Prescribed Format for Submission of Expression of Interest (EOI)

	(In case of Joint Venture, this Form to be completed by each partner of the JV)														
	Package No. : SD 51A														
	tle of real time survey and monitoring for community tracking										AIGAs, an	ıd			
1. I	1. Letter of Submission [Addressing Project Director, SUFAL Project, BFD]														
2. I	2. Firm's legal title:														
	3. Firm's registered and Head Office address:														
	4. Firm's year of registration (years in business):														
	(Year of Establishment/Years in business as per Trade License/Registration Certificate etc.) (Necessary Attachments: Copy of Company/Firm's Trade License, Registration Certificate etc.)														
										ertificate e	ic.)				
	 5. Firm/Company Background (General Information including Core Business) (Necessary Attachments: Brochure, Annual Report etc.) 6. Experience of the Firm in similar nature assignment successfully completed within last ten (10) years 														
													2.1		
	(List only those assignments for which the Firm was legally contracted by the Client/Procuring Entity as a firm or as one of the partner of joint venture.)														
or joint venture.)															
Name of			Brief	Role in the		Name and		Service	Value of Ser		vice	Man-M	onth Input		
the		Description		Assignment		address of		Duration	Total	No. of	Value of	Firm's	Partners'		
Assignment			of the Assignment	(Single Entity/		the client. Contact		(Start & End	Value	Partners (if Any)	Service Provided	Input	Input		
		1	(main	Lead		information		Dates)		(II I III)	by the				
		d	leliverables/			tner in for					Firm				
			Outputs)		V/JV reference		es.								
				partner)										1	
		1												-	
-		+												4	
		+													
	(Necessary Attachments: Details Description of the assignment supported by copy of Project Data Sheet (PDS), Contract														
	eement etc.		ional/Manage	erial s	taff of th	e Firm : (L	ist Fı	ıll time and	Part tim	e staff sepa	rately)				
7. List of Professional/Managerial staff of the Firm: (List Full time and Part time staff separately)															
SN			Name of		Position held in		Educational		Total Years of		No. of Years as Firm's		rm's		
			Professionals		the Firm		Qualification		Experience		Employee				
								. `							
8. Organizational & Financial Capability and capacity of the Firm:															
(i) Organizational Capacity, equipment and logistics of the Firm															
	a) Office Space (Area, Floor No. etc.):														
			port Staffs:					1							
	c) Description of Important Office Equipment and other logistics:														
	(ii) Financial capability of the firm (Turnover of last 3 years) a) 2019-20 (Up to present) :														
	b) 2018-19 :														
	c) 2017-18							:				*			
								<u> </u>							

