



Ministry of Works, وزارة الأشغال
Municipalities Affairs وشؤون البلديات
and Urban Planning والتخطيط العمراني

COST ENGINEERING DIRECTORATE
PREQUALIFICATION FORM FOR
ELECTRICAL WORKS FOR STP/TSE, SEWERAGE PUMPING STATIONS &
NETWORK 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 the Council for Regulating the Practice of Engineering Professions License 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 Bahransisation in the workforce.
 - i) Photocopies of Valid EDD Contractor's License and Grade.
 - j) Photocopies of Valid EDD Wiremen's License for all Electricians and Foremen.
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 Prequalification Invitation & process of issuing Prequalification Certificate is according to the provision of the Ministerial code no. (9) of 2017.
5. The completed prequalification shall be submitted through the Prequalification Electronic System (<https://www.works.gov.bh/English/Services/cost/Pages/n1.aspx>)

PART 1- COMPANY DETAILS1.1 **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:** _____

	<u>Name</u>	<u>Nationality</u>
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):	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
		GRAND TOTAL:	_____

2.2 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.

PART 5 - EXPERIENCE AND REFERENCES

5.1 TOTAL VALUE OF WORK COMPLETED OVER LAST 3 YEARS:

<u>Year</u>	<u>Total Value (BD)</u>
_____	_____
_____	_____
_____	_____

5.2 PRINCIPAL CONTRACTS COMPLETED OVER LAST 3 YEARS:

<u>Project Name</u>	<u>Employer/ Consultant</u>	<u>Commencement Date</u>	<u>Completion Date</u>	<u>Value</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5.3 LIST OF WORKS IN PROGRESS:

<u>Project Name</u>	<u>Employer/ Consultant</u>	<u>Contract Period</u>	<u>Value</u>	<u>% Comp.</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5.4 LIST OF REFERENCES:

Bank Reference: _____

*Client / Consultant references: _____

*** (Contract Agreements & Completion Certificates)**

PART 6 - AUTHORISATIONS

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

	<u>Name</u>	<u>Specimen signatures</u>	<u>CPR No.</u>
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 :



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COST ENGINEERING DIRECTORATE

PREQUALIFICATION CHECKLIST FOR LOCAL CONTRACTORS

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 | <input type="checkbox"/> |
| (ii) | Part 2 - Staff | <input type="checkbox"/> |
| (iii) | Part 3 - Specialist Services (if applicable) | <input type="checkbox"/> |
| (iv) | Part 4 - Plant and Equipment | <input type="checkbox"/> |
| (v) | Part 5 - Experience and References | <input type="checkbox"/> |
| (vi) | Part 6 - Authorization | <input type="checkbox"/> |
| (vii) | Part 7 - Declaration | <input type="checkbox"/> |
| 2 | Copy of Current Commercial Registration | <input type="checkbox"/> |
| 3 | Ministry of Labour Statement
(Confirming the compliance of approval percentage of
Bahrainisation in the workforce) | <input type="checkbox"/> |
| 4 | GOSI Statement of account for the last two (2) months | <input type="checkbox"/> |
| 5 | Bankers Reference
(A letter from the Bank regarding financial relationship of your
company with the Bank) | <input type="checkbox"/> |
| 6 | Audited Financial Reports for the last (3) years | <input type="checkbox"/> |
| 7 | Curriculum Vitae for all management staff and engineers | <input type="checkbox"/> |
| 8 | Copy of the Council for Regulating the Practice of Engineering
Professions License for all Engineers (CRPEP License) | <input type="checkbox"/> |
| 9 | Consultant's References, Contract Agreements and Completion
Certificates for the largest three (3) projects completed within
the last three (3) years | <input type="checkbox"/> |
| 10 | Registration Documents for all Plants and Equipment | <input type="checkbox"/> |

PREQUALIFICATION DOCUMENT CHECKLIST (CONT'D)

- | | | |
|----|---|--------------------------|
| 11 | Details of Safety Officers and their qualifications | <input type="checkbox"/> |
| 12 | Health and Safety Plan | <input type="checkbox"/> |
| 13 | Relevant Material Testing Certificate from MED, Works Affairs for Road Asphalt & Road Safety Barrier (for relevant categories only) | <input type="checkbox"/> |
| 14 | EDD Contractor's License (for electrical category only) | <input type="checkbox"/> |
| 15 | EDD Wiremen's License (for electrical category only) | <input type="checkbox"/> |
| 16 | Quality Assurance Practice/System in place (if available) | <input type="checkbox"/> |
| 17 | Quality Control Practice/System in place (if available) | <input type="checkbox"/> |
| 18 | Organization Chart | <input type="checkbox"/> |
| 19 | Memorandum of Association | <input type="checkbox"/> |

Submitted by :

Signature: _____

Date: _____

Name: _____

CPR No. : _____

Company Name: _____