



Prequalification form

Date: / /

Company name

Name (English):

Registration, Property and Management

Company Ranking: License Number:

Registration Number/Certificate:

Place of Establishment: Date of establishment:

Legal Form:

Owner Name:

Name of the CEO/Commissioner:

Issued capital:..... subscription capital:..... paid capital:.....

Administrative Regulation

Number of permanent employers:

1- Admins: 2- Engineer/ Technician :.....

Number of temporary employers:

1- Admins: 2- Engineer/ Technician :.....

Do you have an organization structure?

yes no

Please attach the organization structure.

Is there a design/project management unit in the company?

yes no Please write name of the employer:.....

Are there any technical units in the company?

yes no If yes Please specify:.....



Is there a unit specialized in project/supply in the company?

yes no **Please write name of the employer:.....**

Years of experiences:.....

Do you have international partners?

yes no **If yes Please specify:.....**

Do you have any agreement with sub-companies or permanent suppliers?

yes no **If yes Please specify:.....**

Does the company have approved financial statements for the last 3 years?

yes no **If yes Please attach**

Company activities

Company main activities:

.....
.....
.....
.....
.....

Other services provided by the company:

one services only Different service

Specify services:

1.
2.
3.
4.
5.

Equipment owned by the company:

1.



- 2.
- 3.
- 4.

Software used in the company:

- 1.
- 2.
- 3.
- 4.
- 5.

Any relevant certifications for the company and employees (ISO/PMP/e.g):

- 1.
- 2.
- 3.

Name of senior technical employees:

- 5.
- 6.
- 7.

A brief description of one of the accomplished projects offered by the company:

.....

.....

.....

Branches and Offices

Local in Libya: Branches number :..... Please specify:

- 1.
- 2.
- 3.

International: Branches number :..... Please specify:



1.
2.
3.

Address and correspondence contact

Name of contact employee _____

Phone number: _____ **Mobile number:** _____

Fax number: _____ **email address** _____

Website: _____ **P.O.BOX :** _____

Address _____



| # | Company name | Project description | Description of project activities | Duration of project |
|---|--------------|---------------------|-----------------------------------|---------------------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |



| | | | | |
|---|--|--|--|--|
| 7 | | | | |
| 8 | | | | |
| 9 | | | | |



General conditions:

1/ Please fill in all blank. in case the information is unavailable please specify (unavailable information).

2/ Please provide all supporting documents for bidding, these are as follow:

- . Memorandum of association
- . Article of association
- . Commercial registry certificate
- . Commercial certificate issued by the chamber of commerce
- . practice license
- . Tax certificate
- . Partnership contracts/agreements with suppliers or subcontractors (if any).
- . Assignment documents or previous contract
- . CV's/ Certificates of senior employees
- . Organizational structure