###### EF 1. Eligibility Documents Submission Form



*[Letterhead]*

*[Date]*

The Bids and Awards Committee – Consulting Services

Bases Conversion and Development Authority

2/F Bonifacio Technology Center

31st Street, corner 2nd Avenue, Bonifacio Global City

Taguig City

Ladies/Gentlemen:

In connection with your Request for Expression of Interest dated *[Insert date]* for the Consulting Services for the Construction Management and Supervision (CMS) of BCDA Iconic Building Project, *[Name of Consultant]* hereby expresses interest in participating in the eligibility and short listing for said project and submits the attached eligibility documents in compliance with the Eligibility Documents therefore.

In line with this submission, we certify that:

1. *[Name of Consultant]* is not blacklisted or barred from bidding by the GOP or any of its agencies, offices, corporations, or LGUs, including foreign government/foreign or international financing institution whose blacklisting rules have been recognized by the Government Procurement Policy Board; and
2. Each of the documents submitted herewith is an authentic copy of the original, complete, and all statements and information provided therein are true and correct.

We acknowledge and accept BCDA’s right to inspect and audit all records relating to our submission irrespective of whether we are declared eligible and short listed or not.

We further acknowledge that failure to sign this Eligibility Submission Form shall be a ground for our disqualification.

Yours sincerely,

*[Signature over printed name of Authorized Signatory]*

*[Title]*

###### EF 2. Statement of All On-Going and Completed Government and Private Contracts, Including Contracts Awarded But Not Yet Started

*[Letterhead]*

*[Date]*

The Bids and Awards Committee – Consulting Services

Bases Conversion and Development Authority

2/F Bonifacio Technology Center

31st Street, corner 2nd Avenue, Bonifacio Global City

Taguig City

Ladies/Gentlemen:

In compliance with the eligibility requirements of the Bids and Awards Committee – Consultancy Services of the Bases Conversion and Development Authority for the bidding of the Consulting Services for the Construction Management and Supervision (CMS) of BCDA Iconic Building Project, we certify that *[name of bidding firm]* has *[state applicable statement*: on-going and completedgovernment and private contracts, including awarded but not yet started*]*, as enumerated in EF 3. Summary of Projects.

Sincerely,

*[Signature over printed name of Authorized Signatory]*

*[Title]*

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **EF 3. Summary of Projects** | | | | | | | | | | |
| No.1 | Project Name & Location | Project Description | Client | Type of Consulting Service | Contract Amount² | If JV Partner, Contract Amount for Consultant's Involvement (if applicable) | Part of Contract Amount for Consultant's involvement in Detailed Architectural and Engineering Design (if applicable)3 | Date of Contract Award | Contract Period4 | Proof of Undertaking5 |
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|  |  |  |  |  |  | ¹ Indicate Project No. as shown in EF 4. Consultant's References. | |  |  |  |
| Certified by: | |  |  |  |  | ² In Philippine Peso. |  |  |  |  |
|  |  |  |  |  |  | ³ If Consulting services for CMS is just part of the required services of the contract, state how much for JVAs, state how much | | | | |
|  |  |  |  |  |  | is the subcontracted amount allocated for consulting services for this contract, in Philippine Peso. | | | |  |
| *[Signature over printed name of Authorized Representative]* | | | | | | ⁴ State the start and completion dates of the contract. | |  |  |  |
| *[Title]* | |  |  |  |  | ⁵ Certificate of Completion or Acceptance or valid proof of final payment issued by the client | | |  |  |
| *[Name of Bidding Firm]* | | |  |  |  | in case of completed contracts. Notice of Award or Notice to Proceed or signed contracts for | | | |  |
|  |  |  |  |  |  | on-going contracts and for contracts awarded but not yet started. | |  |  |  |

**EF 4. Consultant’s References**

**Relevant Services Carried Out That Best Illustrate Qualifications**

*[Using the format below, provide information on each contract, whether similar or not similar in nature and complexity to the contract to be bid, for which your firm/entity, either individually, as a corporate entity, or as one of the major companies within an association, was legally contracted].*

