



**PUBLIC WORKS AUTHORITY**  
**ASSET AFFAIRS**  
**ROAD OPERATION AND MAINTENANCE**  
**DEPARTMENT**

**PRE-QUALIFICATION APPLICATION FORMS AND  
SCHEDULES (CONTRACTORS)**

**FOR**

**REPAIR & MAINTENANCE OF  
HIGHWAY STRUCTURES - CONTRACT (3)**

**TEN (10) INTERCHANGES**

**Public Works Authority**  
**P.O. Box 22188**  
**Doha**  
**State of Qatar**

**NOVEMBER 2013**

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PRE-QUALIFICATION OF CONTRACTORS FOR REPAIR/REHABILITATION OF  
BRIDGES / ROADS WORKS

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**CONTRACTOR PRE-QUALIFICATION  
APPLICATION FORM**

## **APPLICATION FORM**

(Hardcopy to be signed and printed on Company's letterhead)

PUBLIC WORKS AUTHORITY

Contracts Department – Contract Services Section

ASHGHAL Tower (1) – Ground Floor

P.O. Box 22188

Doha, Qatar.

### **PREQUALIFICATION OF CONTRACTORS FOR REPAIR & MAINTENANCE OF HIGHWAY STRUCTURES – CONTRACT (3) – TEN (10) INTERCHANGES**

Dear Sir,

We the undersigned herewith express our interest to participate in tendering and submit our application for pre-qualification for “Repair and Maintenance Highway Structures - Contract (3) – Ten (10) Interchanges” as a prospective Contractor in the Category of Construction of Bridge & Road Works Contractor.

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The attached Schedules 1 - 11 have been completed accurately and to the best of our knowledge.

It is understood and accepted that the submission of our Pre-Qualification Document does not in any way obligate you towards the undersigned nor any party associated or related to the undersigned.

It is understood and accepted that the Employer shall be the sole judge in the assessment of the information presented. The undersigned and their associates waive any claim of appeal/challenge regarding the Employer's decision in respect of their participation for pre-qualification.

It is understood that the Employer undertakes to treat the information in our Pre-  
Qualification Document as strictly confidential, and shall in no way make it available to a  
third party except to his Project Manager and to financing agencies as applicable.

It is understood and accepted that the Employer will neither be responsible for, nor  
reimburse any expenses or losses, which may be incurred in the preparation and  
submission of our Pre-qualification Document.

We undertake to supply any clarification and further information requested by you for the  
initial prequalification and any updating thereof to be made subsequently.

Date ..... day of ..... 2013.

Main Contractor responsible for whole parties.

Signature .....

In the capacity of

Duly authorized to sign for and behalf of:

Company:

Address: .....  
.....  
.....  
.....

If the company/firm applying for pre-qualification is a JV or has other firms in Affiliation/Association, please enter the names and sign this declaration below. Also, clearly indicate the part of work assigned to each party in the JV / Affiliation / Association.

Date ..... day of ..... 2013.

Work assigned to this party

Signature .....

in the capacity of

Duly authorized to sign for and behalf of:

Company:

Address: .....  
.....  
.....  
.....

