COST ENGINEERING DIRECTORATE

STANDARD FORM OF PREQUALIFICATION FOR SPECIALIZED WORKS OF THE SANITARY ENGINEERING DIRECTORATE

Speciality Services :	**REHABILITATION OF EXISTING SEWER AND PIPING DISTRIBUTION SYSTEMS**

(To be completed in full by all Contractors wishing to tender for specialized works)

NOTE :

1. The Directorate reserves the right to require the production of any evidence in support of all details entered hereunder.

2. The Applicant shall attach the following along with his application :

   a) Curriculum Vitae for all management staff and engineers.

   b) Photocopies of Organising Engineering Professional Practice cards for all engineers.

   c) GOSI Statement of account for the last 2 months.

   d) Photocopies of registration documents for all plant and equipment.

   e) Audited Annual Financial Statement for the last 3 years and Banker's Reference i.e. a letter from the bank regarding financial relationship of your company with the Bank.

   f) Consultant's references, Contract Agreements and Completion Certificates for the largest three projects completed within the last three years.

   g) Copy of current Commercial Registration.

   h) A Statement form from Ministry of Labour confirming the compliance of approval percentage of Bahranisation in the workforce.

3. This Prequalification Invitation is according to the provision of the Law Regulation Government Tenders & Purchases No. (36) of 2002 and its Implementing Regulations issued by Decree No. (37) of 2002.

4. The completed prequalification shall be submitted to the following address:

The Director,
Cost Engineering Directorate
Ministry of Works
P.O. Box 5, Manama
Kingdom of Bahrain

PART 1- COMPANY DETAILS

1.1 COMPANY NAME: _____

1.2 ADDRESS : Flat No. : _____ Building/Villa No. _____ Road No.: _____
Area No. : _____ Block No. : _____ P.O. Box : _____
Email Address : _____

1.3 TELEPHONE NUMBER(S): _____

1.4 TELEX/FAX NUMBER: _____

1.5 CR NR: _____

1.6 GRADE: _____

1.7 DETAILS OF CR (TYPE OF BUSINESS): _____

_____

1.8 DATE OF ESTABLISHMENT: _____

1.9 ASSOCIATED COMPANIES: _____

	Name	**Nationality**
1.10 OWNERS / PARTNERS:	_____	_____
	_____	_____
	_____	_____
Managing Director:	_____	_____
Other Directors:	_____	_____
	_____	_____
	_____	_____
	_____	_____
Company Secretary:	_____	_____

1.11 MAXIMUM VALUE OF CONTRACTS SOUGHT: _____

1.12 TYPE OF WORK SOUGHT: _____

_____

Note: The Contractor shall immediately inform the Director, Cost Engineering Directorate of any amendments to the above information.

PART 2 - STAFF

2.1 TOTAL NUMBER OF EMPLOYEES:

Position	Bahraini	Expatriate	Total
General Manager:	_____	_____	_____
Contracts Managers:	_____	_____	_____
Senior Engineers:	_____	_____	_____
Quantity Surveyors:	_____	_____	_____
Site Engineers:	_____	_____	_____
Safety Officer:	_____	_____	_____
General Foremen:	_____	_____	_____
Skilled Technicians:			
_____	_____	_____	_____
_____	_____	_____	_____
Semi Skilled Technicians:			
_____	_____	_____	_____
_____	_____	_____	_____
Helpers/Labourers:			
_____	_____	_____	_____
_____	_____	_____	_____
Apprentices / Trainees (specify):			
_____	_____	_____	_____
_____	_____	_____	_____
Employees with Permit to Enter Confined Space (Use of Breathing Apparatus)			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
		GRAND TOTAL :	_____

2.2 Complete adequate training courses for rehabilitation techniques by the contractor staff

2.3 SITE STAFF ON CURRENT PROJECTS:

Name of Project:	Supervisory Staff	Skilled Technician	Semi Skilled Technician

PART 3 - SPECIALIST SERVICES:

Note: The Contractor should enter hereunder details of all specialist services offered.

Experience of similar works in GCC or any other countries :

PART 4 - PLANT, EQUIPMENT, TOOLS & SOURCES OF MATERIALS (for Specialized Services)

4.1 LIST OF EQUIPMENT INSTRUMENTS, SPECIAL TOOLS AND TESTING DEVICES OWNED BY THE COMPANY.

Item	Description of Set Up/Details
4.1A - List of Equipment and Instruments (Quantity to be indicated)	

PART 4 - PLANT, EQUIPMENT, TOOLS & SOURCES OF MATERIALS (for Specialized Services)

Item	Description of Set Up/Details
4.1B - Sources of Materials for Rehabilitation Works (Name of Manufacturers and Country of Origin to be indicated)	

PART 4 - PLANT, EQUIPMENT, TOOLS & SOURCES OF MATERIALS (for Specialized Services)

