

German Financial Cooperation with Montenegro

Regional Program for Energy Efficiency in Transmission “Component II: Montenegrin Coast: Lustica Region Development”

Prequalification Document

for

Procurement of Plant and Design-Build of

LOT 3 – 110 kV Overhead Transmission Lines

Addendum No. 2

Employer: Crnogorski Elektroprenosni Sistem A.D.
Bulevar Svetog Petra Cetinjskog 18
81000 Podgorica, Montenegro

Date: February, 2021

BMZ No. 2011 66 412



D. Submission of Applications

ITA 17.1	<p>The Original Application shall be submitted not later than:</p> <p>Date: 15.03.2021. Time: 12:00, UTC +01:00</p> <p>at the following address, which shall be the controlling address for the purposes of the timely submission of the Application:</p> <p>Attention: Mr. Vladimir Bojčić, Project Coordinator Address: Crnogorski Elektroprenosni Sistem A.D. Bulevar Svetog Petra Cetinjskog 18 City: Podgorica ZIP Code: 81000 Country: Montenegro</p> <p>Electronic submission via e-mail is prohibited and leads to disqualification.</p>
ITA 19.1	<p>The opening of the Applications shall be at:</p> <p>Date: 15.03.2021. Time: 12:05, UTC +01:00</p> <p>Address: Crnogorski Elektroprenosni Sistem A.D. Bulevar Svetog Petra Cetinjskog 18 City: Podgorica ZIP Code: 81000 Country: Montenegro</p>

E. Procedures for Evaluation of Applications

ITA 23.1	A margin of preference shall not apply .
ITA 24.1	At this time the Employer does not intend to execute certain specific parts of the works by subcontractors selected in advance (nominated sub-contractors).

4. Construction Experience

Criteria No. / Subject	Requirements / Max. Scores Requirement	Requirements / Max. Scores			Documentation Requirements / Forms	
		Single Entity	Joint Venture (existing or intended)			
			All Parties Combined	Each member	One member	
4.2 b) Construction Experience in key activities	<p>For the above mentioned or any other contracts, completed and under implementation, as prime contractor, joint venture member, management contractor or subcontractor on or after the first day of the calendar year during the period stipulated in 4.2(a) above, a minimum construction experience in the following key activities successfully completed:</p> <p>Construction of new single and/or double circuit 110 kV or above volt-age overhead transmission lines, at least ten (10) km route length, of single/double circuit line.</p> <p>At least one contract shall be implemented in the European Area, the documentation shall be provided for minimum two (2) relevant contracts</p> <p>For further detailed criteria see Section 4, Form EXP-4.2 (b).</p> <p>Particular criteria must not be limited on the number of Contracts</p>	Must meet requirement	Must meet requirement	N/A	N/A	Form EXP-4.2 (b)

5. Environmental and Social and Health and Safety (ESHS) Experience and Capacity

Criteria No. / Subject	Requirements / Max. Scores					Documentation Requirements / Forms
	Requirement	Single Entity	Joint Venture (existing or intended)			
			All Parties Combined	Each member	One member	
5.1. Certificates	<p>Availability of a valid ISO certification as below or internationally recognized equivalent (equivalence to be demonstrated by the Applicant)</p> <ul style="list-style-type: none"> Quality Management certificate ISO 9001 Health and Safety certificate OHSAS 18001 or ISO 45001 <p>Or</p> <ul style="list-style-type: none"> Availability of certification by the responsible Institution in Montenegro for performance of tasks of Safety and Health at work. Environmental management certificate ISO 14001:2014 	Must meet requirement	N/A	Must meet requirement, if part in JV is substantial (more than 40 (forty) % of the works)	N/A	<p>Form CER-5.1(a) & Form CER-5.1(b)</p> <p>Form CER-5.1(c)</p>

12. Form EXP-4.2 (a): Specific Construction and Contract Management Experience

Applicant's Name:

Date:

Joint Venture Member's Name:

ICB No. and Title:

Page : _____ of : _____

The Applicant must provide evidence of Specific Construction and Contract Management Experience **minimum two (2) similar contracts**.

The similarity shall be based on the physical size, complexity, methods/technology and/or other characteristics described in Section VII, Scope of Works. Summation of number of small value contracts (less than the value specified under requirement) to meet the overall requirement will not be accepted.

A project is defined as substantially completed after the issuance of the Taking Over certificate by the Employer for all the works.]

For contracts under which the Applicant participated as a joint venture member or sub-contractor, only the Applicant's share, by value, shall be considered to meet this requirement.

The Applicant shall provide the below listed documents for all Similar Contracts under Section III, Qualifications Criteria and Requirements, Sub-factor 4.2 (a) above:

- (a) Confirmation of the Employer, on the Employer's/End User's letterhead
- (b) Copy(ies) of the Contract(s)
- (c) Copy(ies) of Taking-over Certificate(s)
- (d) Reference Letters from the Employers.

Attached are Documents as required above.