**SCHEDULE 1**

**COMPANY DETAILS AND GENERAL INFORMATION**

Schedule 1: Company Details and General Information		
1. Name of Company		
2. Street Address:		
3. City:	4. State/Postal Code:	5. Country:
6. P.O. Box:	7. Telephone Number	
8. Mailing Address (if different);	9. Fax Number:	
	10. Company E-mail:	
	11. Company website:	
12. Contact Person..... Title: .....	13. Telephone Number:	
	14. E-mail address:	
15. Parent company (full legal name, if applicable):		
16. Subsidiaries, Associates and/or Overseas Representative(s)		
Name	Title	Area of Operation
17. Type of business (tick one only): <input type="checkbox"/> Corporation/LLC; <input type="checkbox"/> Sole Proprietorship; <input type="checkbox"/> Government Agency; <input type="checkbox"/> Other (specify) .....		
18. Market Area Covered: National <input type="checkbox"/> Regional <input type="checkbox"/> International <input type="checkbox"/> (If international, list countries of operation) .....		
19. Registration in Home Country: (legal documentation to be provided as supporting information in the hard copy submission)		
Year Established	State/Province/Country where registered	Business registration/license number
20. Registration in Qatar if different from above: (legal documentation to be provided as supporting information in the hard copy submission)		
Year Established	Full address & Contact numbers	Business registration/license number
21. If not registered in Qatar, provide legal documentation of Representative:		
Name	Legal Status	Full address & Contact numbers



22. Fields of Specialization:					
Major sector		List Specific Field(s)			
23. Company Structure, detailed organization chart to be provided as supporting information in the hard copy submission: <ul style="list-style-type: none"> <li>- For firm/entity submitting for pre-qualification</li> <li>- For parent company, JV or Association showing relationship</li> </ul>					
24. Principals of the Firm:					
Name	Position in the Firm	Specialization	Years with Firm	Education	Remarks
25. Construction Capability – Construction / Rehabilitation works for Road Works Repair / maintenance / rehabilitation works for Bridges and Underpasses <input type="checkbox"/> Repair / maintenance / rehabilitation works for Roads & Highways <input type="checkbox"/> Repair / maintenance / rehabilitation works for Storm Drainage Systems <input type="checkbox"/> Other (specify) ..... <input type="checkbox"/>					
26. Support facilities: Provide details on your offices, equipment, computing facilities (hardware & software) etc. in Qatar, the GCC countries and your home office <u>Office Space:</u> m <sup>2</sup> Equipment: (photocopying machines, printers, plotters, scanners, print shop facilities, technical presentation facilities, etc.)					
Computer Licensed Software Provide details of the software available in your offices for each of the described types of works					
Description	Software, including version number / date				
Planning & Scheduling					
Cost Management					
Contract Management					
Other					

**Communication Facilities**

Provide details of the communication facilities available in your offices for each of the items

Item	Description
E-mail	
Fax	
Web site	

27. Working Language(s)     Arabic         English  
Other (specify)  
.....

28. Firm's Memberships of Professional Associations

Professional Association	Acronym	Type of Membership	Member Since (state year)

29. Corporate Organization Chart to be provided as supporting information in the hard copy submission, indicating the position of the office or department which will be handling this project.

30. Familiarity with / experience in using FIDIC General Conditions of Contract (Red Book) for Construction, 1999:

Yes /  No

Familiarity with / experience in using FIDIC General Conditions of Contract (Yellow Book) for Plant Design & Build.

Yes /  No

**SCHEDULE 2**

**HUMAN RESOURCES**

**Schedule 2: Human Resources**

31. **Staff Profile:** In the table below, report the total number of professionals of every discipline and the total number of technicians / CAD operators / laborers and administration / support staff employed by the Company / Firm / JV in Construction in all locations (Company offices and sites)

Staff Profile	Maximum Number of Staff at Present				
	Qatar	GCC	Other Middle East	Other (Int'l)	Total
Professionals (provide listing below e.g. Civil Engineer, Civil Engineer (construction) etc.)					
-					
-					
-					
-					
-					
-					
-					
-					
-					
-					
-					
-					
-					
Total Professionals					
Technicians, Supervisors, Foremen, Quantity Surveyors / Land Surveyors, Draftspersons / CAD Operators					
Labourers Skilled Labourers Unskilled					
Administration staff					
Total other than professionals					

32. Curriculum Vitae (CV) to be provided as supporting information in the hard copy submission of Key Professionals involved in the Transport Sector (as per the following form and as per the main headings of item 36). CV's provided shall be a representative selection, sufficient to demonstrate your understanding of this project quality requirement.

