



TOBAGO HOUSE OF ASSEMBLY

PROCUREMENT CONTROL OFFICE

**Pre-Qualification
Questionnaire**

15-PCO-PQ-2017

A. GENERAL INFORMATION

Date: _____ **Time Submitted:** _____

Name of Company/Business:

Date of Registration/Incorporation: _____

Company Registration/Incorporation #: _____

Company Address: _____

Telephone #: _____ **Fax:** _____

Mobile # 1: _____ **Mobile # 2:** _____

Email Address: _____

Name of Key Respondent: _____

DIRECTORS (Incorporation)

NAMES	CONTACT #
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**CHECKLIST OF STATUTORY AND OTHER DOCUMENTS YOU PROVIDED AND
CAN PROVIDE UPON REQUEST**

Please Tick (✓) in the appropriate column

No	DOCUMENT	YES	NO	
	Statutory			
1	Valid Certificate of Business Registration from the Registrar General of Trinidad & Tobago			Mandatory with Application
2	Certificate of Company Association of Incorporation from the Registrar General of Trinidad & Tobago.			Mandatory with Application
3	Valid Board of Inland Revenue Certificate (BIR)			
4	Valid Value Added Tax Certificate (VAT)			
5	National Insurance Scheme Registration Certificate (NIS)			
6	Any Letter of Exemption from Statutory Bodies			
7	Joint Venture Agreement (where applicable)			
8	Organizational Chart			
9	Curriculum Vitae (CV) of key Personnel			
10	At least three (3) client references			
11	Signed Audited Financial Statements			
12	Valid Banker's Letter of indebtedness			
13	Workmen's Compensation Insurance Certificate			
14	Valid/Special Licenses and Permits (as applicable)			
15	Risk Management and Safety Policy and Procedures			
16	Environmental Management Policy and Procedures			
17	Quality Assurance System Policy/Procedures			
18	Company Profile			
19	Corporate Social Responsibility Policy (CSR)			

1. What level of spend you wish to be Pre-qualified for? Please Tick (√)
You can only select one (1) level.

- 1. Mega - 4,000,000 +
- 2. Extra Large - 1,001,000 – 3,999,000
- 3. Large - 501,000 - 1,000,000
- 4. Medium - 251,000 – 500,000
- 5. Small Large - 101,000 – 250,000
- 6. Small Medium - 51,000 – 100,000
- 7. Small Small - 25,000 – 50,000

NO	LEVEL SPEND	SPEND	MIN. YRS EXP	COMPANY REG.	EVIDENCE OF FINANCIAL CAPABILITY	MIN. JOBS OF SIMILAR NATURE & COST	MANDATORY STATUTORY DOCUMENTS (NIS, VAT, BIR, AUDITED FINANCIAL STATEMENTS)	MINIMUM NUMBER OF REFERRALS.
1	MEGA	4,000 +	10 YRS	MANDATORY	MANDATORY	4	MANDATORY	3
2	EXTRA LARGE	1,001,000 – 3,999,000	5 YRS	MANDATORY	MANDATORY	3	MANDATORY	3
3	LARGE	501,000 – 1,000,000	3 YRS	MANDATORY	MANDATORY	3	MANDATORY	2
4	MEDIUM	251,000 – 500,000	2 YRS	MANDATORY	ON REQUEST	2	ON REQUEST	2
5	SMALL LARGE	101,000 - 250,000	2 YRS	MANDATORY	ON REQUEST	1	ON REQUEST	1
6	SMALL MEDIUM	51,000 – 100,000	1 YR	MANDATORY	ON REQUEST	1	ON REQUEST	0
7	SMALL SMALL	25,000 – 50,000	6 MTHS	MANDATORY	ON REQUEST	1	ON REQUEST	0

2. Are you an employee of the THA?

Yes

No

If yes, please give details _____

3. Have you ever been contracted by the THA?

Yes

No

If yes, please give details _____

4. Do you currently have a contract with the THA? Yes

No

If yes, please give details _____

5. How many years' experience do you possess in your Company/Business?

20 Years +

10 – 15 Years

5 – 9 Years

1 – 4 Years

Additional comment:

