

GENERAL INFORMATION

1. Name of Applicant-Firm/Contractor _____
2. Type of Firm:

(____) Single Proprietor

(____) Corporation

(____) Partnership

(____) Cooperative

(____) Joint Venture
3. Business Address/Tel. and Fax Numbers/E-mail Address

Main Office

Branch Office (if any)

Address: _____

Tel No/: _____

Cel No : _____

Fax No : _____

E-mail : _____
4. Taxpayer Identification Number : _____
of the Company
5. Government Issued ID and Number of Authorized Representative: _____

Signature over Printed Name of Authorized Signing Official

Designation

DATE OF OPENING OF BID: _____

ANNEX 1

EQUIPMENT REQUIREMENT
(Owned or Leased)

Name of Project : _____

Item No.	DESCRIPTION	No. of Unit	Owned / Leased
1	Welding Machine (400A)	1	Owned/Leased
2	Cut-off Machine	1	Owned/Leased
3			
4			
5			
6			
7			
8			
9			
10			

ANNEX 2

ENVIRONMENTAL, SAFETY AND HEALTH REQUIREMENTS

Name of Project : _____

A. EQUIPMENT / MATERIALS:

- 1. Safety Gears (Helmets, Shoes, Belts, Gloves, etc.) : 1.0 Lot
- 2. Safety Devices (barricades, warning signs & other appropriate tools) : 1.0 Lot
- 3. Medical and First Aide System : 115 CD

B. LABOR

- 1 - Safety Engineer / Officer : 115 CD

MANPOWER SCHEDULE

Name of Project : _____

MANPOWER (Minimum)	Contract Duration (Calendar Days)									
	M O N T H L Y									
Project Manager										
Project Engineer										
Materials Engineer										
Construction Safety and Health Officer										
General Foreman										
Specify Other Applicable Positions, etc.										

(Authorized Signing Official)

Signature

EQUIPMENT UTILIZATION SCHEDULE

Name of Project: _____

Item No.	DESCRIPTION	No. of Units	Owned / Leased	Contract Duration (Calendar Days)					
				MONTHLY					
1.									
2.									
3.									
4.									

(Authorized Signing Official)

Signature

ADDITIONAL INFORMATION TO BE FURNISHED BY JOINT VENTURE
 (IF APPLICABLE)

1. Name of Joint Venture _____
- 1.1. _____

NAME (Member Firms of Joint Venture)	TYPE (Single Proprietorship/Partnership/ Cooperative/Corporation)
_____	_____
_____	_____
_____	_____
_____	_____

The Joint Venture Agreement shall state, among others, the extent of exposure and division of work of the member firms for this particular project.

	Major Division of Work (% Contribution)
1. Lead Firm	_____
2. Minor Firm	_____
3. Others	_____

Key Personnel Deployment (Identify from what firm):

	NAME	FIRM/CO-VENTURER
Project Manager	_____	_____
Project Engineer	_____	_____
Materials Engineer	_____	_____
Foreman	_____	_____
Others	_____	_____

Name of Applicant-Firm/Contractor

Signature over Printed Name of Authorized Signing Official

Date : _____

NOTE:

1. Attach clear and certified true copies of the following documents immediately after this Form (Refer to ITB Clause 12.1 (a).e):
 - 1.1 Authority of each JV member firm to enter into Joint Venture Agreement
 - 1.2 Joint Venture Agreement, indicating the authorized signing official of the JV, among others.