

REQUEST FOR EXPRESSION OF INTEREST FOR PROVISION OF TEMPORARY MEDICAL SERVICES

REFERENCE NO.: CPP-PROC-TZ-035-0719

China Petroleum Pipeline Engineering Co., Ltd. (hereinafter abbreviated as CPP) as Pipeline, Federline & Above Ground Installation Contractor for the East African Crude Oil Pipeline (EACOP) Project invites experienced and reputable Contractors to express their interest in providing temporary medical services for early civil work to the EACOP Project. And the previous EOI of No. **CPP-PROC-TZ-026-0418** will be cancelled and replaced by the new one No. **CPP-PROC-TZ-035-0719**.

The EACOP Project involves the construction and operation of an underground and cross-border pipeline to transport crude oil for export to international markets. The pipeline will run from Kabaale, Hoima District in Uganda to the Chongoleani peninsula near Tanga in Tanzania. The length of the pipeline is 1,443 km, of which 1,147 km will be in Tanzania.

BRIEF DESCRIPTION OF THE SCOPE OF THE SERVICES:

- ♦ Provision of qualified doctors, paramedics and nurses for healthcare for project employees 24/7.
- ♦ Provision of 24/7 emergency care services.
- ♦ Provision of standard ground ambulances with full equipment and first aid trained drivers, standby 24/7 as per approved MERP and EACOP guideline/requirements.
- ♦ Provision of Medical Evacuation Response Plan (MERP) and emergency evacuation services available 24 hours a day, 365 days a year.
- ♦ Provision of Medical equipment and supplies for MCPYs and AGIs medium scale clinics.
- ♦ Ensure provision of adequate number of medical supplies, emergency treatment kits, medicines and other clinical stock as per the EACOP requirements.
- ♦ Provision of Malaria blood test / analysis equipment and quick diagnosis kits and subsequent treatment.
- ♦ Provision of health care and hygiene trainings.
- ♦ Provision of Injury & Illness Case Management, on time reporting and record management for auditing purposes.

MINIMUM QUALIFICATION REQUIREMENTS:

Companies or organizations expressing their interest are invited to document their request with:

- Demonstrate the capacity and resources to implement a trans-boundary MERP. Or references of similar services for trans-boundary MERP cases.
- Compliance with certificate requirement of Healthcare Practitioners in Tanzania, doctors shall have ALS/BLS certificate.
- In accordance with the legislation of the host countries, all Ambulance Drivers shall have first-aid level PSE2 (First-aid training team, level 2) or AFA (OGP level 2) upon hiring, plus continuous first-aid training.
- State-qualified anesthetist nurses (IADE), State-qualified emergency nurses (IDE), specialized medics or paramedics. Additional training: University diploma (DU) in disaster medicine or equivalent.
- Medical staff shall prove strong experience in an Emergency (or Intensive Care) department, and pre-hospital emergency medicine. Up to date with their continuous emergency training: in possession of ACLS, PHTLS, ATLS qualifications, or equivalent.
- Proof of registration with the Tanzania Revenue Authority (TRA).

- Proof of registration/application to the EWURA Local Supplier Service Provider (LSSP) database at the time of submission of the response to this expression of interest is strongly recommended.
- Speaking languages shall cover fluent English and native language.
- Compliance with Petroleum (Local Content) Regulations, 2017, and Local Company definition for Tanzania.
- Fully filled Questionnaire, Key personnel list with CV (Appendix 1), and list of Similar Supplying Experience (Appendix 2) in the requested format. (Blank regards as an unqualified item.)
- Copy of certificates of ISO 9001, ISO 45001, ISO 14001 or equivalent of them.
- Tax Clearance Certificate for the latest year available.

Companies which have the ability, capacity, and resources to implement the activities listed above should express their interest by sending together with the documents stated in the above section through an email to **biddingbox@cpptz.com** (Max. Email Size: 20 MBs, all documents must be submitted in the English language) on or before **24:00 hours East African Time (EAT)**, on **3rd August 2023**. Subject of the email should be **"EOI for CPP-PROC-TZ-035-0719-COMPANY NAME"**. CPP reserves the right not to consider companies that submit an incorrect email subject and the incorrect format of Questionnaire, Appendix 1 and 2.

