

		PRE-QUALIFICATION OF SECURITY COMPANIES	
Name of company			
Company address			
City, Province			
Telephone Numbers		Fax Numbers	
DESCRIPTION	RESPONSE	REMARKS	
SECTION-"A" (MANDATORY REQUIREMENT)			
1	Registration with the Income Tax Department - NTN Certificate (Please provide a copy of it)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Registration with Home Ministry and APSAA a) Valid license issued by Home Ministry of Sindh (Please provide a copy of it) b) Valid license issued by Home Ministry of Balochistan (Please provide a copy of it) c) Membership certificate of APSAA (Please provide a copy of it)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	Provision of Patrolling Vehicles (2 Nos) Brand New (Zero Meter) Toyota Vigo Champ (V) (2500cc, 4x4, Model 2013) with driver	<input type="checkbox"/> Yes <input type="checkbox"/> No	
DESCRIPTION	RESPONSE	REMARKS	
SECTION-"B" (TECHNICAL QUESTIONNAIRE)			
1	Does your company have valid license to operate in Sindh & Baluchistan province for: a) Guarding services (Please provide a copy of it) b) VHF Communication services (Please provide a copy of it) c) Use of Arms & Ammunitions (Please provide a copy of it)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
2	Does your organization have a security policy/procedure?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
3	What type of personnel does your company have as security guards? (Please provide details in Appendix-B)	<input type="checkbox"/> More than 80% Ex-Armed services <input type="checkbox"/> 50% Ex-Armed services & 50% civilians <input type="checkbox"/> 30%-50% Ex-Armed services <input type="checkbox"/> Less than 30% Ex-Armed services	
4	Are your security personnel securities cleared/screened and registered with law enforcement agencies prior to deployment with clients. The security company is required to provide a confirmation that it is fully licensed to provide security services and all of its personnel have been security cleared/screened and properly registered with law enforcement agencies. A list of such registration should please be provided. The security company should also provide a confirmation that the equipment in the use of its personnel is properly licensed. Copy of such license also be provided.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
5	Are planned inspections of your security personnel & equipment conducted regularly? Please give details of such inspections.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
6	Are inspection checklists available for inspection purposes?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
7	Is a copy of each planned inspection report given to the concerned supervisor for remedial follow up?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
8	Does your Company have an incident/accident investigation procedure? (If yes, provide a copy of the procedure)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
9	Does your Company maintain a record of all incident /accident involving injuries to personnel and damage to equipment?we could ask for a sample of such record and/or conduct inspection at your premises.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
10	Does your Company have a comprehensive security related emergency-handling plan in writing? (If yes, provide a copy of it).	<input type="checkbox"/> Yes <input type="checkbox"/> No	

11	Are there written general Health, Safety, Environment and Security rules in your Company? Are they translated and made available to all your employees? Please provide a copy of it.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
12	Are your security personnel pre-employment medical screening carried out? After how many years are they re-examined? Please give details	<input type="checkbox"/> Yes <input type="checkbox"/> No	
13	Do you provide group life insurance coverage to your security guards. Please provide copies of insurance policies.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
14	Lodging / Boarding facilities provided to guards? please provide details	<input type="checkbox"/> Yes <input type="checkbox"/> No	
15	Payment date of salary to guards. Note: Please submit documentary proof of the payment of salary date, e.g. (salary payment voucher etc.)	<input type="checkbox"/> By the 10th of every month <input type="checkbox"/> By the 15th of every month <input type="checkbox"/> By the 20th of every month	
16	Weekly holiday(s) given to staff. Please provide evidence.	<input type="checkbox"/> Yes <input type="checkbox"/> No	
17	Procedure for backup of guards	<input type="checkbox"/> Extra Guards <input type="checkbox"/> Double duties	
18	Issuance of uniforms per annum / guard.	<input type="checkbox"/> 2 sets per annum / guard <input type="checkbox"/> 1 set per annum / guard	
19	Provide list of services for the last 10 years including ongoing contracts in the format provided as Appendix-A.		

Note: APL reserves the right to change its evaluation criteria at its own discretion and the decision of APL cannot be challenged.

Legend	
Pre-Qualified for Financial Bid Opening	80 or Above points
Disqualified for Financial Bid Opening	Less than 80 points