

## BIDDER'S QUESTIONNAIRE - ACTED Libya

T/14DPE/H94/QIP/BENGHAZI/QEEEQT/PRG/10062019/003

1/14DPE/H94/QIP/BENGHAZI/OFFEQ1/	PRG/10002019/003		
		PART I: INFORMATION	ON
A. Company Details and Genera			
Name of Company		Trading As	
Address (headquarters)		Telephone	
Zip Code (headquarters)			
City (headquarters)		E-mail address 1	
PO Box		E-mail address 2	
Country (headquarters)		Website address	
Parent Company or		Subsidiaries/ Associates/	
name of owner		Overseas Representative	
Sales Person's Name		Sales Person's Position	
Sales Person's phone		Sales Persons' E-mail	
Governance of the company: Chairma	nn, Vice-Chairman, Treasurer c	or Secretary of the Board of D	irectors or Board of Trustees
Name (as in passport or other government-issued photo ID)		Date of birth (mm/dd/yyyy)	
Government-issued photo Identification Document (ID) number		Type of ID	
ID country of issuance		Rank or title in organization	
Other names used (nicknames or pseudonyms not listed as "Name")		Gender (e.g. male, female)	
Current employer and job title:		Occupation	
Address of residence		Citizenship(s)	
Province/Region		E-mail address	
Is the individual a U.S. citizen or legal permanent resident?	Yes No	Professional Licenses – State Issued Certifications	
Management of the company: CEO, E	xecutive Director, Deputy Dire	ctor, President or Vice-President	dent
Name (as in passport or other government-issued photo ID)		Date of birth (mm/dd/yyyy)	
Government-issued photo Identification Document (ID) number		type of ID	
ID country of issuance		Rank or title in organization	
Other names used (nicknames or pseudonyms not listed as "Name")		Gender (e.g. male, female)	
Current employer and job title:		Occupation	
Address of residence		Citizenship(s)	
Province/Region		E-mail addresses	
Is the individual a U.S. citizen or legal permanent resident?	Yes No	Professional Licenses – State Issued Certifications	
Management of the company: Chief F	inance Officer or Chief Accoun	tant	
Name (as in passport or other government-issued photo ID)		Date of birth (mm/dd/yyyy)	
Government-issued photo		type of ID	
Identification Document (ID) number			

ID country of issuance					Rank or title	in organization						
Other names used (nicknown pseudonyms not listed as					Gender (e.g	g. male, female)						
Current employer and job	,				Occupation							
Address of residence					Citizenship(	(s)						
Province/Region					E-mail addr	esses						
-												
Is the individual a U.S. cit permanent resident?	tizen or legal	Yes	N	0		Il Licenses – d Certifications						
Company's staff & insura	nce				<u> </u>		<u>.                                    </u>					
No. Full Time Employees	:					verage work wa					_	
% of Men to Women:					Any employee(s) with relatives working with ACTED?				Yes	No		
No. of Children:						Legal minimum wage paid? Paid vacations are offered?				Yes	No No	
In what capacity? What are their ages?						working hours o	fforod?			Yes	No No	
	001/									Yes	No	
Name of insurance comp	•				Stall Covere	ed by health issu	rance?			Yes	No	
Description of the Compa	ariy 											
(multiple choices possible):	Manufa	cturing ing Company			Authorise	ed Agent ease Specify)	Trader					
Sector of Business												
(multiple choices possible):	Goods/S				Equipme Other (Pl	nt ease Specify)	Works					
Year Established:		-			Country of r							
Licence number:					Valid until:	egistration.						
Working languages:		English Arabic		French	1	Spanish Other (Please		Russi	an			
Technical documents available in:		English Arabic		French		Spanish Other (Please	-	Russi	an			
B. Financial Informat	ion											
VAT Number:					Tax Numbe	r·						
Bank Name:												
Bank Address:					Bank Account Number:							
Swift/BIC number:					Account Name: Standard Payment Terms:							
Has the company been a	uditad in the l	ant 2 venre			Yes No							
Has the company been a		•		A 111								
Please attach a copy of the Annual Value of Total Sa			it Annuai	or Audite	d Financiai F	кероп		Attache	<u>a</u>			
Year:	USD:		Year:		USD:		Year:		USD:			
Annual Value of Export Sales for the last 3 years Year: USD: Year:		USD: Year: USD:										
C. Experience												
Companie's recent busin	ess with ACTI	ED and/or o	ther Inter	national A	Aid Agencies	or United Natio	ns Agencies	s:				
Organisation	Contact	person	Phone	/E-mail	Goods/W	orks/Services	Value (U	ISD)	Year		Destination	7
1		J					1 3 ( 3	/				
2												
3												
——————————————————————————————————————	1						-					
4												
5	<u> </u>		<u> </u>		<u> </u>		<u> </u>					
What is your company's i	main area of e	expertise?										
What is your company's I		U		Nat	tional	Restricted to	(specify loca	itions):				
To which countries has you managed projects in the		exported an	id/or									
Provide any other informa	ation that dem											
company's qualifications and experience (eg. awards)  List any national or international Trade/Professional												
Organisations of which yo												
D. Technical Capability												
Type of Quality Assurance Certificate							Attach	ed				
Type of Certification/Qualification Documents							Attach					
International Offices/Representation												
List below up to 10 of the core Goods and/or Services your company sells:												
1)	JUIG GUUUS 8	unu/or Servi	oes your	company 6)	ociio.							
• ,				7)								

