**Implementation of Web Based Solution for Duty Free Liquor Sales for Diplomats at State Trading Corporation**

**Expression of Interest (EOI) Information format for Consulting Firms**

**1. Project Data & Consulting Firm**

|  |  |
| --- | --- |
| **Contract Name:** |  |
| **Contract Number:** |  |
| **Name of Consulting Firm:** |  |

**2. Eligibility**

**Declaration**

We hereby declare that:

(i) we have read the advertisement, and the Expression of Interest (EoI), for this assignment;

(ii) we have not been engaged to prepare EoI as a firm, consortium, association, sub-consultancy, or joint venture; and

(iii) no full-time or part-time or contracted expert employed by our firm, consortium, association, sub-consultancy, or joint venture has been engaged to prepare such EoI.

We further confirm that, if any of one or more of our experts is engaged to prepare EoI for any resulting assignment as part of our work product under the assignment to which this advertisement relates, our firm and any such expert(s) will be disqualified from short-listing and/or participation in such follow-on assignment.

|  |  |
| --- | --- |
| Lead Firm |  |
| Signed by  Position |  |
| Associate/Partner 1 |  |
| Signed by  Position |  |
| Associate/Partner 2 |  |
| Signed by  Position |  |

**3. Management Competence** (Please answer each question in one paragraph of 3-5 sentences. Be specific and precise)

(a) If you are proposing an association such as sub-consultancy or a joint venture (J/V), outline the rationale for and benefits of the “Association.” Outline proposed management coordination of the “association,” including the role of each firm.

(b) Does your firm/consortium/association/sub-consultancy/joint-venture (J/V) have standard policies, procedures or practices in place that promote quality in: the workplace, your interaction with clients, and the outputs you produce? If yes, describe briefly.

(c) Does your firm/consortium/association/sub-consultancy/joint venture have a dedicated unit or staff solely responsible for quality assurance? If yes, describe briefly.

(d) How will you ensure the quality of your firm’s/consortium's/association's/sub-consultancy’s/join venture’s performance over the life of this assignment?

(e) How will your firm/consortium/association/sub consultancy/joint venture deal with any complaints concerning the performance of the staff or the quality of the reports submitted for this consulting assignment? What internal controls are in place to address and resolve complaints?

**4. Technical Qualifications including Experience**

Based on the attached reference project sheets and the firm’s performance, highlight the technical qualifications including experience of your firm/ consortium/ association/ sub-consultancy/ joint venture (maximum of 4 pages). When the firm submitting the information, special attention should be given to the following areas; *(Wherever applicable, refer to the project number as given in Annex).*

* 1. Technical Qualification of the firm
     1. Explain the past critical application project experiences elaborating at least 2 projects.
     2. Describe the experience of handling the non-functional requirements such as performance and security.
     3. Describe the software development best practices used.
     4. Describe the web based application development experience.
     5. Describe the in-house SQA standards and procedure.
     6. Describe the Project Management/ Coordination practices.
     7. Elaborate experience in providing Support and Maintenance services.
  2. Nature of the Firm (small/specialized/large)
  3. Core business of the firm
  4. Financial and administrative strength
  5. Firm’s history-number of years in business
  6. Technical & managerial organization of the firm, staff strengths and capabilities & appropriate skills of firm's staff
  7. Any other relevant information

**Annex (1) Project Sheet**

**Project Sheets**

Indicate up to 3 reference projects that the firm/consortium/association/sub-consultancy/joint venture experiences are relevant.

**Project 1 of \_\_**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| * Project Name |  | | | | | |
| * Name of Client |  | | | | | |
| * Country |  | | Project location within Country | | |  |
| * Client Contact Person,  Title/Designation,   Tel No. , Address |  | | | | | |
| * Participation |    | As lead firm  As associate firm | | | | |
| * Value of Services |  | | | LKR | | |
| * Source of Financing |  | | | | | |
| * Consultancy Services (should specifically indicate associate firm’s staff allocations) | | | | | | |
| (i) No. of staff | |  | | | | |
| (ii) No. of person months | |  | | | | |
| * Length of Consultancy Assignment | | | | | | |
| * Start Date | |  | | | (dd/mm/yyyy) | |
| * Completion Date | |  | | | (dd/mm/yyyy) | |
| * Name of Associate Firms (if any) | | | | | | |
|  | | | | | | |
| * No. of Person-Months of Professional Staff Provided by Associated Firm(s) | | | | | | |
| * Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed   (should specifically indicate associate firm’s staff involvement) | | | | | | |
|  | | | | | | |
| * Detailed Description of the Project | | | | | | |
|  | | | | | | |
| * Detailed Description of the Actual Services Provided by your Firm | | | | | | |
|  | | | | | | |

Note : Each work experience shall be enclosed with work order/completion certificate/Substantial completion certificate. Each project sheet along with work orders would be evaluated for necessary compliance to meet the eligibility criteria.