CV page 1: (information required should not exceed one page)

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Name of Firm:

Name of Staff:

Profession:

Date of Birth:

Years with Firm:           - Permanent: -----  
                                  - Part-time:       -----

Nationality(ies):

**Key Qualifications:** (State fields of expertise and outline most pertinent experience and training. Describe degree of responsibility within the firm and on relevant assignments)

**Education:** (Give degree, specialization, university and graduation year. Start with most recent degrees)

**Employment and Experience Record:** *In descending chronological order (starting with most recent), list all positions held, giving dates, position titles, names of employing organizations, and locations of assignments, include types of activities performed.*

*Assignments / employment pertinent to Roads, Bridges and Infrastructure should be highlighted in Italic or Bold fonts*

This section to be reported at the end of the CV

LANGUAGES	SPEAK			READ			WRITE		
	Excellent	Good	Fair	Excellent	Good	Fair	Excellent	Good	Fair
Arabic:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (specify) -----	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**SCHEDULE 3**

**PLANT AND EQUIPMENT**

**33. Construction Plant and Equipment:** Complete the following table for each of the types of equipment owned by the company.

**33.1 – Plant / Equipment**

Type	Year of Manufacture	Number (total)	Remarks
<b>Traffic Diversion Equipment:</b>			
1. All traffic control items			
2. Complete traffic diversion equipment			
<b>Bridge Work:</b>			
1. Gantry Crane			
2. Mobile Crane (150T)			
3. Other Crane			
<b>Road Work:</b>			
1. Bulldozers (size) / Excavators			
2. Asphalt Plants (<100T/HR capacity)			
3. Asphalt Plants (=100T/HR capacity)			
4. Shovels			
5. Graders			
6. Vibratory Tandem Roller (8 & 12 ton)			
7. Material Transportation Trucks			
8. Water Tankers			
9. Hoe Ram			
10. Asphalt Milling Machine			
11. Scrapers			
12. Asphalt Cutting / Sawing Machines			
13. Dump Trucks (state capacity in Cu.M)			
<b>Others:</b>			
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
<b>TOTAL NO. OF PLANT AND EQUIPMENT:</b>			



### 33.2 – Plant Maintenance Facilities

❖ Do you possess your own equipped workshop / garage with a devoted manpower?	<input type="checkbox"/> Yes / <input type="checkbox"/> No
❖ Do you own mobile repair / service facilities?	<input type="checkbox"/> Yes / <input type="checkbox"/> No

**SCHEDULE 4**

**CAPABILITY AND RELEVANT EXPERIENCE**

**Schedule 4: Relevant Repair/Rehabilitation/Construction Capability and Experience**

34. Years of experience in: (Details to be given in Sub-Sections 36 & 37 below)	Qatar	GCC	Other (Middle East)	Other (International)
Overall:	_____	_____	_____	_____
In Highways Construction:	_____	_____	_____	_____
In Bridges Construction:	_____	_____	_____	_____

35. A Capability: (Confirm involvement in the last 5 years by ticking the relevant box(es)  
Construction Category :

	Qatar	GCC	Middle East	Other (Int'l)
<b>o Road Repair / Rehabilitation</b>				
- Remove / replace traffic signs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Remove / replace sidewalk & curb stones	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Remove / replace asphalt pavement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Replace gantry guide sings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Pavement / Road marking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Subgrade stabilization	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Street lighting repairing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>o Bridge Repair/ Rehabilitation</b>				
- Expansion joint repairing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Epoxy injection technique	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Reinforced concrete jacketing technique	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Protective painting	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Storm water drainage system repairing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Other (please specify)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>o Design</b>				
- Shop drawings / As-built drawings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
- Bar Bending Schedules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**COMPLETED CONSTRUCTION AND REPAIR WORKS FOR ROADS PROJECTS**

36. Report below projects that best illustrate your recent construction relevant to the construction of bridge and road projects regarding value and scope to be sorted by decreasing order of completion date:

Sl. No.	Project Title and Description	Rehabilitation Contract Yes / No	Client	Brief Scope of Work	Construction Cost in QRs.	Start – End Dates	Client Certificate* Yes / No
1.							
2.							
3.							
4.							
5.							
7.							
8.							

