

Private Bag X 5007, Umtata, 5100, Tel (047) 5324700 5<sup>th</sup> Floor, PRD II Building, Sutherland Street, Umtata

## REFERENCE LETTER TEMPLATE

то		DATE:		
ORGANISATION		REF	MTH03/2025	
TEL		E-MAIL		
FROM		POSITION		
TEL		ROOM NO		
CELL		E-MAIL		
SUBJECT: BIDDER'S REFERENCE CHECKING (QUESTIONARE)				
MPISI POLICE STATION: CONDITION BASED MAINTENANCE FOR ALL BUILDING UNITS: WCS 055333				
(Tender No: MTH03/2025)				
Note: "Reference forms" to be completed by each of the respective Project Managers/ Principal Agent for the projects listed in the Functionality (Relevant Experience) returnable schedules. Forms not signed, stamped and completed in full will result in no allocation of points (zero points).				
I,	(Name & Sur	name) of		
(Company Name) declare the that I was the Project Manager or Principal Agent on the following construction project successfully executed by:				
			(name of tender)	
PROJECT NAME:				
CONTRCT VALUE:	D	ISCIPLINE VA	LUE:	
COMPLETION DATE:	C	ONTRACT DU	RATION:	
1. Please evaluate the performance of the Tenderer on the above-mentioned project, on which you were the				

Principal Agent or the Project Manager by inserting "Yes" in the relevant box below;

You are kindly requested to assist the Department by providing scores, inputs, remarks of their performance, quality etc. on the projects they have carried out with your company.

Any additional items that you may have that are not listed below are also welcomed,

ITEMS	SCORE 1 - 5	COMMENTS		
Quality Performance (Documentation produced)	(5 being excellent)			
Quality Performance (Documentation produced)				
Contract Administration				
Track Record / Experience				
Time Performance				
Financial Performance				
Staff capacity				
Ensuring Occupational Health & Safety Compliance on site				
Sub-consultant relations				
ADDITIONAL ITEM	SCORE 1 - 5	COMMENTS		
Please give comments on the level to which the agreement with the Bidder was/is reached in respect of the adjustment of rates which are considered to be imbalanced, unreasonable, elimination of errors or discrepancies without changing total tender amount.  Remarks / Recommendations:				
Completed by:		Signature:		
Date:	S	Stamp		