

Mellitah Oil & Gas B.V.

Libyan Branch



مليته للنفط والغاز  
Mellitah Oil & Gas

مليته للنفط والغاز بي. في.  
فرع ليبيا

**MELLITAH OIL & GAS B.V.  
JOINT PROJECTS TEAM**

**Expression of Interest for Prequalification FEED**

**STRUCTURES A & E, MELLITAH COMPLEX EXPANSION & CO2 MANAGEMENT  
INTEGRATED DEVELOPMENT PROJECT**

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## PRE-QUALIFICATION QUESTIONNAIRE

### 1. Basic Details of Company Profile, Organization, Reference & Joint Venture Agreement.

1.1	Name of organization in whose name the tender would be submitted: If you are bidding as a consortium what are the names of your partner organizations?
1.2	Contact name for enquires about this bid:
1.3	Contact position (Job Title) Home Office Address for Correspondence, including full Post Code::
1.4	Telephone number:
1.5	Fax number:
1.6	E-mail address:
1.7	Company website address (if any):
1.8	Company Registration number and Certificate from the Chamber of Commerce and/or Company Registration in Country Register
1.9	Date of Registration
1.10	Registered address including full post code if different from 1.4 above
1.11	Name of (ultimate) parent company (if this applies)
1.12	Companies House Registration number of parent company (if this applies)
1.13	Company and Group Structure (if applicable) with the list of major Shareholders
1.14	Company Organization Chart
1.15	Overall number of Company's internal employees (with an indication of the last 3 years trend) and breakdown of resources dedicated to: Basic/FEED activities
1.16	Company Organization description, including processes (also outsourcing) interactions
1.17	Recent Company brochures
1.18	List and details of major similar projects completed over the last five years, with evidence of your client, your scope of work, country, date of award and total value



1.19	In case of "Joint Venture" (JV) the JV Agreement with indication of the organization, rules, list of technical and HSEQ procedures valid for JV you plan will be applied to the Libyan Offshore – Area D (Ex. NC41) Structure A
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## 2. Economic and Financial Information

2.1	What was your turnover in the last three years		
	\$/£/€: _____ End of year 2017	\$/£/€: _____ End of year 2016	\$/£/€: _____ End of year 2015
If this does not apply, what year did you commence business? _____			
2.2	Has your organization met the terms of its banking facilities and loan agreements (if any) during the past year?		Yes / No
2.3	If "No" what were the reasons, and what has been done to put things right?		
2.4	Has your organization met all its obligations to pay its creditors and staff during the past year?		Yes / No
2.5	If "No" please explain why not:		
2.6	What is the name and branch of your bankers (who could provide a reference)?	Name: Branch: Contact details:	
If asked, would you be able to provide at least one of the following?			
A copy of your most recent audited accounts (for the last two years if this applies)			Yes / No
A statement of your turnover, profit & loss account and cash flow for the most recent year of trading			Yes / No
A statement of your cash flow forecast for the current year and a bank letter outlining the current cash and credit position			Yes / No
2.7	Annual reports for the last fiscal year		
2.8	Financial Structure of the Company		
2.9	Any additional information relevant to the financial stability and integrity of the Company		



### 3. Experience and References

Please provide details of three recent contracts that are relevant to the requirement. If you cannot provide three references, please explain why.				
		Reference 1	Reference 2	Reference 3
3.1	Customer Organization (name):			
3.2	Customer contact name and phone number:			
3.3	Date contract awarded:			
3.4	Contract reference and brief description:			
3.5	Value:			
3.6	Date contract was completed			
3.7	Have you had any contracts terminated for poor performance in the last three years, or any contracts where damages have been claimed by the contracting authority?	<b>Yes / No</b>		
3.8	If "Yes" please give details:			



#### 4. Quality Assurance

4.1	Does your organization hold a recognized quality management certification for example BS/EN/ISO 9000:2000 or equivalent? If <b>Yes</b> please state name of certification _____.	<b>Yes / No</b>
4.2	If <b>No</b> , does your organization have a quality management system*? If you do not have quality certification or a quality management system, please explain why:	<b>Yes / No</b>
4.3	Quality Manual and list of procedures/instructions in use	
4.4	Quality Control Plan to be employed in projects similar to the Libyan Offshore – Area D (Ex. NC41) Structure A & E scope of work	

