

**APPLICATION FORM ACTED MOLDOVA**

Prequalification N° (filled in by ACTED): No. [P/67FUN/G4Z/DRA/MRA/CHS/PROG/19-02-2024](#)

Order ID (filled in by ACTED): OF/67FUN/G4Z/DRA/MRA/CHS/PROG/13022024-001

Date (filled in by Applicants):

**To be Filled by Bidder (COMPULSORY)**

<b>Company's Name</b> (as per registration documents)	
<b>Company Authorized Representative's Name</b> (as per registration documents or duly signed Power of Attorney)	
<b>Company Registration Number</b>	
<b>Registration body</b>	
<b>Company's mailing address</b> Shop/Office/Building No Street name City Governorate/province/district Country	
<b>Commercial representative for the application</b> (if different from authorized representative)	
<b>Phone contact number</b> Landline Mobile No	
<b>Email address</b>	

I undersigned (to be filled in by the Bidder) \_\_\_\_\_  
agree to provide ACTED, non-profit NGO, with items answering the following specifications, according to the general conditions and responsibilities that I engage myself to follow.





1. Please fill in the below human resources table as of 22/02/2024

	APPLICANT'S CAPACITY
NUMBER OF FULL TIME ENGINEERS	
NUMBER OF FULL TIME MANAGERS	
NUMBER OF FULL TIME SUPERVISORS	
NUMBER OF PLUMBER (WITH CERTIFICATE - OPTIONAL)	
NUMBER OF ELECTRICIAN (WITH CERTIFICATE-OPTIONAL)	
NUMBER OF JOINER (WITH CERTIFICATE-OPTIONAL)	
NUMBER OF MASON (WITH CERTIFICATE-OPTIONAL)	
NUMBER OF UNQUALIFIED WORKERS	

the company must present the diplomas of all the persons listed in this table.

2. Please fill in the below equipment table as of 16/02/2024

Please list your Company main relevant technical equipment/machinery (machine, equipment, premises & warehouses, trucks & heavy machines, production center, etc)

No	DESCRIPTION	LOCATION/ADDRESS	QUANTITY
1			
2			
3			
4			
5			

3. Have you worked with NGOs before?

☐ YES

☐ NO

If yes, please list them with detailed information:

evidence of positive past experience must be included in the tender documents

4. Have you worked on similar types of projects before?

☐ YES

☐ NO

If yes, please list them below with detailed information (if needed please provide separate list):

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evidence of positive past experience must be included in the tender documents





## 5. Contract Award History

*Please list the last similar contracts awarded to your company over the last 2 years*

No	PROJECT DESCRIPTION	LOCATION	PARTNER NAME	DURATION	PROJECT COST (USD)
1					
2					
3					
4					
5					

EVIDENCE OF POSITIVE PAST EXPERIENCE MUST BE INCLUDED IN THE TENDER DOCUMENTS

## 6. Annual turnover data for the last 24 months

YEAR	CONTRACT DESCRIPTION	TOTAL CONTRACT AMOUNT (CURRENT VALUE, US\$ EQUIVALENT)

## 7. Safety

The Applicant shall provide copies of all safety records and attendance to safety training programs.

Name of Applicant's Authorized Representative: \_\_\_\_\_

Authorized signature and stamp: \_\_\_\_\_

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

