

Ministry of Public Works
Department Responsible: Department of Works and Engineering
Request for Quotations No.:2023-008Q-MPW

# **COMPANY PROFILE FORM**

#### **COMPANY PROFILE FORM**

This document comprises the following Sections:

Section I: Company Information Section II: Product or Service Details

Section III: Company Experience; Professional and Technical Staff

Section IV: References

Note: In addition to this form, respondents may submit their standard company profile brochures.

#### **SECTION I**

Company Information		
Vendor Name		
Company Description		
Contact Information		
Primary Contact	Phone	Email

# **SECTION II**

Product or Service Details		
	Provide a detailed description of the product or service your company delivers	
Details		
Details		
	Provide more information about the benefits and capabilities your company provides	
Capabilities		
Cupublicies		

# **SECTION III**

COMPANY EXPERIENCE, PROFESSIONAL AND TECHNICAL STAFF	
	Provide any information about previous experiences, clients, or success stories a minimum of 3 examples
Relevant Experience	
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	Provide a List of key personnel and their experience, certifications and/or skills
Key Personnel	

The respondent may attach documentation to support this section in lieu of completing this section.

Please indicate that documentation has been attached above.

#### **SECTION IV**

### **REFERENCEs**

Each proponent is requested to provide three (3) references from clients who have obtained similar goods or services to those requested in the RFP from the Proponent in the last three (3).

Include	Government	t reference
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Reference #1		
Company Name:		
Company Address:		
Contact Name:		
Contact Telephone Number:		
Contact Email:		
Period of Performance:	Start:	End:
Total Contract Value:	\$	
Geographical Area Covered:		
Scope of Services Provided:		
Reference #2	<u> </u>	
Company Name:		
Company Address:		
Contact Name:		
Contact Telephone Number:		
Contact Email:		
Period of Performance:	Start:	End:
Total Contract Value:	\$	
Geographical Area Covered:		
Scope of Services Provided:		
Reference #3		
Company Name:		
Company Address:		
Contact Name:		
Contact Telephone Number:		
Contact Email:		
Period of Performance:	Start:	End:
Total Contract Value:	\$	

Geographical Area Covered:	
Scope of Services Provided:	