3) 8)						
4) 9) 5) 10)						
List the main assets of your company (trucks & heavy machines, heavy & valuable equipment, premises & wareho	uses, produc	tion sites etc.)				
1) 6)						
2) 7)						
3) 4) 9)						
5)						
E. Miscellaneous						
Does your company have an Environmental Policy? (Yes/No)	Yes	☐ No				
Does your company have an Ethical Trading Policy? (Yes/No)	Yes	No				
Does your company have an Anti-terrorist Policy? (Yes/No)	Yes	☐ No				
Is your company compliant with the EU General Data Protection Regulation (or equivalent)? (Yes/No)	Yes	☐ No				
If you answered yes to the above two questions, please attach copies of your policy:		Attached				
Has your company ever been bankrupt, or is in the process of being wound up, having its affairs administered by t		Yes				
has entered into an arrangement with creditors, has suspended business activities, is the subject of proceedings of these matters, or is in any analogous situation arising from a similar procedure provided for in national law?	☐ No					
If you answered yes,						
please provide details:						
Has your company ever been convicted of an offence concerning its professional conduct by a judgment which as force of res judicata?						
If you answered yes, please provide details:						
Has your company ever been guilty of grave professional misconduct proven by other menas?		Yes No				
If you answered yes,						
please provide details:  Has your company ever not fulfilled its obligations relating to the payment of social security contributions, or the payment of social security contributions, or the payment of social security contributions.	umant of					
taxes in accordance with the law of the country in which it is established, or with those of France, or those of the country in which it is established.	∐ Yes					
where the contract is to be performed?	No					
If you answered yes,						
please provide details:						
Has your company ever been the subject of a judgement which has the force of res judicata for fraud, corruption, it is a priority to a provide the subject of a judgement which has the force of res judicata for fraud, corruption, it	Yes					
in a criminal organisation or any other illegal activity?						
If you answered yes, please provide details:						
Has your company ever been declared to be in serious breach of contract for failure to comply with its contractual obligations,						
following another procurement procedure or grant award procedure financed by a donor country?	No					
If you answered yes, please provide details:						

Has your company ever been declared to be in serious breach of contract for failure to comply with its contractual obligations, following another procurement procedure or grant award procedure financed by a donor country?						
If you answered yes, please provide details:						
Has your company ever been in any dispute with any Governement Agency, the United Nations, or International Aid  Organisations (including ACTED)?						
If you answered yes, please provide details:						
Do you agree with terms of payment of 30 days?						
	Р	ART II: CERTIFICAT	ION			
writing. I also understand	t that the information provided in this form i that ACTED does not do business with con a, Sexual Exploitation and Abuse Protection	npanies, or any affiliates or su	ubsidiaries, which engage in a	ny practices that are in breach of		
Name:		Date:				
Title/Position		Place:				
E-mail address (for contact for verification purposes):		Signature:				
Phone number (for contact for verification purposes):		Company Stamp:				
Check list of supporti	ng documents	For	ACTED use only			
1) Trading license		Attached	Checked			
2) VAT registration/tax clearance certificate		Attached	Checked			
3) Company profile		Attached	Checked			
4) Proof of trading/dealership/agent		Attached	Checked			
5) Evidence of similar contracts		Attached	Checked			
6) References		Attached	Checked			
7) Particulars of CEO and key personnel		Attached	Checked			
8) Articles of Association & Certificate of incorporation		Attached	Checked			
9) Financial statements (latest)		✓ Attached	Checked			
10) Other (specify):		Attached	Checked			