## 5. Health & Safety and Environment

5.1	Health & Safety Management System certification and/or documents proving the Company compliance with national/international H&S standards (e.g. ISO 18001);	
5.2	Does your organization have a written health and safe work policy? (see notes at end of questionnaire)	<b>Yes / No</b>
5.3	Does your organization have a health and safety at work system?	<b>Yes / No</b>
5.4	If " <b>No</b> ", to either of the above please explain why:	
5.5	Sample of typical HSE Management Plan for engineering used in project similar to Bahr Essalam 2 <sup>nd</sup> Phase Project scope of work	
5.6	Environment Management System certification and/or documents proving the Company compliance with national/international Environmental standards (e.g. ISO 14001);	
5.7	Does your organization have an environment management system?	<b>Yes / No</b>
5.8	Does your organization have a sustainable procurement policy?	<b>Yes / No</b>
5.9	Evidence of compliance of your products/plant/supplies in order to international laws and standards applicable for environmental requirements	
5.10	Any additional information relevant to establish that Company has the necessary experience, capability and financial viability to undertake the activities in question safely and in an environmentally sound manner	

## 6. Equalities

6.1	Does your organization have a written equal opportunity policy, to avoid all types of discrimination?	<b>Yes / No</b>
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## 7. Professional and Business Standing

Do any of the following apply to your organization, or to (any of) the director(s) / partners / proprietor(s)?		
7.1	Is in a state of bankruptcy, insolvency, compulsory winding up, receivership, composition with creditors, or subject to relevant proceedings	Yes / No
7.2	Has been convicted of a criminal offence related to business or professional conduct	Yes / No
7.3	Has committed an act of grave misconduct in the course of business	Yes / No
7.4	Has not fulfilled obligations related to payment of social security contributions	Yes / No
7.5	Has not fulfilled obligations related to payment of taxes	Yes / No
7.6	Is guilty of serious misrepresentation in supplying information	Yes / No
7.7	Is not in possession of relevant licenses or membership of an appropriate organization where required by law.	Yes / No
7.8	If the answer to any of these questions is "Yes" please give brief details below, including what has been done to put things right.	

## 8. DECLARATION

I DECLARE THAT TO THE BEST OF MY KNOWLEDGE THE ANSWERS SUBMITTED IN THIS FORM (AND ANY SUPPORTING MODULES) ARE CORRECT. I UNDERSTAND THAT THE INFORMATION WILL BE USED IN THE EVALUATION PROCESS TO ASSESS THE ORGANIZATION'S SUITABILITY TO BE INVITED TO TENDER FOR THE REQUIREMENT.

<b>FORM COMPLETED BY:</b>	
Organization Name:	
Authorized Official:	
Position (Job Title):	
Date:	
Telephone number:	
Signature:	



**\*Notes:**

**ENVIRONMENTAL MANAGEMENT SYSTEM** MEANS PROCESSES AND PROCEDURES TO ENSURE THAT ENVIRONMENTAL ISSUES ARE PROPERLY MANAGED AND ALL LEGAL REQUIREMENTS ARE MET.

**HEALTH AND SAFETY POLICIES**

ANY BUSINESS EMPLOYING FIVE OR MORE PEOPLE HAS, BY LAW, TO PREPARE AND BRING TO THE ATTENTION OF EMPLOYEES A WRITTEN HEALTH AND SAFETY POLICY STATEMENT.

A HEALTH AND SAFETY POLICY USUALLY CONSISTS OF THREE DISTINCT SECTIONS NAMELY:

**GENERAL POLICY STATEMENT** – A SHORT STATEMENT OUTLINING THE ORGANIZATION'S COMMITMENT TO HEALTH AND SAFETY, SIGNED AND DATED BY THE SENIOR ORGANIZATION OFFICIAL (FOR EXAMPLE, THE MANAGING DIRECTOR).

**ORGANIZATION** – HOW THE ORGANIZATION ADDRESSES HEALTH AND SAFETY; LINES OF COMMUNICATION BETWEEN MANAGERS AND STAFF; AND ANY SPECIFIC DUTIES/RESPONSIBILITIES ASSIGNED WITHIN THE ORGANIZATION - THIS SHOULD BE RELATIVELY STRAIGHTFORWARD FOR SMALLER ORGANIZATIONS.

**ARRANGEMENTS** – THE SYSTEMS AND PROCEDURES IN PLACE FOR ENSURING EMPLOYEES' HEALTH AND SAFETY AT WORK

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*Company NAME*  
PRE-QUALIFICATION DOCUMENTATION FOR  
Area D (Ex. NC41) Structure A & E

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