# Pre-Qualification Questionnaire

## 1 Instructions for completion of the questionnaire

1. Please note that if a bid is to be submitted by a joint venture, or structure other than a single company, then each section may relate to one or more of the organizations. Care should be taken to ensure that a completed response is provided for each consortium member. The lead member should complete the general sections and submit all responses together.
2. Applicants are advised that they are solely responsible for bearing their costs and expenses incurred in connection with the preparation of responses and submission of the completed PQQ and all future stages of the selection and evaluation process. Under no circumstances will HUTCHISON PORTS EGYPT be liable for any costs or expenses borne by an Applicant in this procurement process.
3. Please note that if any of the information supplied in your PQQ response regarding the Applicant changes in the ensuing evaluation period, you are required to notify HUTCHISON PORTS EGYPT’s procurement team via its appointed contact person, accordingly, giving details of the changes.
4. HUTCHISON PORTS EGYPT reserves the right to reject or disqualify an Applicant where:
   1. the PQQ response is submitted late, is completed incorrectly, is incomplete or fails to meet HUTCHISON PORTS EGYPT submission requirements and conditions as set out in these guidance notes.
   2. the Applicant is guilty of serious misrepresentation in relation to its application and/or the procurement process.
   3. there is a change identity, control, financial standing, or other factor impacting on the selection and/or evaluation process affecting the Applicant; and/or
   4. there is a conflict of interest arising between HUTCHISON PORTS EGYPT and the Applicant.
5. HUTCHISON PORTS EGYPT reserves the right to:
   1. cancel the selection and evaluation process at any stage.
   2. require an Applicant to clarify its response in writing and/or provide additional information; and/or
   3. amend the terms, conditions and/or requirements of the tender process including the PQQ/pre-selection process.

***Notes for completion.***

* All sections of the questionnaire should be completed.
* Please avoid the use of abbreviations, if used please reference
* Please include, where appropriate, any supporting documents.

# Pre-Qualification Questionnaire Form

## Organization Information

* 1. Name of organization in whose name the tender would be submitted.

Name of the main contractor who will act as lead bidder for the purposes of this tender:

* 1. Contact details:

|  |
| --- |
| Name: |
| Position in organization: |
| Telephone no.: |
| Fax no.: |
| Email address: |

* 1. Main address for correspondence:
  2. Legal status of your organization (Yes as applicable):

|  |  |
| --- | --- |
| Sole trader |  |
| Partnership |  |
| Private Limited Company |  |
| Public Limited Company |  |
| A consortium of companies |  |
| Other (please specify) |  |

* 1. Company Registration details:

|  |
| --- |
| Company Registration no: |
| Date of registration: |
| Registered address (if different from above): |

* 1. Date organization commenced business:
  2. Please state the names of all other organizations and sub-contractors to be involved in the tender/contract, attach your relationship with them and the respective roles and responsibilities for each:

|  |  |  |
| --- | --- | --- |
| No. | Name | Type |
| 2 |  |  |
| 3 |  |  |
| 4 |  |  |
| 5 |  |  |

* 1. Please provide enclose details of your organization’s structure and total number of employees, e.g. organization chart showing location network and range of business units.

Attached:

* + - Yes
    - No
  1. Is your company a subsidiary of another company? If so, please provide the name and registered office address of the holding or parent company and the ultimate parent (if applicable):
  2. Please give the number of offices and the locations of the organization main premises.

## Business and Professional Conduct

* 1. Are there any court actions and/or employment tribunal hearings outstanding against your organization? If so, please give details:
  2. In the last three years has your organization:

|  |  |  |
| --- | --- | --- |
| 2.2.1 | Been involved in any court action and/or employment tribunals? | **YES**  **No** |
| 2.2.2 | Paid damages in respect of failure to perform any contract? | **YES NO** |
| 2.2.3 | Had a contract terminated or been refused the opportunity to re- tender for a contract? | **YES NO** |
| 2.2.4 | Been successfully sued for breach of contract? | **YES NO** |
| 2.2.5 | Withdrawn from a contract before the agreed completion date? | **YES NO** |

* 1. If you have answered YES to any of the above questions, please provide details, including appropriate judicial or equivalent extracts:

1. **Financial**
   1. Please indicate the annual turnover of organization, in whose name the tender would be submitted, over the last 3 years. If your organization is part of a group, please give figures for both your own organization and the group:

|  |  |  |
| --- | --- | --- |
| Year | Organization annual turnover (EGP) | Group annual turnover (EGP) (where applicable) |
| 2023 |  |  |
| 2022 |  |  |
| 2021 |  |  |

* 1. Your Company Accounts:

please provide a set of the last three years audited accounts for your own organization.

- If your organization has been established for **less than 3 years**, HUTCHISON PORTS EGYPT will accept 2 years audited accounts.

* 1. Please give details of any changes in company status since the last published accounts or any planned changes e.g. acquisitions, mergers, share issues, major investments, major loans, etc:
  2. Please provide a statement, of any other financial considerations you feel are of relevance at this stage to this PQQ and tendering process.

## Insurance

* 1. Employer’s liability insurance is a legal requirement, please confirm that you have this in place by stating ‘Yes’ or ‘No’.



Yes No

* 1. The organization have issued medical and social insurance to all staff.



Yes No

## Staffing and Co-ordination

* 1. Please provide name and title of the key personal in your organization who are likely to be involved in this project and their experience:
  2. Total number of staff employed in your organization:
  3. Please provide details of your staff and organization’s qualifications: “you can attach”

## Experience/References/Ability

* 1. Please provide details in below Table of relevant contracts you have been awarded for the provision of services like those required by HUTCHISON PORTS EGYPT at least 3 similar projects.

**Previous Experience**

|  |  |  |  |
| --- | --- | --- | --- |
|  | Contract 1 | Contract 2 | Contract 3 |
| Customer Organization (name): |  |  |  |
| Customer contact name, phone number and email |  |  |  |
| Contract start date. |  |  |  |
| Contract completion date |  |  |  |
| Contract Value (EGP) |  |  |  |
| Brief description of contract (max 500 words) including evidence as to your technical capability in this market.  Please attach all relevant documents |  |  |  |

***Note: HUTCHISON PORTS EGYPT reserves the right to contact any or all of these organizations for a reference. HUTCHISON PORTS EGYPT may also wish to visit them. Your permission to do so will be assumed unless you state any objections.***

* 1. Please detail any proposals you may have for sub-contracting aspects of the project, naming the principal sub-contractors and the area(s) of works or service they would provide. This may include attaching sub-contractors previous experience with all related documents.

Please expand on the type of arrangement proposed in a separate attachment:

* + - Provide a list of sub-contracted Service Providers indicating their expertise in similar SOW, Physical address and two key contracts.
    - Please indicate sub-contractor arrangements/relationships in place.

## Health and Safety

* 1. Are you able to demonstrate that you have a policy and organization for health and safety (H&S) management? Please attach related documents.



Yes No

* 1. Do you have a policy and process for providing your staff/workforce with training and information appropriate to the types of activity that your organization is likely to undertake? Please attach related documents.



Yes No

* 1. Does your staff/workforce have H&S or other relevant qualifications and experience sufficient to implement your H&S policy to a standard appropriate to the activity that your organization is likely to undertake? Please attach related documents.



Yes No

I declare that to the best of my knowledge the answers submitted in this PQQ are correct. I understand that the information will be used in the process to assess my organization’s suitability to be awarded the tender for Annual civil maintenance and I am signing on behalf of my organization. I understand that HUTCHISON PORTS EGYPT may reject this PQQ if there is a failure to answer all relevant questions fully or if I provide false/misleading information.

Name:……………...……………………………………………………………………. Signature:………………………………………………………...…………………...... Position:……………………………………………………….…………………………

Tel No:……………………………………………………………...……………………… E-mail:……………………………………………………………...……………………… Date:…………………………………………………………………………………………..

{Thank you for completing this questionnaire. The information it contains will be held in confidence by HUTCHISON PORTS EGYPT and used for the purpose of determining your suitability for meeting our requirements for the provision of the services / works**}**