Redacted] |
| | |
| 7. Quality Assurance Representative: | NOTE |
| Name: | Many DEFCONs and DEFFORMs can be obtained from |
| | the MOD Internet Site: |
| Commercial staff are reminded that all Quality | https://www.aof.mod.uk/aofcontent/tactical/toolkit/index.htm |
| Assurance requirements should be listed under | |
| the General Contract Conditions. | |
| AQAPS and DEF STANs are available from UK | |
| Defence Standardization, for access to the | |
| documents and details of the helpdesk visit | |
| http://dstan.uwh.diif.r.mil.uk/ [intranet] or | |
| https://www.dstan.mod.uk/ [extranet, registration | |
| needed]. | |
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| Contractor Commercially Sonsitive Information | (Clause 5) Not to be published |
| Contractor Commercially Sensitive Information | · · · · · · · · · · · · · · · · · · · |
| Description of Contractor's Commercially Sensitive | Information: |
| | |
| Cross reference to location of sensitive information | |
| Closs reference to location of sensitive information | |
| | |
| Explanation of Sensitivity: | |
| | |
| | |
| Details of potential harm resulting from disclosure: | |
| | |
| | |
| | |
| Period of Confidence (if Applicable): | |
| | |

11. The Invoice Paying Authority

5. Drawings/Specifications are available from

| | , |
|---|------------------------------------|
| Contact Details for Transparency / Freedom of Informal Name: Position: Address: Telephone Number: E-mail Address: | tion matters: |
| | |
| Offer and Acceptance | |
| A) The Purchase Order constitutes an offer by the Contractor to supply the Deliverables. This is open for acceptance by the Authority for days from the date of signature. By signing the Purchase Order the Contractor agrees to be bound by the attached Terms and Conditions for Less Complex Requirements (Up to £106,047) (Edn 12/16). | B) Acceptance |
| Name (Block Capitals): | Name (Block Capitals): |
| Position: | Position: |
| For and on behalf of the Contractor | For and on behalf of the Authority |
| Authorised Signatory Date: | Authorised Signatory Date: |
| C) Effective Date of Contract: | 1 |

SCHEDULE OF REQUIREMENTS FOR THE PROVISION OF SEEK II REPAIR SERVICES

| | Deliverables | | | | | | | | | |
|----------------|----------------------------|-----------------------------------|--|----------------------------|---|------------------|-----------|--|--|--|
| Item Number | MOD Stock Reference No. | Part No. (where applicable) | Specification | Consignee Address | Packaging Requirements inc. PPQ and DofQ (as detailed in DEFFORM 96) | Delivery Date | Total Qty | Limit of Liability (£) Ex VAT Total inc. packaging (and delivery if specified in the Purchase Order) | | |
| 1 | | | SEEK II Repair Services (1st April 2017 to 31st March 2018) in accordance with Annex A, Statement of Work. | Box 9 of DEFFORM 111 | Packaging Code 9 | | | [Redacted] | | |
| 2 | | | SEEK II Repair Services (1st April 2018 to 31st March 2019) in accordance with Annex A, Statement of Work. | Box 9 of DEFFORM 111 | Packaging Code 9 | | | [Redacted] | | |

| Item | Consignee Address (XY code only) |
|--------|----------------------------------|
| Number | |
| 1 & | |
| 2 | See Box 9 of the DEFFROM 111 |

STATEMENT OF WORK FOR THE PROVISION OF SEEK II REPAIR SERVICES

The Authority has a requirement to support the current in-service SEEK II biometric enrolment devices through a process of assessment and authorised repair at 4th line (Contractor's premises). This is illustrated in the flow diagram at Appendix 1 to Annex A – Repair Service Process.

Initial Assessment

The Authority representative as stated in Box 2 of the DEFFORM111 shall request an initial repair assessment in writing via email from the Contractor when repair services are required. This request will include failure information to assist the Contractor in the initial assessment. The Contractor shall provide a diagnosis in writing via email to the Authority representative which shall establish failure modes and repair actions.

Complete Assessment

Upon completion of the initial assessment, the Authority will, at its discretion, prepare Part 1 to Tasking Authorisation Form (TAF) at Annex B and issue this to the Contractor in order to request a full quotation of the complete assessment and repair costs. Upon receipt of Part 1 to the TAF, the Contractor shall generate a Return Material Authorisation (RMA) number which shall be sent in writing to the Authority representative as stated in Box 2 of the DEFFORM111. Subject to receipt of the RMA number, the Authority shall arrange for the delivery of the SEEK II equipment to be assessed to the Contractor as stated in Box 9 of the DEFFORM111.

