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| **PROVISION OF 24-HOUR PRIVATE SECURITY SERVICES FOR MMABANA MAHIKENG REGIONAL OFFICE FOR THREE (3) YEARS.** |

**ANNEXURE A-EVALUATION SCHEDULE: CLIENT REFERENCES**

Name of Bidder: ...............................................................................................................................

**Bid no**.: **MACSF002/B/MAHIKENG OFFICE/2024**

The bidder shall provide details of his or her performance on each of the previous projects listed in the “Relevant Experience” returnable schedule. “Client Reference Scorecards” will be completed by each of the previous and current respective clients for the projects listed in the “Relevant Experience” returnable schedule. Unsigned forms by the client & principal agent will score zero point.

**REPORT ON CONTRACTOR’S COMPETANCE & PERFORMANCE ON SIMILAR PROJECTS FOR TENDER RECOMMENDATION PURPOSES.**

The following are to be completed by **Client and Principal Agent**.

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| **PROJECT DESCRIPTION………………………………………………………………………………………………………………** |

**Part A: Client**

* Principal Agent Details: ……………………………………………………………………………..
* Client Name/Details: ………………………………………………………………………………..
* Contact Person at a Client: …………………………………………………………………………
* Contact Number: ……………………………………………………………………………………..
* Email Address: ………………………………………………………………………………………..
* Contract Amount: …………………………………………………………………………………….
* Initial Contract Duration: …………………………………………………………………………..
* Actual Contract Duration: ………………………………………………………………………….

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| **Performance description** | **Percentage (%) awarded- Scale of 0 to100** |
| * Quality of office administration, site management, competence of foreman or supervises, Co-operation during contractual term. * Adequacy of equipment, labour force and project management. |  |

**Part B: Principal Agent & Client**

Initial & Surname- Principal Agent: ………………………………………………………

Signature: …………………………………………. Date: …………………………………

Initial & Surname- Client: …………………………………………………………………

Signature: ………………………………………… Date: …………………………………

Client Stamp:

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