Prescribed Format for Submission of Expression of Interest (EOI)

(In Case of Joint Venture, Same Form to be completed by each member of JV)

Package No.	:
Assignment Title	:
Type of Entity for this EoI Single	:
Entity/Joint Venture	
If JV, Lead/Partner	:

- 1. Letter of Submission [Addressing the Project Director, *In case of Joint Venture the Lead Partner can only submit this letter*]
- **2.** Age of the Organization/Agency/Firm (Year of Establishment, as per Registration Certificate)

(Necessary Attachments: Agency /Firm's Registration Certificate)

3. Legal Establishment of the Organization/Agency/Firm

a) TIN No. : b) VAT Registration No. :

(Necessary Attachments: TIN Certificate, VAT Certificate, Valid Trade License)

4. Organization/Agency/Firm Description (General Information)
(Necessary Attachments: Organization Profile/Brochure/Annual Report etc.)

- 5. Financial Capacity of the Organization/Agency/Firm (Turnover of last 10 years)
 - a) 2022-2023(Up to December)
 - b) 2021-22
 - c) 2020-21
 - d) 2019-20
 - e) 2018-19
 - f) 2017-18
 - g) 2016-17

(Necessary Attachments: Payment Received Certificates/Audit Report)

6. Experience of the Organization/Agency/Firm in Similar Tasks/Assignments in Last ten Years (Example of Past Experience of Similar Nature and/or Complexity including Cost and Duration of the Assignment)

Total No. of Similar Nature Assignment done by the Organization/Agency/Firm

		•	•	•		•			
Assignment/ Project	Type of Assignment/ Project	Assignment Location	Name and Address of the Client/Donor	Service Duration (Start & End Dates)	Value of Service/Contract Price in BDT			Man-Month Input	
Name/Title/:					Total Value	No. of Partners (if Any)	Value of Service Provided by the Firm	Firm's Input	Partners' Input (if Any)

(Necessary Attachments: i) Details Description of Mentioned Similar Nature Assignment done by the Firm Separately ii) Notification of award/Contract/Disbursement letter/Task completion Certificate)

7. Availability of Key Professionals to Carry out the Assignment

Total number of Key Professionals

SN	Name of Key Professionals	Position held in the Firm	Educational Qualification	Total Years of Experience	Years of Experience in Relevant Field	No. of Years as Firm's Employee

(CV of the Key Professionals need not be submitted)

8. Organizational Capacity of the Organization/Agency/Firm

a) Address of the Head office	••	
b) Office Space (Area, Floor No. etc.)	:	
c) No. of Support Staffs (Excluding Key		
Professionals)		
d) Description of Important Office Equipment		
e) Number of offices in proposed working areas		