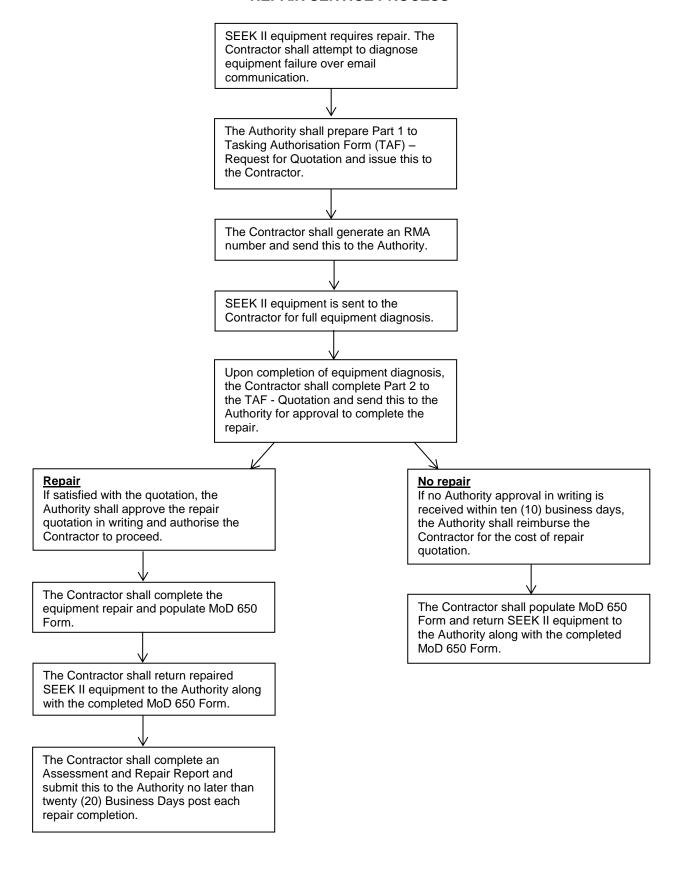
The Contractor shall conduct a complete assessment of the equipment in order to diagnose failure reasons and remedial actions. The Contractor shall populate Part 2 to the TAF at Annex B and send this to the Authority representative as stated in Box 2 of the DEFFORM111 via email in order to request authorisation to proceed with a complete repair and provide the Authority with information on the cost of assessment and repair.

Repair

The Authority will, at its discretion, authorise the Contractor in writing to carry out the equipment repair within ten (10) Business Days from receipt of the repair Quotation. If the Authority does not authorise the Contractor to repair the SEEK II equipment, the Contractor shall populate the MoD 650 Form at Annex C and shall return the equipment to the Authority in accordance with DEFFORM111 Box 9. If the Authority authorises the repair, the Contractor shall carry out a complete repair of the SEEK II equipment and return the equipment with the MoD 650 Form at Annex C to the Authority.

In addition to conducting the repair and delivering the repaired SEEK II equipment to the Authority, the Contractor shall issue a statement of warranty for the repair which shall cover the equipment in case of repair item failure for a period of up to one (1) calendar year from the date of receipt of the repaired equipment by the Authority.

REPAIR SERVICE PROCESS



REPAIR AND AD-HOC TASKING AUTHORISATION FORM (TAF)

PART 1 - REQUEST FOR QUOTATION (To be completed by the Authority)

| 1. | То: | Cross Match [Redacted] | Technology GmbH | From: | Defence Equipment Support [Redacted] | |
|----|-----------------------------------|---------------------------|--------------------------|-------------------|--------------------------------------|----------------------------|
| 2. | Contra | act No: | SPSCM/01079 | Task No: | Project | SEEK II Repair Services |
| 3. | Title of Task The Provision of SE | | KII Repair Service | 9S | | |
| 4. | | | provide a firm price que | | uirement detailed below: | |
| 5. | The C | lassification of | this requirement is: | | | |
| | A Se | curity Aspects | Letter for this requirem | ent has been prov | ided YES/NO | |
| 6. | Name (Equi | ; pment Support | Manager) | Signed | | |
| 7. | Date | | | | | |

