**Annex II - EOI Sample Form**

{The Consultant shall prepare their EOI using the EOI Sample Form with necessary additions and revisions. It should be noted that domestic Consultant shall seal the document as required in the EOI Sample Form while foreign firms may not.}

EOI shall contain at least the following information:

FORM-1 Consultant’s Information Sheet

FORM-2 Consultant’s Commitment Letter of Eligibility

FORM-3 Introduction of Consultant

FORM-4 Consultant’s Financial Situation

FORM-5 Summary of Consultant’s Experiences

**Form-1 Consultant’s Information Sheet**

|  |  |
| --- | --- |
| Consultant’s Name |  |
| Consultant’s Registration Country |  |
| Registration Address |  |
| Business License No.  （Institution Legal Person Certificate No.） |  |
| Date of Establishment |  |
| Registered Capital |  |
| Business Scope |  |
| Information of Legal Representative  (Name, Telephone No. and E-mail address) |  |
| Information of Authorized Representative  (Name, Telephone No., Fax and E-mail Address) |  |
| Remarks |  |

Consultant’s Name: (Seal of Consultant)

Authorized Representative: (Signature)

Notes: Following documents shall be attached:

1. Color scans or copies of certification of independent legal personality;

2. Power of Attorney of authorized representative (Self-made Format);

**Form-2 Commitment Letter**

We promise that we meet the qualification criteria of the assignment and the following requirements of eligibility:

1. do not listed in the AIIB’s Debarment List;

2. do not involve in the situations as per paragraph 4.4, 4.4.2 and 13.4 of the *Interim Operational Directive on Procurement Instructions for Recipients*.

We belong to State-owned Enterprise, and we

1. are carrying-out or are established for a business purpose, and are operating on a commercial basis;

2. are financially and managerially autonomous;

3. are not controlled by the government on day-to-day management; and

4. are not under the supervision of the Client or its procuring agency.

*OR [We do not belong to State-owned Enterprise.]*

The items we committed above are real and effective, we would be disqualified in the assignment and be sanctioned by supervision department and the AIIB in case of providing misrepresentative, misleading or false information.

Consultant’s Name: (Seal of Consultant)

Authorized Representative: (Signature)

Notes:

1. State-owned Enterprises shall provide Articles of Association and other documentations which could support the above-mentioned matters.

**FORM-3 Introduction of the Consultant (Self-made Format)**

At least contains the following contents: the overall introduction, the introduction of core business, years in business, technical and managerial capability. If any, provide relevant documents on the mentioned issues.

**FORM-4 Financial Situation**

Consultant’s Name:

|  |  |  |  |
| --- | --- | --- | --- |
|  | **2018** | **2019** | **2020** |
| **1. Current Assets** | / | / |  |
| **2. Current Liabilities** | / | / |  |
| **3. Working Capital**  **[=1-2]** | / | / |  |
| **4. Profit after Taxes (PAT)** |  |  |  |

Consultant’s Name: (Seal of Consultant)

Authorized Representative: (Signature)

Notes:

Following documentation shall be attached:

1. Financial Reports for the last THREE (3) years (2018-2020) certified by a Chartered Accountant/Auditor, including copies of Balance Sheets, Cash Flow Statements, Income Statements and Description of Financial Situation.

**FORM-5(A) Summary of Similar Experiences in Recent Years**

Consultant’s Name:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Name of the Project** | **Date of Contract Signing** | **Completion Date （if completed）** | **Contract Value** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **…** |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

Consultant’s Name: (Seal of Consultant)

Authorized Representative: (Signature)

Notes:

1. Only the **Similar Experiences in the past FIVE (5) years** are considered, the Date of Contract Signing prevails;

2. Detailed information of each experience shall follow the FORM-5(B), with the relevant documentation attached.

**FORM-5(B) Specific Experience**

|  |  |
| --- | --- |
| No. | of (total number) |
| Project Name |  |
| Project Location |  |
| Date of Contract Signing |  |
| Completion Date |  |
| Contact Value |  |
| Role of the Consultant | * Independent Consultant * Joint Venture Leader * Joint Venture Member * Sub-consultant |
| Client’s Name |  |
| Client’s Address |  |
| Client’s telephone No. |  |
| Whether it is a new-built (or reconstructed or expanded) Expressway Project including a road tunnel or road bridge | □ Yes □ No |
| Scope of the Service | Include the following services：   * digital development service which contains BIM technology service or similar service * information management system service which contains smart construction site function or similar function |
| Assignment Description |  |

Consultant’s Name: (Seal of Consultant)

Authorized Representative: (Signature)

Notes:

1. Each table is for one assignment, and mark with serial numbers;

2. The Contract and Certification issued by the Client (if any) shall be attached;

3. Additional documentations would be necessary to confirm the succession of the experience in the situations such as Consultant’s legal alteration or reconstruction and renaming of the Consultant.