

BID - Details of Previous Similar Project Experience (Annexure 9)

To be Completed by reference and returned

Project **Name** CompletedValue: R.....

Client **Name**Year:

Please verify that information provided by the respondent in Part A above is correct Comment alongside if necessary		<input type="checkbox"/> No <input type="checkbox"/> Yes	Comments
Please score and comment on the attributes listed below	Score	out of 10	
Overall Project Planning by Contractor			
Ordering of Materials and Long Lead Materials			
Compliance with Construction programme			
Application for resources to project			
Site Management and Reporting			
Contractual acumen			
Administration of Subcontractors (Nominated, Selected, Domestic)			
Payment of Subcontractors and Suppliers			
Quality of workmanship and Quality Assurance Testing			
Total Score (Sum of all scores)			

Referee name:..... Referee signature:.....

Designation:.....

Date:..... Business entity /Client Stamp:

Tel:.....