- A copy of Client Certificate to be provided as supporting information in the hard copy submission

**PROJECTS IN PROGRESS, INCLUDING PROJECTS AWARDED BUT NOT YET STARTED**

37. Report below projects that best illustrate your recent construction relevant to the construction of bridge and road projects regarding value and scope to be sorted by decreasing order of completion date:

Sl. No.	Project Title and Description	Rehabilitation Contract Yes / No	Client	Brief Scope of Work	Construction Cost in QRs.	Start – End Dates	% Completion to date
1.							
2.							
3.							
4.							
5.							
7.							
8.							

**SCHEDULE 5**

**QUALITY MANAGEMENT**

**Schedule 5: Quality Management / Quality Control**

38. Do you have individuals dedicated to your Quality Assurance Program? If so, a copy of the organization chart is to be provided as supporting.		
39. Do you have a formally documented Quality Control / Assurance System?	Yes /	No
40. Do you have a QA Manual?	Yes /	No
41. ISO or other Accreditation / Certification:		
- Are you currently registered under ISO	Yes /	No
- If Yes, a copy of the registration is to be provided as supporting information in the hard copy submission.		
- If No, do you plan to register?	Yes /	No
- If yes, when?		

**SCHEDULE 6**

**HEALTH, SAFETY & ENVIRONMENT**



## HSE POLICY & CERTIFICATION

Schedule 6: Health, Safety & Environment			
	<b>Please tick in each box as appropriate to indicate whether or not the company has the following information. Where a 'yes' is indicated please provide supporting information in the hard copy submission, such as certificates or written reports or abstracts from published company documents.</b>	<b>YES</b>	<b>NO</b>
42.	Is your company Safety Management System (SMS) certified to ISO 18001:2007? If 'yes' provide details of the scope of the certification and a copy of your current certificate.		
43.	If you answered "no", at 43 does the company intend to establish such a system? If 'yes' provide details of when.		
44.	Is your company Environment Management System certified to ISI 14001:2004? If 'yes' provide details of the scope and a copy of your current certificate.		
45.	If you answered "no", at 46 does the company intend to establish such a system? If 'yes' provide details of when.		

## **SCHEDULE 7**

## **INSURANCES**

**Schedule 7 - Insurances**

No.	Provide details of your existing policies for the following:	Please tick as appropriate	
46.	<p><b>Public Liability</b></p> <p>Insurers Name _____</p> <p>Policy No. _____ Expiry Date: _____</p> <p>Limit of Cover _____</p> <p>Amount of Excess _____</p> <p>Does cover include liability arising out of the following?</p> <ul style="list-style-type: none"> <li>(a) Defective products</li> <li>(b) Fire &amp; Explosion</li> <li>(c) Removal or Weakening of support</li> <li>(d) Indemnity to any Principle</li> <li>(e) Liability for acts of subcontractors, self-employed persons, labor masters and their employees</li> <li>(f) Liability arising out of the use of mechanically propelled plant as a tool of trade.</li> </ul>		
		YES	NO
47.	<p><b>Employer's Liability</b></p> <p>Insurers Name _____</p> <p>Policy No. _____</p> <p>Limit of Cover _____</p> <p>Amount of Excess _____ Expiry Date: _____</p> <p>Does cover include liability arising out of the following?</p> <ul style="list-style-type: none"> <li>(a) Indemnity to any Principle</li> <li>(b) Liability for acts of subcontractors, self-employed persons, labor masters and their employees</li> </ul>		
		YES	NO