PART 2 – QUOTATION (To be completed by the Contractor)

| 1. | То: | Defence Equipment Support [Redacted] | From: | Cross Match Technology GmbH [Redacted] | | | | | | | | |
|----|--|--|---------------------|---|--|--|--|--|--|--|--|--|
| 2. | Firm I | Price Offer | | | | | | | | | | |
| | A Firm quotation is provided in respect of Task Number | | | | | | | | | | | |
| | The Firm price offered is Ex VAT | | | | | | | | | | | |
| | The s | tart date for this Task is | | | | | | | | | | |
| | The c | ompletion date for this Task shall be n | o later than (based | d on start date) | | | | | | | | |
| | The fi | rm price offer is valid until | | | | | | | | | | |
| | Price | Breakdown | | | | | | | | | | |
| | Comp | lete Assessment (to include labour rat | te) | | | | | | | | | |
| | Repai | r (to include labour rate and materials) |) | | | | | | | | | |
| 3. | GFA | | | | | | | | | | | |
| | The fo | ollowing GFA and timescales required | in order to meet th | ne requirement under are requested below: | | | | | | | | |
| 4. | Name | : | Signed | | | | | | | | | |
| | (Comi | mercial Manager) | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| 5. | Date | | | | | | | | | | | |
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MoD 650 form

| Ministry of Defence | | | | | _ | Cop | y | | | | | | |
|---|-------------------|----------|--------------------------|------------------|----------------------------|-----------------------|----------------|--------------|--------|--------------|-----------|---|--------------------------|
| Advice and Receipt Note | (Mod Form 650) | | | Send to Co | | | | | | | | BROWN COPY | (Rev 08/08) |
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| | | | | | | | | | | | | tractor to MOD (Con | |
| | | | MOD Contract No. (or ot | her authority) | | | | | | E | | tractor to MOD (MOD | • |
| | | | SPSCM/01079 | | | | | | | F | | • | on specified in remarks. |
| Ex Contract No | | | | | NR: If know | wn, quote Con | signee Co | ntract no | | ' | | | |
| EX CONTRACT NO | | | | | NB. II KIIO | wii, quote Coi | Isignee Co | illiact ilo. | | | | | |
| | | | | | | Loan Type | | | Ql | JANTIT | IES | | |
| Nato Stock No./Part No. | | Descript | ion | Serial No. | Denom of Qty | (CEI/CWI/ CSI/CWA) | Code Letter | Qty | serv | . no | n-serv. | | Remarks |
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| RECEIPT When Consign | ee is a Contracto | or | | | | | | | ī | | | | <u> </u> |
| Received quantities shown posted to PSA | | | | s copy to be red | ceipted and without | | the Con | signor | | | | | |
| Signature: | | Date: | [| | | | | | 5 | Signatur | e of Re | cipient | Date |

Packing Copy Ministry of Defence Advice and Receipt Note (Mod Form 650) Send to Consignee with goods, consigne **RED COPY** (Rev 08/08) to retain as STORE ACCOUNTING COPY (For Movements Only) Public Accounting Authority No. and nature of packages **Carrier Details** Period of Account (financial year) Serial No. ASSET ACCOUNTING CENTRE AAC From: Name and Full Address of Consignor: To: Name and Full Address of Consignee: NCAGE Ref. No. Code TRANSACTIONS (enter Code in Col 6) Contractor to Contractor (inc.sub-contractors) Fault Investigation (MOD F760 No.) **Contractor to Contractor (Consignor Liable) Contractor to Contractor (Consignee Liable) Contractor to MOD (Contractor Liable)** MOD Contract No. (or other authority) Contractor to MOD (MOD Liable) SPSCM/01079 Other Movements- Reason specified in remarks. Ex Contract No.. NB: If known, quote Consignee Contract no. QUANTITIES Loan Type Code Denom Nato Stock No./Part No. Description Serial No. (CEI/CWI/ Qty Remarks of Qty Letter serv. non-serv. CSI/CWA) 2 3 5 6 8 9 10 RECEIPT When Consignee is a Contractor **RECEIPT Details Signature of Recipient** Received quantities shown above have been brought to account & Consignment No: posted to PSA Date Received: Initials Date Goods unpacked and checked Date: **BROWN COPY signed & returned** Date: Signature: