

CONTRACTOR PREQUALIFICATION SUMMARY
FOR SAUDI POWER PROCUREMENT CO.

Control Number: _____

I. CONTRACT INFORMATION

Project Type : GENERAL
Last Date for submission of PQ Documents : OPEN
Contact Person : Contract and Procurement Department
Tel. No. : NA
E-mail : Prequalification@spb.com.sa

II. CONTRACTOR INFORMATION (To be filled by Contractor)

Contractor Name: _____
E-mail Address: _____
Telephone Number (s): _____
Business Mobile Number (s): _____
Commercial Registration Number: _____
Issue Place: _____
Issue Date (YY/MM/DD): _____
Contractor Classification Number: _____
Field: _____
Grade: _____
Validity (YY/MM/DD): _____

Is your Company registered with SAUDI POWER PROCUREMENT CO. (SPP)? ☐ YES ☐ NO.
If YES, indicate your SAUDI POWER PROCUREMENT CO. Contractor Number here

If NO, submit the following Documents (submit

also if the documents you previously submitted to SAUDI POWER PROCUREMENT CO. are to be updated and/or no longer valid):

- | | |
|--|---|
| 1. Commercial Registration Certificate | 6. Audited 2021 Financial Statement including |
| 2. Valid Zakah Certificate | Balance Sheet, Income Statement and Auditor's |
| 3. Valid Contractor Classification Certificate | Comments |
| 4. Valid Chamber of Commerce Certificate | |
| 5. GOSI Certificate | |

III. SUBMITTAL CHECKLIST

Your Prequalification Documents should also **include all the documents and arranged by section** as listed below. Please checkmark the appropriate box whether the documents are attached or not. If any of the required documents is not submitted, then explain why.

<u>Section</u>	<u>Document Description</u>	<u>Attached</u>	
1) Exhibit I	Commercial Registration Certificate	<input type="checkbox"/> YES	<input type="checkbox"/> NO
2) Exhibit II	Valid Zakah Certificate	<input type="checkbox"/> YES	<input type="checkbox"/> NO
3) Exhibit III	Valid Contractor Classification Certificate	<input type="checkbox"/> YES	<input type="checkbox"/> NO
4) Exhibit IV	Valid Chamber of Commerce Certificate	<input type="checkbox"/> YES	<input type="checkbox"/> NO
5) Exhibit V	GOSI Certificate	<input type="checkbox"/> YES	<input type="checkbox"/> NO
6) Exhibit VI	Audited Year <u>2021</u> Financial Statement including Balance Sheet, Income Statement and Auditor's Comments	<input type="checkbox"/> YES	<input type="checkbox"/> NO
7) Section I	A complete list of similar work you have completed within the last the last five (5) years. Attach certificates from the clients. Use the attached format.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
8) Section II	A complete list of your on-going projects/contracts. Attach Certificates from the clients. Use the attached format.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
9) Section III	A project profile for each of your on-going projects/ contracts. Use the attached format.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
10) Section IV	A complete contractor profile which include Organization Chart(s) with names, showing your present Organization and Functional Groups. The Chart(s) should show lines of authority and communication.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
11) Section V	A complete list of your Management and Supervisory Personnel. Use the attached format.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
12) Section VI	A Resume of each of your Management & Supervisory Personnel. Use the attached format.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
13) Section VII	A complete list of Skilled/Unskilled Manpower employed by your company. Use the attached format.	<input type="checkbox"/> YES	<input type="checkbox"/> NO
14) Section VIII	A complete list of Equipment and Tools owned by your Company. Use the attached format.	<input type="checkbox"/> YES	<input type="checkbox"/> NO

- 15) Section IX Answers to the Questionnaires (Additional Information). ☐ YES ☐ NO
- 16) Section X Any other additional information (company brochures, etc.)
that may describe or illustrate your capabilities
to perform the work. ☐ YES ☐ NO

IV. QUESTIONNAIRE (ADDITIONAL INFORMATION) (Not applicable)

- 1) Indicate the portion of work you intend to subcontract.
- 2) Will you provide Quality Assurance/Quality Control (QA/QC) personnel dedicated for the Project? If No, how do you propose to handle the QA/QC work?
- 3) Will you use computers for correspondence, reports, planning and scheduling? If Yes, indicate the software to be used.
- 4) Will you provide a full time Safety Engineer/Officer for the Project? If No, how do you propose to handle the Loss Prevention Requirements?
- 5) Indicate the type of personal Protective Equipment/Gears you will provide to each of your personnel at the work site and other basic Safety Equipment to be provided at the work site by your company.
- 6) If required, will your company, itself, perform total engineering and design? If Yes, provide proof of registration to perform engineering and design work and list of projects carried out within the last five (5) years; and Resume of your engineering and design staff for all disciplines. If No, how do you propose to get the engineering and design work done?
- 7) If required, will your company itself perform the final testing and commissioning? If Yes, indicate the equipment for which your personnel has been certified by the manufacturers to carry out the final testing and commissioning. If No, how do you propose to get the final testing and commissioning done?

V. INQUIRIES AND SUBMISSION

All inquiries and questions regarding this Contractor Prequalification Summary form shall be addressed only to Contract and Procurement Department.

Contractors are strictly prohibited from contacting any other SAUDI POWER PROCUREMENT CO. organizations or personnel other than Contract and Procurement Department. personnel.

Violation of this restriction may cause outright disqualification for the above-mentioned Projects.

VI. AUTHORIZED SIGNATURE

We certify that all the information provided in Attachments/Sections listed above are true and correct, and we fully understand that any information found to be incorrect or incomplete could result in the disqualification of our company in participating in the above mentioned Projects.

CONTRACTOR SEAL (If any)

Contractor Name : _____

Authorized Signature : _____

Name : _____

Position : _____

Date : _____

End of Contractor Pre-qualification Summary