Item	Description of Set Up/Details
4.1C - SDD SAFETY REQUIREMENTS	
	For jobs involving live sewage or works carried out in hazardous environment (confined space), the Sanitary Engineering Directorate require the following before such work is to be carried out by the Contractor:
1.	Trained personnel with certificate for working in confined spaces or hazardous areas (Indicate names of personnel with valid certificate).
2.	Safety Equipment (Contractor to indicate the Quantity)
	(i) Breathing Apparatus
	(ii) Rescue Breathing Apparatus
	(iii) Breathing Air Cylinders
	(iv) Mechanical Rescue Devices
	(v) Gas Monitors
	(vi) Safety Harnesses and Lifelines
	(vii) Protective Clothing
3.	Welfare Arrangements

4.2 Details of Rehabilitation techniques utilized by the Contractor :

1. Technique of Renovation : _____
2. Foreign Contractor linked with the Bahraini Contractor : _____
3. Main Manufacturer : _____
4. Materials utilized : _____
5. Installation Method : _____
6. Market Experience : _____
7. Size and shape : _____
8. Relevant specifications : _____
9. Third Party certifications i.e. (ISO ….etc) : _____

PART 5 - EXPERIENCE AND REFERENCES

5.1 TOTAL VALUE OF WORK COMPLETED OVER LAST 3 YEARS:

Year	Total Value (BD)

5.2 PRINCIPAL CONTRACTS COMPLETED OVER LAST 3 YEARS:

Project Name	Employer/ Consultant	Commencement Date	Completion Date	Value

5.3 LIST OF WORKS IN PROGRESS:

Project Name	Employer/ Consultant	Contract Period	Value	% Comp.

5.4 LIST OF REFERENCES:

Bank Reference: _____

_____

*Client / Consultant references:_____

_____

_____

_____

<u>* (Contract Agreements & Completion Certificates)</u>

PART 6 - AUTHORISATIONS

6.1 LIST OF PERSONS AUTHORISED TO SIGN ON BEHALF OF THE COMPANY:

Name	Specimen signatures	CPR No.
A. Contract Documents		
_____	_____	_____
_____	_____	_____
_____	_____	_____
B. Variation Orders		
_____	_____	_____
_____	_____	_____
_____	_____	_____
C. Company Cheques		
_____	_____	_____
_____	_____	_____
_____	_____	_____

Note: The Contractor shall immediately inform the Director, Cost Engineering Directorate of any amendments to the above list.

PART 7 - DECLARATION

I declare that the information given above is to the best of my knowledge true and complete and I understand that should any serious error be contained my company will be excluded from the list of Approved Contractors. I also undertake to inform you immediately of any changes to the Company structure.

Signed : _____

Capacity in the Company: _____

Date : _____

Company Stamp :

وزارة الأشغال
Ministry of Works

COST ENGINEERING DIRECTORATE

PREQUALIFICATION DOCUMENT CHECKLIST

Please ensure that the following documents are completed /attached prior to submission. You are required to check (√) each box for all documentation submitted.

1	Prequalification Form :	
(i)	Part 1 - Company Details	☐
(ii)	Part 2 - Staff	☐
(iii)	Part 3 - Specialist Services (if applicable)	☐
(iv)	Part 4 - Plant and Equipment	☐
(v)	Part 5 - Experience and References	☐
(vi)	Part 6 - Authorization	☐
(vii)	Part 7 - Declaration	☐
2	Copy of Current Commercial Registration	☐
3	Ministry of Labour Statement (Confirming the compliance of approval percentage of Bahranisation in the workforce)	☐
4	GOSI Statement of account for the last two (2) months	☐
5	Bankers Reference (A letter from the Bank regarding financial relationship of your company with the Bank)	☐
6	Audited Financial Statement for the last (3) years	☐
7	Curriculum Vitae for all management staff and engineers	☐
8	Copy of Organising Engineering Professional Practice License for all Engineers (COEPP License)	☐
9	Consultant's References, Contract Agreements and Completion Certificates for the largest three (3) projects completed within the last three (3) years	☐
10	Registration Documents for all plants and Equipment	☐

PREQUALIFICATION DOCUMENT CHECKLIST (CONT'D)

11	Details of Safety Officers and their qualifications	☐
12	Health and Safety Plan	☐
13	Testing Certificate (for Road Safety Barrier)	☐
14	EDD Contractor's License (for electrical category only)	☐
15	EDD Wiremen's License (for electrical category only)	☐
16	Quality Assurance Practice/System in place (if available)	☐
17	Quality Control Practice/System in place (if available)	☐
18	Organization Chart	☐
19	Memorandum of Association	☐
20	One softcopy Document in PDF Format of the prequalification Application in a CD.	☐

Submitted by :

Signature: _____ **Date:** _____

Name: _____ **CPR No. :** _____

Company Name: _____