

Diriyah Gate Development Authority

Design & Development Department

Pre-Qualification Questionnaire for Consultants

2020

16يوليو 2018

**829 KB**

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| **Part 1 - Introduction** |

As part of the Diriyah Gate Project (DG), Diriyah Gate Development Authority (DGDA) is taking the step to develop information guidance and soliciting information for evaluating and establishing consultant qualification.

DGDA requires interested consultants to establish a proof of their proficiency and responsibility through submitting a prequalification questionnaire, together with any requested supplemental information for the purpose of evaluating consultants.

The questionnaire will be comprehensively reviewed and evaluated by DGDA, taking into consideration the following aspects:

1. Relevant International and Local Experience.
2. Quality and Performance.
3. Timeliness of past performance.
4. Certification and awards,
5. Financials, Professional Indemnities, and Resources,
6. Health, Safety, and Environment performance,
7. Client references.

The above factors are the basis of rating and evaluating the consultants relative to the size /scope of the projects to which they will be qualified for.

The following would be considered grounds for disqualifying the applicant:

1. Incomplete or false information
2. Non-declaration of no conflict of interest
3. Non-submission of declaration duly signed and stamped
4. Failure to answer all questions
5. Failure to submit the requested documentation

**Instructions:**

1. All questions must be answered in English in the dedicated colored gray space. Write “NA” for questions that do not properly apply to your Company. This will not count against the consultant in any scoring process.
2. All answers must be typed and should be as complete as possible to ensure fair grading.
3. If additional space is required to answer any question, provide the answer on separate sheets at the end of this questionnaire. List any extra sheets in Section H. Where any supplementary information is provided, clearly cross reference the respective section number and heading.
4. Data provided are to be clearly and wholly related to the Company seeking pre-qualification.
5. If any data provided is for a subsidiary, J.V., parent, associate or other Company, you are to clearly state so in this form.
6. If this Company is, or intends to form, a Joint Venture (J.V.), or Consortium or other association of companies, all J.V. or Consortium partners, etc., must submit separate pre-qualification forms in addition to the joint pre-qualification form submitted by the J.V. or Consortium.
7. All pages must be stamped with the Company stamp.
8. Prequalification must be renewed annually 30 days prior to the expiration date through submitting a renewal questionnaire. If a renewal questionnaire is not received, a regular prequalification questionnaire must be submitted again.

**Return the completed form via email to** **ddtenders@dgda.gov.sa** **or electronic copy to be uploaded and submitted via link (i.e. WeTransfer).**

**Diriyah Gate Development Authority – Procurement Department**

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E-mail: ddtenders@dgda.gov.sa

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|  **(Part 2) Pre- Qualification Questionnaire** |

1. **General Information:**
2. Name of Company:

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1. Scope of service:

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1. Headquarters office address:

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1. Local KSA office address (if different from or in addition to 3):

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1. Name / Title of Primary Contact person:

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1. Address:

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1. E-mail:

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1. Telephone: Mobile: Fax:

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1. Name / Title of Secondary Contact person:

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1. Address:

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1. E-mail:

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1. Telephone: Mobile: Fax:

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1. **Commercial Information:**
2. CR Number / Registration Number:

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1. Attach copy of Registration Certificate:

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1. Date of Registration: Expiration Date:

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1. Registration Type:

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1. **Financial Information:**
2. Annual turnover of consulting work undertaken for each of the last four years and value of work projected for the current year:

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| --- | --- | --- | --- | --- | --- |
| **Region** | **Current (2019)** | **2018** | **2017** | **2016** | **2015** |
| Saudi Arabia |  |  |  |  |  |
| Other Countries |  |  |  |  |  |
| Total |  |  |  |  |  |

Provide a % estimate of the above values directly applicable to this scope of service

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Region** | **Current (2019)** | **2018** | **2017** | **2016** | **2015** |
| Saudi Arabia |  |  |  |  |  |
| Other Countries |  |  |  |  |  |
| Total |  |  |  |  |  |

1. Name and contact of director responsible for financial matters

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1. Provide evidence of your ability to submit professional indemnities and/or bank guarantees and/or parent company guarantees:

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1. Appointments

The following are non-negotiable in DGDA appointments:

* IP vested in DGDA
* DGDA has freedom of assignment, the consultant does not

Confirm agreement and/or comment as below:

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1. Provide details of all current insurances (professional indemnity, public liability, third party insurance) presently held by your Company along with their value and expiry date:

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| --- | --- | --- |
| **Insurance Type** | **Value** | **Expiry Date** |
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1. Indicate whether your Company has been or is the subject of any bankruptcy or insolvency proceeding or is subject to assignment for the benefits of creditors.

