

INFORMATION OF QUALIFICATION

1. Name of the Contractor :
2. Address of the Contractor's Office :
3. Contact Numbers : Office..... Mobile.....
4. ICTAD Registration Number : Grade.....
- : Specialty..... Expiry Date.....
5. Business Registration Number : Registered Date.....
6. VAT Registered Number :
7. Completed Project Details in Last 05 Years

Year	Name of the Project	Client	Value of Contract	Duration

8. Ongoing Projects Works

Year	Name of the Project	Client	Value of Contract	Duration	Current Situation

9. Available Construction Machineries and Equipment

Name of Machineries / Equipment	Capacity	Owned / Hired

10. Qualification and Experience Staff

Name	Position	Qualification	Experience

11. Availability of Minimum Credit Facility & Bank Account Details;

Rs..... Name of Bank and A/C

No.....

12. Audited Finance Report (Last Two Years)

13. Bank Statement of Last Six Month

14. Details given above are true and correct;

15. Financial Status * V.Good ☐ * Good ☐ * Poor ☐16. CRIB Report taken from Bank ☐

Date.....

Name and Signature of Contractor.....

17. Recommendation by;

.....
DGM (Project).....
DGM (Finance).....
Manager (HR)

18. Approved By;

Date.....

Chairman