Similar Contract No. _____ <i>[insert ordering number of similar contracts required]</i>	Information			
Contract identification	<i>[insert contract name and number, if applicable]</i>			
Award date	<i>[insert day, month, year, i.e., 15 June 2015]</i>			
Completion date	<i>[insert day, month, year, i.e., 01 October 2017]</i>			
Role in contract	Prime Contractor <input type="checkbox"/>	JV Member <input type="checkbox"/>	subcontractor <input type="checkbox"/>	Management Contractor <input type="checkbox"/>
Total contract amount	_____ (local currency)		_____ (EUR equivalent)	
If member in a JV, specify share in value in total contract amount	Percentage amount			
	Total contract amount in local currency			
	Exchange rate and total contract amount in EUR equivalent			
Employer's name	<i>[insert Employer's legal name]</i>			
Address	<i>[indicate street / number / town or city / country]</i>			
Telephone / fax number	<i>[insert telephone/fax numbers, incl. country/city area codes]</i>			
Email:	<i>[insert e-mail address, if available]</i>			



13. Form EXP-4.2 (b): Construction Experience in Key Activities

Applicant's Name:

Date:

Joint Venture Member's Name:

ICB No. and Title:

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The Applicant must provide evidence of Construction Experience in Key Activities in **minimum two (2) relevant contracts**.

The similarity shall be based on the physical size, complexity, methods/technology and/or other characteristics described in Section VII, Scope of Works. Summation of number of small value contracts (less than the value specified under requirement) to meet the overall requirement will not be accepted.

A project is defined as substantially completed after the issuance of the Taking Over certificate by the Employer for all the works.]

For contracts under which the Applicant participated as a joint venture member or sub-contractor, only the Applicant's share, by value, shall be considered to meet this requirement.

For all key activities under Section III, Qualifications Criteria and Requirements, Sub-factor 4.2 (b) above, the Applicant shall provide evidence/document best illustrating the indicated experience.

- (a) Confirmation of the Employer, on the Employer's/End User's letterhead
- (b) Copy(ies) of the Contract(s)
- (c) Copy(ies) of Taking-over Certificate(s)
- (d) Reference Letters from the Employers.

Documents shall be submitted in the Application. It shall be on the Employer's/Owner's letterhead, indicating address, telephone and fax numbers of the user. It shall include name of the project, name of the employer, description of the work, commissioning date and contract amount.

Attached are Documents as required above.



Similar Contract No. _____ <i>[insert ordering number of similar contracts required]</i>	Information
Description of the similarity in accordance with sub-criterion 4.2 of Section III	
Construction of new single and/or double circuit 110 kV or above voltage overhead transmission lines including the design, supply, installation, testing and commissioning of the following works: * minimum ten (10) km route length, of single/double circuit line. * at least 1 (one) similar contract shall be implemented in the European Area.	
Name of transmission line, country	<i>[insert transmission line name and country of performance]</i>
Type of transmission line: single or double	<i>[insert single or double circuit transmission line]</i>
Voltage level: 110 kV or higher	<i>[insert voltage level]</i>
Transmission line length	<i>[insert transmission line length]</i>
Towers	<i>[insert number, type, rating, characteristics]</i>
Conductor	<i>[insert number, type, rating, characteristics]</i>
Insulators	<i>[insert number, type, rating, characteristics]</i>
Earthing wire/OPGW	<i>[insert number, type, rating, characteristics]</i>
Description	<i>[insert short description, including physical size, complexity, other]</i>



<p>Similar Contract No. _____ <i>[insert ordering number of similar contracts required]</i></p>	<p>Information</p>			
<p>Method statement/QA documents</p>	<p><i>[provide</i> <i>Methodology, Technology, Method statement, Procedures, Checking lists, Testing & Commissioning Report, QA documents for Installation, Testing and Commissioning of:</i></p> <ul style="list-style-type: none"> ➤ <i>Civil works</i> ➤ <i>Towers - Installation</i> ➤ <i>Conductors and Earthing wire / OPGW - Installation/Stringing</i> 			
<p>Drawings</p>	<p><i>[provide minimum following drawings:</i></p> <ul style="list-style-type: none"> ➤ <i>General Layout / Line route,</i> ➤ <i>Line profile,</i> ➤ <i>Tension/Suspension tower</i> ➤ <i>Photos, etc]</i> 			
<p>Evidence</p>	<p>Confirmation On Employer's/Owner's letterhead <input type="checkbox"/></p>	<p>Contract <input type="checkbox"/></p>	<p>Taking-over Certificate <input type="checkbox"/></p>	<p>Reference letter <input type="checkbox"/></p>



15. Form CER-5.1(b): Health and Safety Certification

Applicant's Name:

Date:

Joint Venture Member's Name:

ICB No. and Title:

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Description	Information	
Identification of the certificate	<i>[insert full name of the certificate]</i>	
First award date	<i>[insert day, month, year of first certificate award]</i>	
Last update of the certificate	<i>[insert day, month, year of latest renewal, if any]</i>	
Issuers Name	<i>[insert full name]</i>	
Address	<i>[insert street / number / town or city / country]</i>	
Telephone/fax number	<i>[insert phone/fax no., incl. country & city area codes]</i>	
E-mail	<i>[insert e-mail address, if available]</i>	
Compliance with international standards or	The certificate is OHSAS 18001: <input type="checkbox"/> Yes <input type="checkbox"/> No	The certificate is ISO 45001: <input type="checkbox"/> Yes <input type="checkbox"/> No
Compliance with Montenegrin Standards	A natural person or an organisation is authorised by the responsible Institution in Montenegro for performance of tasks of Safety and Health at work <input type="checkbox"/> Yes <input type="checkbox"/> No	