The format of the required documents and relevant technical requirements which are mentioned in Minimum Requirements should be downloaded from EACOP's website

(<https://eacop.com/opportunities-by-main-construction-contractors/china-petroleum-pipeline-engineering-co-ltd/>).

Note: CPP will review and assess the documents provided by companies that have expressed interest in accordance with this EOI and conduct evaluations based on internal criteria to determine which companies will be included in the list of pre-qualified companies. Only the pre-qualified companies will receive, by signing a Non-Disclosure Agreement (NDA), an invitation to bid as a continuation of the call for tender process. CPP reserves the right at its sole discretion to make the decision to select or reject a company and maintain its decision without having to give reasons to the company concerned.

APPENDIX 1 List of the Key Personnel

| No. | Title | Name | Years of Experience | Qualification Certificates | | Location | Notes |
|-----|-------|------|---------------------|----------------------------|-----------------|----------|-------|
| | | | | Name of the Certificate | Certificate No. | | |
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Notes: pls attach the CV & scanned copies of certificates etc.

APPENDIX 2 List of Similar Supplying Experience

| Client | Contact Information of Client (Email/Phone number) | Location | Years | Name of the Project | Scope of Supply | Status of the Project (Completed / Ongoing) | Bidder's Contract Value | Notes |
|--------|---|----------|-------|---------------------|-----------------|--|-------------------------------|-------|
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Notes:

1. Please attach following documents: scanned CONTRACT for completed project or LETTER of AWARD for ongoing projects, completion certificate (if any), appreciation letters (if any) etc.
2. The information of the PROJECT mentioned above may be confirmed by CPP with the assistance of EACOP COMPANY.

Questionnaire for the Pre-qualification of Provision of Medical Services

**NOTE: Please provide documents named by serial number according to each item.
 CPP reserves the right not to consider companies that submit Questionnaire filled by hand.**

| Item No. | Category / Question | |
|----------|--|--|
| 0 | *NC/LC REQUIREMENTS | |
| 0.1 | General Requirements | |
| 0.1.1 | Is the Applicant fully aware of the local climatic and working conditions of country and the local applicable laws to carry out the SERVICE? (Yes or No) | |
| 0.1.2 | Applicant to confirm that the full Scope of the SERVICE can be performed. (Yes or No) | |
| 0.2 | National Content Requirements for Uganda (Applicable for Uganda) | |
| 0.2.1 | Proof of business registration and business license for Uganda. | |
| 0.2.2 | Proof of registration with the PAU National Supplier Database (NSD) for Uganda. | |
| 0.2.3 | Compliance with the Petroleum Midstream National Content Regulation # 34,2016 for Uganda. | |
| 0.3 | Local Content Requirements for Tanzania (Applicable for Tanzania) | |
| 0.3.1 | Proof of business registration and business license for Tanzania. | |
| 0.3.2 | Proof of registration/application to the EWURA Local Supplier Service Provider (LSSP) database at the time of submission of the response to this expression of interest is strongly recommended. | |
| 0.3.3 | Compliance with Petroleum (Local Content) Regulations, 2017 and Local company definition for Tanzania. | |
| 1 | GENERAL INFORMATION | |
| 1.1 | Company Data | |
| 1.1.1 | Name of Applicant | |
| 1.1.2 | Introduction of Applicant (establishing time,Copies of government issued IDs for all shareholders,main business scope,etc.) | |
| 1.1.3 | Applicant address | |
| 1.1.4 | Applicant phone number | |
| 1.1.5 | Applicant email address | |