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1. Provide details of any pending law suits or claims in which you are directly involved.

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1. Has your Company failed to complete any appointment awarded to it? If so, why and when?

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1. Specify whether your Company ever had its employment terminated under the terms of an appointment for reasons other than the convenience of the client:

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1. Specify if there are any judgments/claims or suits pending or outstanding against your Company, or if there are any ongoing disputes (including formal legal proceedings or where the client has deducted or threatened to deduct money for poor performance). If yes, provide further details:

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1. Statement of no conflict of Interest. Does your Company have any association, directly or indirectly, with any member or employee of the client’s organisation?

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1. **Organization Structure and Qualifications:**
2. Organization type:

☐ Corporation

☐ Joint Venture

☐ Limited Liability Company

☐ Limited Collective Partnership

☐ Individual or Sole Proprietorship.

☐ Establishment

☐ Private Limited Company

☐ Partnership

☐ Others:

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1. Permanent Executives, partner, or owners Information: In case of JV provide names of all partners clearly defining the lead partner and the contractual relationship with other partners:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Position** | **Years of Experience** | **Qualification** |
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1. If a member of a group of companies, give the name, address, and contact details of the Group or Ultimate Holding Company and any other subsidiaries that would guarantee the contract performance of its subsidiary:

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1. Attach a properly referenced organization chart showing your Company’s structure including all departments and other associated companies (parent company, subsidiaries, sister companies, JV, etc.) where applicable.

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1. List all technical staff number and experience under your sponsorship. Add the relevant specialists to the table as per the Company’s line of service (Lighting specialist, F&B specialists, hospitality, History and heritage…):

| **Technical Professions** | **Years of Experience** | **Total** |
| --- | --- | --- |
| **0-4** | **5-9** | **10-14** | **15+** |
| Directors/Partners |  |  |  |  |  |
| Project Director/Manager |  |  |  |  |  |
| Architects |  |  |  |  |  |
| Landscape Architects |  |  |  |  |  |
| Interior Designers |  |  |  |  |  |
| Master planners |  |  |  |  |  |
| Civil Engineer |  |  |  |  |  |
| Electrical Engineers |  |  |  |  |  |
| Mechanical Engineers |  |  |  |  |  |
| CAD/BIM operators |  |  |  |  |  |
| Specialist  |  |  |  |  |  |
| Others [consultant to add] |  |  |  |  |  |
| Total |  |  |  |  |  |

1. Number of Registered Professional Engineers with Saudi Council of Engineers:

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1. Provide a brief description of the Company’s primary business, diversification, and main services in home country, the Middle East, and worldwide:

|  |  |  |
| --- | --- | --- |
| **Item** | **Services** | **Description** |
| Primary Business |  |  |
| Secondary Business |  |  |
| Other |  |  |

1. Indicate the name of any professional or industry associations of which your Company is a member and provide copies of relevant certification:

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1. List names, contact details, and length of time that you have been working with any associates your Company has in Saudi Arabia and overseas, who are versed and knowledgeable in the procedures of procurement, customs, importation, regulations, etc.:

| **Name** | **Address** | **Duration**  |
| --- | --- | --- |
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1. **Consulting Work Experience and Discipline Capability:**
2. Description of Company's consulting principal sector activities:

☐ Infrastructure.

☐ Temporary Buildings.

☐ Hospitality.

☐ Residential.

☐ Commercial

☐ Civic / Community Facilities

☐ Health

☐ Educational

☐ Recreational

☐ Retail / F&B / Mixed Use

☐ Landscaping.

☐ Cultural / Historic

☐ Public Transportation.

☐ Public Stations.