48.	<p><b>Contractors "All Risk"</b></p> <p>Insurers Name _____</p> <p>Policy No. _____ Expiry Date: _____</p> <p>Limit of Cover _____</p> <p>Amount of Excess _____</p> <p>Does cover include liability arising out of the following?</p> <p>(a) Permanent and temporary works, materials, plants, tools, equipment and temporary buildings and their contents</p> <p>(b) Is cover on all "all risks" basis</p> <p>What is the limit for any one:</p> <p>Site _____ Building / Contract _____</p>		
		YES	NO
49.	<p><b>Professional Indemnity</b></p> <p>Insurers Name _____</p> <p>Policy No. _____ Expiry Date: _____</p> <p>Limit of Cover _____</p> <p>Amount of Excess _____</p> <p>Are there any specific exclusions / conditions other than those normally applicable to this class of cover?</p>		

**SCHEDULE 8**

**PLANNING AND SCHEDULING**

Schedule 8 – Planning And Scheduling			
No.	Subject	Please tick as appropriate	
		YES	NO
50.	Do you have a separate planning / scheduling department? If “Yes”, a copy of the organization structure is to be provided as supporting information in the hard copy submission.		
51.	In managing a Project do you develop all or any of the following: (a) Critical Path Networks (b) Bar Chart Schedules (c) Report Showing i. Planning ‘S’ Curves and Cash Flow forecast ii. Productivity Curves iii. Weekly & Monthly Progress		

**SCHEDULE 9**

**FINANCIAL STATUS**

Schedule 9: Financial Status			
52. Paid up Capital in Qatari Riyals (QR): <i>(of the Firm or Entity submitting for pre-qualification, not of the Mother Company or Holdings)</i> .....			
53. Annual turnover in QR for the following three (3) years:			
	2012	2011	2010
Generated from works:	.....	.....	.....
54. Copies of comprehensive annual financial report / statements for the last three (3) fiscal years, issued by a certified audit company, are to be provided as supporting information the hard copy submission.			
55. Bank information:			
Bank name:			
Branch:			
Street address:			
Contact person:			
Phone No.:			
Fax No.:			
E-mail:			



## **SCHEDULE 10**

## **STATEMENTS**

**Schedule 10: Statements**

56. Statement of Good Standing:

I, the undersigned ----- in the capacity of -----  
----- of the consulting /Contracting firm ----- certify that the Firm I represent:

1. is not bankrupt or being wound up, does not have its affairs administrated by the court, does not have suspended activities, or is not in any analogous situation arising from a similar procedure;
2. is not involved in any prohibited activities, and that no disqualification exists which would restrict our power to participate in an invitation to tender;
3. is not the subject of proceedings for a declaration of bankruptcy for an order for compulsory winding up or administration by the court or for an arrangement with creditors or of any other similar proceedings;
4. has not been convicted of an offence concerning its professional misconduct by a judgment which has force of res judicata;
5. has not been guilty of grave professional misconduct proven by any means which the contracting authorities can justify;
6. where applicable, has fulfilled obligations relating to the payment of taxes and social security contribution in Qatar, in accordance with the legal provisions in force;
7. is not guilty of serious misrepresentation in supplying the information required by the contracting authorities for participation in an invitation to tender or a contract;
8. has not been declared seriously in the wrong with respect to carrying out any contract, for failure to respect its contractual obligations
9. is not in breach of any contract;

Signed by: .....

In the capacity of: .....

Duly authorized to sign for and on behalf of:(Company/Joint Venture/Association)

Signature .....

57. Statement of Potential Conflicts of Interest

58. List the current and previous (during the past 5 years) litigations, claims and arbitration resulting from your operations. Give details of Basis of Claim, Amount Claimed, Amount Awarded, Method of Resolution.

## **SCHEDULE 11**

### **SUPPLEMENTARY DOCUMENTATION**



**APPENDIX A**

**CHECKLIST OF DOCUMENTS SUBMITTED**