Project No. *[State numerical order starting with number 1]*

|  |  |  |
| --- | --- | --- |
| Name of Contract: | | Country: |
| Location within Country: | | Professional Staff Provided by Your Firm/Entity(profiles): |
| Name of Client: | | No of Staff: |
| Address: | | No of Staff-Months; Duration of Project: |
| Start Date (Month/Year): | Completion Date (Month/Year): | Approx. Value of Services (in PhP): |
| Name of Associated Consultants, if any: | | No of Months of Professional Staff Provided by Associated Consultants: |
| Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed: | | |
| Narrative Description of Project: | | |
| Description of Actual Services Provided by Your Staff: | | |

Consultant’s Name:

**Important Note:** Applicable supporting documents to substantiate undertaking shall be provided during the submission of Technical Proposal. Only those contracts with supporting documents will be considered for evaluation.

|  |  |  |  |  |  |  |  |  |
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| **EF 5. Summary of CVs** | | | | | | | | |
|  |  |  |  |  |  |  |  |  |
| No. | Name of Key Staff | Nominated Position | Registered Profession1 | Highest Educational Attainment2 | No. of Trainings Relevant to Profession3 | | Over-all Work Experience4 | Number of Projects Undertaking related to CMS of buildings and other related structure projects |
| Local | Foreign |
| 1 |  | Team Leader/ Project Manager |  |  |  |  |  |  |
| 2 |  | Sr. Resident Engineer |  |  |  |  |  |  |
| 3 |  | Sr. Structural Engineer |  |  |  |  |  |  |
| 4 |  | Sr. Architect |  |  |  |  |  |  |
| 5 |  | Sr. Landscape Architect |  |  |  |  |  |  |
| 6 |  | Sr. Electrical Engineer |  |  |  |  |  |  |
| 7 |  | Sr. Mechanical Engineer |  |  |  |  |  |  |
| 8 |  | Sr. Facade Specialist |  |  |  |  |  |  |
| 9 |  | Sr. Materials Engineer |  |  |  |  |  |  |
| 10 |  | Sr. Fire and Safety Specialist |  |  |  |  |  |  |
| 11 |  | Sr. Quantity/Cost/Specification Specialist |  |  |  |  |  |  |
| 12 |  | Sr. Building Information Modelling Specialist |  |  |  |  |  |  |
| 13 |  | Sr. Safety Officer |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

Certified by: 1 Eligible bidder shall provide proof of professional registration during the submission of Technical Proposal

*[Signature over printed name of authorized representative]* 2 Eligible bidder shall provide proof of highest educational attainment during the submission of Technical Proposal

*[Title]* 3 Eligible bidder shall provide proof of trainings undertaken during the submission of Technical Proposal

4 State total number of years for work experience.

**EF 6. Format of Curriculum Vitae (CV) for Proposed Professional Staff**

Proposed Position:

Name of Firm:

Name of Staff:

Registered Profession:

Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years with Firm: Current Position in the Firm:

**Education**

*[Summarize college/university and other specialized education, giving names of schools, dates attended, and degrees obtained using the matrix below]*

|  |  |  |
| --- | --- | --- |
| College/University | Degree/Title Obtained | Inclusive Dates |
|  |  |  |
|  |  |  |

**Trainings/Seminars**

*[Summarize the trainings, seminars and workshops undertaken, including those conducted by the nominated key staff, using the matrix below]*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title/Description | Conducted by | Inclusive Dates | Venue | Involvement\* |
|  |  |  |  |  |
|  |  |  |  |  |

\*Such as participant, speaker or trainer

**Completed projects related to Construction Management and Supervision of buildings and other related structures**

*[Provide outline of projects undertaken using the matrix below]*

|  |  |  |  |
| --- | --- | --- | --- |
| Title/Description | Client | Position | Completion Date |
|  |  |  |  |
|  |  |  |  |