☐ Airports

☐ UNESCO Project Experience

☐ Master planning

☐ If multiple sectors are ticked above, please identify below your particular area of expertise or interest

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1. We possess capability and licensing to perform the following design, engineering, and specialist disciplines (tick where applicable):

☐ Accessibility Services;

☐ Acoustic Design;

☐ Aircraft Warning Lighting Design;

☐ Animation;

☐ Architect of Record, Construction Supervision Services;

☐ Architecture;

☐ Artwork / Public Art Consulting;

☐ Audio Visual Design and Content Development;

☐ Brief Taking and Writing;

☐ Civil Engineering;

☐ Code Compliance;

☐ Commissioning Agent;

☐ Cost Planning, Cost and Commercial Management;

☐ Energy / Comfort;

☐ Façade and Building Cleaning and Maintenance;

☐ Fire Engineering Strategy and Life Safety;

☐ Geotechnical Engineering and Analysis;

☐ Graphics, Wayfinding, and Signage;

☐ Health, Safety, and Security, Environmental;

☐ Information Communications Technology;

☐ Interior Design;

☐ Irrigation Design;

☐ Kitchen / Food and Beverage Design;

☐ Laundry Design;

☐ Landscape Architecture;

☐ Lighting Design (Internal, External, and Specialty);

☐ Mechanical, Electrical, and Plumbing Engineering;

☐ Master Planning;

☐ Planning;

☐ Project Management

☐ Renderings and Computer Generated Image Productions;

☐ Roads and Traffic Engineering – TIS, TIA Studies;

☐ Security and Threat Analysis and Assessment;

☐ Signage Design – Architectural, Specialist, Statutory and Road & Street Directional signs;

☐ Space Planning;

☐ Specification Writing;

☐ Structural Engineering;

☐ Sustainability Services;

☐ Value Engineering;

☐ Vertical and Horizontal Transportation Engineering;

☐ Waste Management Design;

☐ Water Features and Pool Design;

☐ Wind Tunnel Engineering (Façades, Building, and Pedestrian Comfort);

☐ Other:

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1. Number of years of experience as a Consulting Company:

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| --- | --- |
| **Work Zone** | **Experience in Years** |
| Experience in Saudi Arabia |  |
| Experience in Middle East (Include GCC) |  |
| International Experience  |  |

1. Mark the percentage of work that your Company usually self performs as a Lead Designer taking direct ownership of your design and using specialty sub-consultant(s), and/or subcontracted:
2. Self-performed: ☐ (10% - 30%) ☐ (30% - 60%) ☐ (60% - 100%)
3. Subcontracted: ☐ (10% - 30%) ☐ (30% - 60%) ☐ (60% - 100%)
4. If it is foreseen that any part of a contract will be sub-contracted, state the type of work likely to be undertaken by sub-contractor(s) and, if known, give the names and addresses of the sub-consultant(s). Include / attach (properly referenced) sub-contractor(s) / sub-consultant(s) profile and information.

| **Scope of Service** | **Sub-Consultant** | **Address and Contact Info** |
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1. List the largest/landmark single contracts the Company has completed within the past 3 years:

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| **2017** |
| **Project Name** |  |
| **Worked as** | ☐ Lead Designer | ☐ Sub - Consultant |
| **Type of Work** |  |
| **Project Value** |  |
|  |
| **2018** |
| **Project Name** |  |
| **Worked as** | ☐ Lead Designer | ☐ Sub - Consultant |
| **Type of Work** |  |
| **Project Value** |  |
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| **2019** |
| **Project Name** |  |
| **Worked as** | ☐ Lead Designer | ☐ Sub - Consultant |
| **Type of Work** |  |
| **Project Value** |  |

1. List the largest/landmark single contracts the Company has completed within KSA in the past 3 years:

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| --- |
| **2017** |
| **Project Name** |  |
| **Worked as** | ☐ Lead Designer | ☐ Sub - Consultant |
| **Type of Work** |  |
| **Project Value** |  |

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| --- |
| **2018** |
| **Project Name** |  |
| **Worked as** | ☐ Lead Designer | ☐ Sub - Consultant |
| **Type of Work** |  |
| **Project Value** |  |
|  |
| **2019** |
| **Project Name** |  |
| **Worked as** | ☐ Lead Designer | ☐ Sub - Consultant |
| **Type of Work** |  |
| **Project Value** |  |

1. Use the following table to list previous design contracts within last 5 years (from highest to lowest):

| **Project Name and Location** | **Description** | **Value in SAR** | **Completion %** | **Client Contact** |
| --- | --- | --- | --- | --- |
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1. Capacity: List all current ongoing projects names, location and respective values (from highest to lowest):

| **Project Name**  | **Location** | **Total Value** | **% Complete** |
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1. Identify capacity and approach to resourcing to undertake work within the next 12 months covering the following points (separate files may be attached):
* How and from where will the project be resourced?
* What presence will be provided within Riyadh and if so, what would be the role of the Riyadh office?
* How will you ensure that you fully understand and implement local codes and regulations?
* What is your approach to permitting and approvals?
* What is your experience of the above, in performing previous projects?