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|----------|---|--|
| 1.1.6 | Applicant Website | |
| 1.1.7 | * Manufacturer's Commitment Letter/Manufacturer's authorization | |
| 1.2 | Authorized contact person and contact details | |
| 1.2.1 | Name of authorized contact person | |
| 1.2.2 | Contact person's business address - phone number | |
| 1.2.3 | Contact person's business address - mobile phone number | |
| 1.2.4 | Contact person's business address - email address | |
| 1.3 | Organization Chart | |
| 1.3.1 | Applicant is requested to attach its organization chart. | |
| 1.4 | Language | |
| 1.4.1 | English shall be used as the Project language for all documents and correspondence - applicant to confirm | |
| 2 | FINANCIAL ASPECTS | |
| 2.1 | Bank information | |
| 2.1.1 | Name of Applicant's principal bank | |
| 2.1.2 | Address of Applicant's principal bank - street and number | |
| 2.1.3 | Address of Applicant's principal bank - post code and city | |
| 2.1.4 | Address of Applicant's principal bank - country (and state) | |
| 2.2 | *Registration with the Tax Revenue Authority | |
| 2.2.1 | Registration with the Uganda Tax Revenue Authority, including TIN Certificate.(Applicable for Uganda) | |
| 2.2.2 | Registration with the Tanzania Tax Revenue Authority, including TIN Certificate.(Applicable for Tanzania) | |

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| Item No. | Category / Question | |
|----------|--|-----|
| 2.3 | * Proof of Tax Clearance Certificate | |
| 2.3.1 | Proof of Uganda Tax Clearance Certificate for the latest year.(Applicable for Uganda) | |
| 2.3.2 | Proof of Tanzania Tax Clearance Certificate for the latest year. (Applicable for Tanzania) | |
| 2.4 | Audited financial statements | |
| 2.4.1 | Applicant 's financial performance documents, Audited Balance sheets and Profit and Loss statements, Auditors Report and Notes to Accounts etc. for last 3 (three) years. Latest financial statement should not be older than 18 months on the date of submission of response to this Expression of Interest. | |
| 3 | LITIGATION HISTORY, RISK ASSESSMENT AND ELIGIBILITY | |
| 3.1 | Litigation or arbitration history | |
| 3.1.1 | Provide information on any history of litigation or arbitration resulting from orders executed in the last (5) years or currently under execution, especially with CPP. (Yes or No) | |
| 3.2 | Eligibility | |
| 3.2.1 | Does Applicant appear on World Bank's common List of Ineligible Entities available under the following link http://www.worldbank.org/debarr or is Applicant subject to any sanction from World Bank and from UN? This must be similarly affirmed if the Applicant is an Affiliate or otherwise directly or indirectly controlled by such an ineligible entity. (Yes or No) | |
| 4 | QA/QC, HSE, CERTIFICATES, KEY PERSONNEL | |
| 4.1 | Accredited by American Heart Association (AHA) and Resuscitation Council of South Africa (RCSA). | |
| 4.2 | Please provide Applicant's ISO 9001:2015 Certificate. | |
| 4.3 | Please provide Applicant's ISO 45001:2018 Certificate (or equivalent). | |
| 4.4 | Please provide Applicant's ISO 14001:2015 Certificate (or equivalent). | N/A |

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| Item No. | Category / Question | |
|----------|--|-----|
| 4.5 | Please provide QA/QC manuals. | |
| 4.6 | Any other technical Certificates (API, etc.). | N/A |
| 4.7 | Please provide key personnel list, Format refer to Appendix 1. | |
| 5 | PROJECT SPECIFIC OUTPUT, CAPACITY, ABILITY | |
| 5.1 | According to your present workload what is the approximate time period (in weeks) for the first dispatch after purchase order award ? | |
| 6 | EXPERIENCE RECORD AND REFERENCES | |
| 6.1 | Please provide similar experience within last three years, Format refer to Appendix 2. | |
| 6.2 | Please provide scanned CONTRACT for completed project or LETTER of AWARD for ongoing projects, completion certificate (if any), appreciation letters (if any) etc. | |
| 6.3 | Please confirm whether there have been any product quality incidents in the past 5 years (Yes or No) . | |
| 7 | DIVERSE DATA | |
| 7.1 | <p>Please confirm that you will provide on-site Services such as provision of re-assembly, supervision of site acceptance, assistance during quality warranty period. (If Applicable, Yes or No)</p> <p>Please confirm that you will provide on-site Services, including installation, power on and coordinate with local government departments, etc. (Only applicable to transformer suppliers, Yes or No)</p> | |