

TECHNICAL / POST-QUALIFICATION DOCUMENT

PROJECT: UPGRADATION OF THQ HOSPITALS TO THE LEVEL OF DHQ
HOSPITALS IN NEWLY CREATED DISTRICTS OF SINDH.
“KASHMORE AT KANDHKOT”

CLIENT: HEALTH DEPARTMENT, GOVT. OF SINDH.

**APPLICATION INSTRUCTIONS
FOR THE TECHNICAL / POST QUALIFICATION**

All Tenderers desiring to qualify for this contract should complete and submit all the relevant documents with this Technical / Post qualification Documents to:

Project Director,
Rehabilitation of DHQ and THQ Hospitals in Sindh,
D-62/1, Block 9 (Near Kausar Medico)
Clifton,
Karachi, Pakistan.

no later than

All inquiries relative to this document and / or technical / post-qualification documents should be addressed in writing to the Project Director, Rehabilitation of DHQ and THQ Hospitals in Sindh, D-62/1, Block 9 (Near Kausar Medico) Clifton, Karachi, Pakistan.

Basic Conditions for Post-Qualification

1. Information supplied by the Tenderers for the post-qualification statement must apply to the company named on the statement. The substitution of background information pertinent to post-qualification will not be considered for another company related to the applicant company through a "Group ownership".
2. a) The Employer will initially open only the envelope of “**Technical / Post Qualification Document**” in the presence of Tenderer's representatives who choose to attend.

b) Envelope marked as “**Financial Documents**” shall be retained in the custody of Employer without being opened.

c) The Technical Documents will be technically evaluated first without reference to the price.

- d) Only those tenders (Financial Bid Documents) which pass the evaluation of Technical Document will be opened in the presence of tenderer's representative who chooses to attend at a time announced and communicated in writing to the Tenderers in advance.
 - e) The Financial Bid Documents of the tenderer's who fail to post qualify shall be returned to them unopened. The decision of Employer in this connection shall be final and binding on all tenderers.
3. Firms applying for registration individually are advised that any variation of constitution or membership from that put forward in response to this notice, without prior approval of the **Health Department** may result in disqualification of the firm of any tender it may submit.
4. a) **Technical / Post Qualification Documents will be evaluated on basis of information submitted with this document and no information from Company Profile of the firms, if submitted, will be taken into consideration for evaluation.**
- b) The response to this document must be sufficiently detailed to convince the **Health Department** that the firms applying for post qualification have the experience as well as the technical, administration and financial qualifications necessary for the execution of the subject works and they must prove that they have carried out similar works in their own country or abroad.
5. Firms submitting post-qualification documents / applications may be required during the review process to make personal presentations of their qualifications to the **Health Department**. If so, the candidate management personnel of the firms will be required to be present.

APPLICATION FORM
(Technical / Post Qualification Documents)

RETURN TO:

Project Director,
Rehabilitation of DHQ and THQ Hospitals in Sindh,
D-62/1, Block 9 (Near Kausar medico)
Clifton,
Karachi, Pakistan.

Telephone No. 021 – 35875739 / 35875740
Fax No. 021 – 35822317

Please complete the following:

1. **COMPANY INFORMATION**

- a. Full Name of the Company / Firm: _____
- b. Registered Office Address: _____

- c. Description of Company / Firm *: _____
- d. Telephone Numbers: _____
- e. E-mail: _____ Fax: _____
- f. Names of Present Executive Director and their Position
in the Company, with Bio-Data: _____

- * Provide copy of Memorandum and Article of Association or Partnership Deed / Joint Venture Agreement, which ever is applicable.

2. **BUSINESS SETUP AND FINANCIAL DATA**

- a) Type of Business Organization (Corporation, Joint Venture, Partnership etc.):

- i) If Joint Venture, Names of the Joint Venture Partners with Name of the Leading Partner

- ii) If Partnership, Names of the Partners with position held by each Partner

- iii) If Corporation, provide the Name and the Title of Principals: (President, Vice President, etc.)

when Incorporated _____ where _____
Country / State

- b) Date Business Founded: _____

- c) Under Present Management since: _____

- e) Proof of Registration with Income Tax Department (NTN Certificate) supported by Income Tax returns along with Audit Report for the last three years.

- e) Certificate from the Bank in current date to be addressed directly to the undersigned in a sealed cover showing Financial Worth of the Firm and Credit Worthiness.

3. **CONTRACTOR'S LICENSES CURRENTLY VALID (MANDATORY)**

Are you registered with the Pakistan Engineering Council in required Category

Yes _____ No _____ If yes (attach copy)

4. **PERFORMANCE RECORD**

- a) List of similar projects completed in last 5 Years (2008 - 2012) with completion cost (Form - 1).
- b) List Projects currently in progress (please use attachment Form 2).

5. **ORGANIZATION**

- a) List of permanent Staff, full time (Technical & Administrative).
- b) Detail of Key Technical Staff, their Qualification & Experience who would be deputed for this project.
- c) Details of execution equipment, plants, machinery and tools owned by the organization and to be utilized on the project (please use attached Form 3).

6. **LITIGATION ETC.**

- a) Affidavit on Stamp Paper of current date regarding non involment in the litigation / arbitration.
- b) Affidavit on Stamp Paper of current date that the firm has never been blacklisted.

7. **LIST OF REFERENCES**

Satisfactory performance certificate from Clients or Consultants.

- 1. _____
- 2. _____
- 3. _____

8. **CONSTRUCTION METHODOLOGY**

Project Construction Methodology for performing the work.

9. **CERTIFICATION – SIGNATURE**

I hereby certify that to the best of my knowledge the information hereby submitted that is correct.

Name : _____

Title : _____

Signature : _____

Dated : _____

Seal : _____

TECHNICAL / POST-QUALIFICATION FORM – 1**LIST PREVIOUS EXPERIENCE (5 YEARS)**

(use additional sheet, if required)

S. #	NAME OF PROJECT & LOCATION	FULL NAME & ADDRESS OF CLIENT	CONTRACT VALUE IN PAK RS. ONLY)	STATE ANY PENALTIES, CLAIMS, ARBITRATION	TYPE OF WORK	CARRIED OUT ALONG OR IN PARTNERSHIP (IF IN PARTNERSHIP, NAME OF PARTNER	START DATE	COMPLETION DATE
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

TECHNICAL / POST-QUALIFICATION FORM – 2**CURRENT PROJECTS**

(use additional sheet, if required)

S. #	NAME OF PROJECT & LOCATION	FULL NAME & ADDRESS OF CLIENT	CONTRACT VALUE IN PAK RS. ONLY)	STATE ANY PENALTIES, CLAIMS, ARBITRATION	TYPE OF WORK	CARRIED OUT ALONG OR IN PARTNERSHIP (IF IN PARTNERSHIP, NAME OF PARTNER	START DATE	COMPLETION DATE
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

POST-QUALIFICATION FORM – 3

**LIST OF PLANT AND EQUIPMENT ITEMS OWNED BY YOUR COMPANY
AND /OR EQUIPMENT TO BE LEASED OR PURCHASED TO BE USED BY
YOUR
COMPANY FOR THIS PROJECT IF AWARDED THIS CONTRACT**

DESCRIPTION OF EQUIPMENT	EQUIPMENT OWNED AND YEARS OF SERVICES	EQUIPMENT TO BE PURCHASED OR LEASED	GIVE SPECIFICATION OF EQUIPMENT