**On-Going Projects**

*[Provide outline of on-going projects using the matrix below]*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Title/Description | Client | Position | Start Date | End Date |
|  |  |  |  |  |
|  |  |  |  |  |

**Memberships in Professional Societies**

*[Give an outline of memberships in professional societies using the matrix below]*

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Society/Commission | Date of Conferment/ Registration | License/Professional Number | Validity Date |
|  |  |  |  |
|  |  |  |  |

**Languages**

*[Using the format below, indicate proficiency of languages familiar with proficiency whether excellent, good, fair, or poor in speaking, reading, and writing]*

|  |  |  |  |
| --- | --- | --- | --- |
| Language | Proficiency | | |
| Speaking | Reading | Writing |
|  |  |  |  |
|  |  |  |  |

**Employment Record:**

*[Starting with present position, list in reverse order every employment held by nominated staff. List all positions since graduation, giving dates, names of employing organizations, titles of positions held, and locations of projects. Indicate relevant work experience of staff in his/her nominated position. For experience in last ten years, also give types of activities performed and client references, where appropriate]*

**Certification:**

I, *[full name of proposed professional staff],* certify that to the best of my knowledge and belief, these data correctly describe me, my qualifications, and my experience.

I Further commit that I shall work for the Consulting Services for the Construction Management and Supervision (CMS) for the BCDA Iconic Building as *[nominated position]* of *[name of bidding firm]* once awarded the contract..

Date:

*[Signature over printed name of nominated key staff]*

Date:

*[Signature over printed name of authorized representative of the firm]*

**Important Note:** Applicable documents to substantiate professional registration, educational attainment and trainings undertaken shall be provided during the submission of Technical Proposal. Only those attainments and undertakings with supporting documents will be considered for evaluation

###### EF 7. Statement of Consultant Specifying its Nationality and Confirming that those who will Actually Perform the Services are Registered Professionals

*[Letterhead]*

*[Date]*

The Bids and Awards Committee – Consulting Services

Bases Conversion and Development Authority

2/F Bonifacio Technology Center

31st Street, corner 2nd Avenue, Bonifacio Global City

Taguig City

Ladies/Gentlemen:

*[name of bidding firm]* is issuing this statement in compliance with the requirements of the Bases Conversion and Development Authority (BCDA) Bids and Awards Committee for Consulting Services, that the nationality of members of the Project Team are indicated below and that they can actually perform the service in accordance with the eligibility requirements.

Proposed Project Team for the project:

|  |  |  |
| --- | --- | --- |
| Name | Assignment | Nationality |
|  | Team Leader/ Project Manager |  |
|  | Sr. Resident Engineer |  |
|  | Sr. Structural Engineer |  |
|  | Sr. Architect |  |
|  | Sr. Landscape Architect |  |
|  | Sr. Electrical Engineer |  |
|  | Sr. Mechanical Engineer |  |
|  | Sr. Facade Specialist |  |
|  | Sr. Materials Engineer |  |
|  | Sr. Fire and Safety Specialist |  |
|  | Sr. Quantity/Cost/Specification Specialist |  |
|  | Sr. Building Information Modelling Specialist |  |
|  | Sr. Safety Officer |  |

*[name of bidding firm]* issues this statement in accordance with Clause 2.1.a.v of the eligibility requirements for the project.

Sincerely,

*[Signature over printed name of Authorized Signatory]*

*[Title]*

**EF 8. Format of Curriculum Vitae (CV) of the Firm**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Name of Firm:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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No. of Years of Operation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Years of Professional Experience: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ years

Membership in Professional Societies:

|  |  |
| --- | --- |
| **Year** | **Professional Society** |
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Certification

I, the undersigned, certify that to the best of my knowledge and belief, these data correctly describe the firm, its qualifications and experiences.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature over Printed Name Signature over Printed Name

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Signature over Printed Name of Authorized Representative of the Firm

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_