

SINDH PUBLIC PROCUREMENT REGULATORY AUTHORITY

CONTRACT EVALUATION FORM

TO BE FILLED IN BY ALL PROCURING AGENCIES FOR PUBLIC CONTRACTS OF WORKS, SERVICES & GOODS

- 1) NAME OF THE ORGANIZATION / DEPTT. SMBB INSTITUTE OF TRAUMA
- 2) PROVINCIAL / LOCAL GOVT./ OTHER PROVINCIAL
- 3) TITLE OF CONTRACT PROVISION OF JANITORIAL SERVICES
- 4) TENDER NUMBER PROC/SMBBIT/(POSR-01)/2022-23
- 5) BRIEF DESCRIPTION OF CONTRACT PROVISION OF JANITORIAL SERVICES
- 6) FORUM THAT APPROVED THE SCHEME REGULAR BUDGET
- 7) TENDER ESTIMATED VALUE 49 (M)
- 8) ENGINEER'S ESTIMATE NOT APPLICABLE
(For civil works only)
- 9) ESTIMATED COMPLETION PERIOD (AS PER CONTRACT) YEARLY CONTRACT (Extendable)
- 10) TENDER OPENED ON (DATE & TIME) 05-04-2022 AT 11:30 am
- 11) NUMBER OF TENDER DOCUMENTS SOLD TWO
(Attach list of buyers)
- 12) NUMBER OF BIDS RECEIVED TWO
- 13) NUMBER OF BIDDERS PRESENT AT THE TIME OF OPENING OF BIDS TWO
- 14) BID EVALUATION REPORT COPY ENCLOSED
(Enclose a copy)
- 15) NAME AND ADDRESS OF THE SUCCESSFUL BIDDER M/s. MASTER MULTI-TECH PVT. LTD.
- 16) CONTRACT AWARD PRICE Rs. 68,976,000/-
- 17) RANKING OF SUCCESSFUL BIDDER IN EVALUATION REPORT M/S. MASTER MULTI-TECH PVT. LTD.
(i.e. 1st, 2nd, 3rd EVALUATION BID).

18) METHOD OF PROCUREMENT USED : - (Tick one)

- a) SINGLE STAGE – ONE ENVELOPE PROCEDURE ☐ Domestic/ Local
- b) SINGLE STAGE – TWO ENVELOPE PROCEDURE ☒ YES ☐ Domestic/Local
- c) TWO STAGE BIDDING PROCEDURE ☐
- d) TWO STAGE – TWO ENVELOPE BIDDING PROCEDURE ☐

PLEASE SPECIFY IF ANY OTHER METHOD OF PROCUREMENT WAS ADOPTED i.e.
EMERGENCY, DIRECT CONTRACTING ETC. WITH BRIEF REASONS:

19) APPROVING AUTHORITY FOR AWARD OF CONTRACT _____

20) WHETHER THE PROCUREMENT WAS INCLUDED IN ANNUAL PROCUREMENT PLAN?

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

21) ADVERTISEMENT :

i) SPPRA Website
(If yes, give date and SPPRA Identification No.)

| | |
|-----|--|
| Yes | PPMS ID #. T00518-21-0004 17-March-2022 |
| No | |

ii) News Papers
(If yes, give names of newspapers and dates)

| | |
|-----|--|
| Yes | DAILY THE NATION, DAILY JANG & DAILY SOBH 17-March-2022 |
| No | |

22) NATURE OF CONTRACT

| | | | |
|--------------------|-------------------------------------|------|--------------------------|
| Domestic/ Local | <input checked="" type="checkbox"/> | Int. | <input type="checkbox"/> |
|--------------------|-------------------------------------|------|--------------------------|

23) WHETHER QUALIFICATION CRITERIA
WAS INCLUDED IN BIDDING / TENDER DOCUMENTS?
(If yes, enclose a copy)

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

24) WHETHER BID EVALUATION CRITERIA
WAS INCLUDED IN BIDDING / TENDER DOCUMENTS?
(If yes, enclose a copy)

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

25) WHETHER APPROVAL OF COMPETENT AUTHORITY WAS OBTAINED FOR USING A
METHOD OTHER THAN OPEN COMPETITIVE BIDDING?

| | | | |
|-----|--------------------------|----|-------------------------------------|
| Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
|-----|--------------------------|----|-------------------------------------|

26) WAS BID SECURITY OBTAINED FROM ALL THE BIDDERS?

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

27) WHETHER THE SUCCESSFUL BID WAS LOWEST EVALUATED
BID / BEST EVALUATED BID (in case of Consultancies)

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

28) WHETHER THE SUCCESSFUL BIDDER WAS TECHNICALLY
COMPLIANT?

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

29) WHETHER NAMES OF THE BIDDERS AND THEIR QUOTED PRICES WERE READ OUT AT
THE TIME OF OPENING OF BIDS?

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

30) WHETHER EVALUATION REPORT GIVEN TO BIDDERS BEFORE THE AWARD OF
CONTRACT?
(Attach copy of the bid evaluation report)

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

31) ANY COMPLAINTS RECEIVED
(If yes, result thereof)

| | |
|-----|----|
| Yes | |
| No | NO |

32) ANY DEVIATION FROM SPECIFICATIONS GIVEN IN THE TENDER NOTICE / DOCUMENTS
(If yes, give details)

| | |
|-----|----|
| Yes | |
| No | NO |

33) WAS THE EXTENSION MADE IN RESPONSE TIME?
(If yes, give reasons)

| | |
|-----|----|
| Yes | |
| No | NO |

34) DEVIATION FROM QUALIFICATION CRITERIA
(If yes, give detailed reasons.)

| | |
|-----|----|
| Yes | |
| No | NO |

35) WAS IT ASSURED BY THE PROCURING AGENCY THAT THE SELECTED FIRM IS NOT
BLACK LISTED?

| | | | |
|-----|-------------------------------------|----|--------------------------|
| Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> |
|-----|-------------------------------------|----|--------------------------|

36) WAS A VISIT MADE BY ANY OFFICER/OFFICIAL OF THE PROCURING AGENCY TO THE
SUPPLIER'S PREMISES IN CONNECTION WITH THE PROCUREMENT? IF SO, DETAILS TO
BE ASCERTAINED REGARDING FINANCING OF VISIT, IF ABROAD:
(If yes, enclose a copy)

| | | | |
|-----|--------------------------|----|-------------------------------------|
| Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
|-----|--------------------------|----|-------------------------------------|

37) WERE PROPER SAFEGUARDS PROVIDED ON MOBILIZATION ADVANCE PAYMENT IN
THE CONTRACT (BANK GUARANTEE ETC.)?

| | | | |
|-----|--------------------------|----|-------------------------------------|
| Yes | <input type="checkbox"/> | No | <input checked="" type="checkbox"/> |
|-----|--------------------------|----|-------------------------------------|

38) SPECIAL CONDITIONS, IF ANY
(If yes, give Brief Description)

| | |
|-----|----|
| Yes | |
| No | NO |

Signature & Official Stamp of
Authorized Officer _____

DR. MUHAMMAD JIR MEMON
Chief Operating Officer
SMAB Institute of Trauma
Karachi

FOR OFFICE USE ONLY

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