

ATTOCK PETROLEUM LIMITED

PRE-QUALIFICATION OF COMPANIES FOR LPG CONSULTANTS
(FOR CATEGORY S)

FORM NO: PQF (S)-001

Company Name: _____

Address: _____

Contact Person: _____ Designation: _____

Mobile: _____ Landline No: _____ E-Mail: _____

Fax: _____

NTN No: _____ GST No: _____ Provincial Sales Tax No: _____

(Punjab, Sindh, KPK)

APPLIED FOR: _____
(Please mention Category S)

Note: Please provide information/data related to the specific category you are applying for pre-qualification

Sr no	Description	Check List	Remarks
1	Type of Firm	Partnership <input type="checkbox"/> Proprietorship <input type="checkbox"/> Multinational <input type="checkbox"/> Public Limited <input type="checkbox"/> Private Limited <input type="checkbox"/>	
2	Head Office & Offices at other places with address & Phone No. <i>(Please attach List)</i>	No. of Offices: _____	
3	Number of cities/towns where services are being provided <i>(Please provide details)</i>		
4	Clientele <i>(Works/Jobs in hand, City, Amount, Date of Start, Date of completion, Up to Date% progress, Name of client (attach complete details with PO/Contracts)</i>		
5	Year Wise Average Turnover (Last 3 Years) in Pak (Rs.) / US \$		
6	Bank/Account financial statements for last three (03) years (Please attach detail)		
7	Experience in Subject Field <i>(Please attach complete work reference detail with proof) Job executed/in hand.</i>	Between 05 to 10 years <input type="checkbox"/> Between 10 to 15 years <input type="checkbox"/> More than 15 years <input type="checkbox"/>	

Signature and Stamp of the Contractor/Vendor/Firm

Date: _____

Sr no	Description	Check List	Remarks
8	After Sales Services	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9	Oil & Gas Companies, whom the contractor has worked with or providing services (Please attach detail)	No. of Companies: _____	
10	Machinery, T&P, Resources and other equipment owned by the company/firm (Please attach complete details)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
11	Safety Standards - Provision of all wearing equipment's for Protection - Is equipment Safe for Operations? - Is the team aware of Fire Hazard & its Protections? - Is the team aware of Electrical Hazards? - HSE Certification	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	
12	Client Reference letters for Relevant jobs (Enclosed Please)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13	Audited Financial Statement for last 3 years (Enclosed Please)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Note: Litigation / Arbitration if any. (Attach detailed list with causes)

Declaration:

It is stated that the above information being provided is true, un-hidden and accurate to the best of my knowledge and belief. It is further undertaken that in case of any misleading information provided, any consequences thereof due to such information shall entitle ATTOCK Petroleum Limited to stop processing or withdraw, delete, debar, blacklist at any stage and its decision shall be final.

Special Notes (if any)

Signature and Stamp of the Contractor/Vendor/Firm

Date: _____