6. State what category of service/works/goods and/or consultancy you specifically offer _____

B. BANKING INFORMATION

Bank's Name _____

Branch _____

Bank's Address _____

Bank's contact number _____

Name of Personal Banker/Bank Contact (if available)

C. RELATIVES

Do you have any relatives currently employed with the THA? If yes, please state relationship? Yes No

Relationship _____

D. OTHER INQUIRIES

7. Have you ever been charged for any criminal offenses?

Yes No

If yes, please give detail _____

8. Do you use your business to conduct money laundering and other financial illegal activities? Yes No

9. Have you or any member of your staff ever been investigated by law enforcement or other agencies for fraud, money laundering and other illegal activities in the course of your business operations? Yes No

10. Are you a bona fide registered/incorporated company with the Registrar General of Trinidad and Tobago? Yes No

11. Do you have any matters pending in the court that involves you or your business operations? Yes No

12. Do you support any local, regional or international terrorist organization? Yes No

13. Do you possess any special licenses that are critical to your business operations? If yes, please give details? Yes No

Provide Details

E. KEY PERSONNEL

No	Names & Position in Company	Resume /Certificates Attached
1		Yes <input type="checkbox"/> No <input type="checkbox"/>
2		Yes <input type="checkbox"/> No <input type="checkbox"/>
3		Yes <input type="checkbox"/> No <input type="checkbox"/>
4		Yes <input type="checkbox"/> No <input type="checkbox"/>
5		Yes <input type="checkbox"/> No <input type="checkbox"/>

F. LIST AND VALUE OF JOBS/CONTRACTS OF SIMILAR NATURE DONE IN THE PAST 2 YEARS

No.	Jobs/Services/Supplies	Value
1		
2		
3		
4		

G. If you are awarded a contract will you be sub-contracting to a third party?

Sub-contracting All

Sub-contracting Part

Not Sub-contracting

H. LIST OF REFERRALS (Written testimonials will be an asset)

Name	Contact information
	Tel. #: Mobile: Email Address:
	Tel. #: Mobile: Email Address:
	Tel. #: Mobile: Email Address
	Tel. #: Mobile: Email Address

I. LIST OF EQUIPMENT/MACHINERY/TOOLS

No	Name	Quantity	Model/Serial #
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

DECLARATION OF TRUTH

ANY MATERIAL OR FALSE STATEMENT OR OMISSION MADE IN CONNECTION WITH THIS APPLICATION IS SUFFICIENT CAUSE FOR REJECTION OF PREQUALIFICATION DOCUMENTS, REVOCATION OF A PRIOR APPROVAL, INITIATION OF SUSPENSION OR DEBARMENT PROCEEDINGS WITHIN THE CONTEXT OF THIS PREQUALIFICATION.

I _____ (full name), swear or affirm that I am _____ (title) and an authorized representative of the applicant business/company _____ (name)

and that I have read and understood all of the questions in this pre-qualification instruction and questionnaire and that all of the foregoing information and statements submitted in this application and its attachments and supporting documents are **true** and **correct** to the best of my knowledge, and that all responses to the questions are full and complete, omitting no material information.

I recognize that the information submitted in this application is for the purpose of pre-qualifying my business/company into the Tobago House of Assembly. I understand that THA may, by means it deems appropriate, determine the accuracy and truth of the statements in the application, and I authorize such agency to contact any entity named in the application, banking institutions, credit agencies, contractors, clients, and other certifying agencies for the purpose of verifying the information supplied and determining the named business' eligibility.

I affirm that my business/company _____ (name) or any of its directors/officers are not insolvent, in receivership, bankrupt or being wound up. Our affairs are not being administered by a court or judicial officer, our business activities have not been suspended and we are not the subject of legal proceedings for any of the forgoing. I attest that the qualifications attached are made to be true. I agree to provide written notice to the THA of any material change in the information contained in the original application within 30 calendar days of such change. I acknowledge and agree that any misrepresentations in this application or in records pertaining to a contract or subcontract will be grounds for denial or immediate revocation of pre-qualification. I declare, under penalty of perjury, that the information provided in this application and supporting documents are true and correct.

Name _____
BLOCK LETTERS

Signature _____

Position _____ **Date** _____

Affix Company/Business Stamp Here