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1. **Quality / HSE / LEED / IT**
2. Indicate if your Company operates a Quality Management System that complies with the following and provide certification where externally accredited:

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| --- | --- | --- | --- | --- |
| **QMS System** | **Yes** | **No** | **Date Accredited** | **Seeking** |
| BSEN/ISO 9000 |  |  |  |  |
| BSEN/ISO 9001 |  |  |  |  |
| BSEN/ISO 9002 |  |  |  |  |
| In-house Quality System |  |  |  |  |
| Other (Specify) |  |  |  |  |

1. Provide details of your Company’s environmental policy:

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1. Provide brief details of key projects which your Company has completed/or under construction, which have achieved or are targeting a LEED (or equivalent) rating:

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| --- | --- | --- |
| **Project Name** | **Rating** | **Description** |
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1. Provide a statement of your HSE record on projects in which your Company has been appointed on in the past three years:

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1. IT systems: Describe your Company’s experience with document management/collaboration systems (eg: Aconex)

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1. BIM: Can you undertake your design using BIM system of 3D modelling? If so, provide screenshots showing integrated models of previous projects undertaken.

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1. **Recognition and Awards**

Provide a statement or list of awards received by your Company reflecting recognition by both professional institute peers or the industry over the past 5 years:

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| --- | --- | --- |
| **Project Name** | **Recognition** | **Award** |
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1. **Additional Information:**

If you need to provide extra pages to complete this questionnaire or wish to provide additional information that you consider relevant to the evaluation of your qualifications, please list below all the enclosures that are provided as attachments. Where any supplementary information is provided, clearly cross reference the respective section number and heading.

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1. **Client References**

Provide below details for 3 relevant client references:

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| --- |
| **Reference 1** |
| **Project Name** |  |
| **Project Value** |  |
| **Owner / Organization Name** |  |
| **Contact Person** |  |
| **Address** |  |
| **Contact Number** |  |

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| --- |
| **References 2** |
| **Project Name** |  |
| **Project Value** |  |
| **Owner / Organization Name** |  |
| **Contact Person** |  |
| **Address** |  |
| **Contact Number** |  |

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| --- |
| **Reference 3** |
| **Project Name** |  |
| **Project Value** |  |
| **Owner / Organization Name** |  |
| **Contact Person** |  |
| **Address** |  |
| **Contact Number** |  |

1. **Attachments:**

Provide the following attachments (where applicable) together with the questionnaire:

* 1. Company Profile
	2. Commercial Registration / Investment License
	3. GOSI Certificate
	4. Saudization Certificate
	5. Valid Zakat and V.A.T. Certificates
	6. SAGIA Certificate (if applicable)
	7. Chamber of Commerce Registration
	8. Company’s HSE Manual
	9. Health Safety Management System
	10. ISO Certificates (where applicable)
	11. Company’s QMC certificates

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| **End of Questionnaire** |

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| **Declaration** |

We declare and confirm that we hereby understand that the DGDA is relying upon the information provided by ourselves to assess whether our Company is suitable to be included as a supplier to DGDA.

We furthermore understand that DGDA’s assessment is dependent upon the accuracy of the details and information provided by us.

Accordingly, we hereby declare and confirm that:

1. The details and information provided by us for the Client’s assessment are true and accurate and are known to us as facts.
2. We do not knowingly or recklessly give false, inaccurate or misleading details or information.
3. Should we provide any false or misleading information, it will result in our application being rejected and our Company being black-listed.

Duly authorized to sign this Declaration for and on behalf of the Consultant Company (must be typewritten)

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Signature (must be original, wet signature)

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Date:

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Registration Stamp (must be wet stamp, no electronic images)

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