REQUEST TO PARTICIPATE SUBMISSION FORM

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| **Procurement title:** | PCO for World Water Week (WWW) in Stockholm, 2019-2021 |
| **Reference:** | PCOWWW 2019-2021 |

# General information

This Request to participate submission form **must** be completed, signed and submitted in pdf-format by the candidate.

# Administrative conditions

## Information about the candidate

The term “candidate” refers to the organization submitting the request to participate. The candidate **must** submit the required information regarding the organization as well as the authorized signatory and the contact for the candidate.

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| **Official name** |  |
| **Organization number** |  |
| **Postal address** |  |
| **Website** |  |

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| **Name of authorized signatory** |  |
| **Title of authorized signatory** |  |

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| **Name of contact** |  |
| **Contact telephone number** |  |
| **Contact email address** |  |

## Consortium

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| Does the candidate constitute a consortium?  If the answer is “yes”, the candidate **must** provide information regarding the members of the consortium: | | Yes  No |
| **Consortium member No.** | **Full name and corporate identity number of the consortium member** | |
| **I. (Consortium leader)** |  | |
| **II.** |  | |
| **III.** |  | |
| Do the members of the consortium assume joint and several liability towards SIWI for the contact as a whole? | | Yes  No |

## Subcontracting

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| Does the candidate have subcontractors?  If the answer is yes, the candidate **must** provide information regarding the subcontractors: | | Yes  No |
| **Subcontractor No.** | **Full name and corporate identity number of the subcontractor** | |
| **I.** |  | |
| **II.** |  | |
| **III.** |  | |
| Does the candidate assume full liability towards SIWI for the performance of the contract as a whole? | | Yes  No |

# Requirements relating to the candidate

## Exclusion criteria

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| **Criteria relating to criminal convictions** | **Answer:** |
| Has the candidate itself or any person who is a member of its administrative, management or supervisory body or has powers of representation, decision or control therein been the subject of a conviction by final judgement for one of the following reasons:   1. Participation in a criminal organization 2. Corruption 3. Fraud 4. Terrorist offences or offences linked to terrorist activities 5. Money laundering or terrorist financing 6. Child labor and/or other forms of human trafficking. | Yes  No |
| **Criteria relating to insolvency** | **Answer:** |
| Is the candidate in any of the following situations:   1. Bankruptcy 2. Subject to insolvency or winding-up procedures 3. Having its affairs administered by the courts 4. Entered into an arrangement with creditors 5. Suspended business activities 6. Subject of proceeding concerning the above matters, or 7. In any analogous situation arising from a similar procedure provided for in national legislation or regulations? | Yes  No |
| **Criteria relating to professional misconduct** | **Answer:** |
| Has the candidate been the subject of a conviction by final judgement of an offence concerning its professional conduct? | Yes  No |
| Is the candidate guilty of grave professional mis­conduct? | Yes  No |
| **Criteria relating to payment of taxes and social security contributions** | **Answer:** |
| Has the candidate met all its obligations relating to the payment of taxes and social security contributions | Yes  No |
| **Criteria conflict of interests and information** | **Answer:** |
| Is the candidate aware of any conflict of interest due to its participation in the procurement procedure? | Yes  No |
| Can the economic operator confirm that:   1. It has not been guilty of serious misrepresentation in supplying the information required for the verification of the absence of the grounds for exclusion or the fulfillment of the selection criteria, 2. It has not withheld such information? | Yes  No |

## Selection criteria

### Legal capacity

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| **Legal capacity** | **Answer:** |
| Is the candidate enrolled in the relevant professional or trade registers kept in the country of its establishment?  **Document to be submitted:**  Copy of certificate of registration. | Yes  No |
| Is the candidate registered for the payment of value added tax, withholding tax, employee contributions or similar taxes or charges in accordance with the law of the country of the candidate’s establishment?  **Document to be submitted:**  Copy of certificate of registration. | Yes  No |

### Economic and financial capacity

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| **Financial** | **Answer:** |
| The candidate’s specific yearly turnover for the last 3 financial years is as follows:  **Document to be submitted:**  Annual reports for the last 3financial years | Year: 2014  Turnover: […………] SEK  Year: 2015  Turnover: […………] SEK  Year: 2016  Turnover: […………] SEK |
| The insured amount of the candidate’s indemnity insurance as follows:  **Document to be submitted:**  Copy oftype ofinsurance | Identification of the insurance – and the insured amount) |

### Professional and technical capacity

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| **Professional and technical capacity** | **Answer:** |
| The candidate **must** have a professional experience of at least 5 years in providing event services. | A description of 3 similar projects (preferably of international character) which are similar to the supplies/services concerned here. Such information should include contact information if SIWI needed to verify this information. |

### Quality assurance standards and environmental management standards

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| **Quality Assurance Systems and Environmental Management Standards** | **Answer:** |
| The candidate **must** have quality assurance standards in place | A description of the candidate’s quality assurance processes and or a copy of obtained certificates. |
| The candidate **must** have environmental management systems in place. | A copy of the candidate’s certificate or a description of the candidate’s internal environmental management systems |

# Requirements relating to the services

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| On-line registration system delivery | **Answer:** |
| The PCO **must** offer on-line registration system for all world water week delegates.  The system should be able to handle payments, offer booking for accommodation and handle invitation for 50 different special guest categories. | Yes  No |
| **Comments:** | |

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| Participant registration process | **Answer:** |
| The PCO **must** offer WWW delegates service prior to and after the event, such as: issue visa letters, provide registration confirmations, send out reminders, assist with registration issues, handle payments and refunds. | Yes  No |
| **Comments:** | |

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| Travel & Accommodations | **Answer:** |
| The PCO **must** provide SIWI & WWW delegates with bookings of travel & accommodations (approx. 1500 nights). Service should include: negotiating and booking allotment, planning, assist delegates with bookings, handle cancelations, follow up and invoicing. | Yes  No |
| **Comments:** | |

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| Project leading and administration | **Answer:** |
| The PCO **must** offer SIWI a dedicated project leader to plan and administrate WWW. This includes budget, planning, regularly meetings, follow-up, reports, proactively present solutions and improvements. | Yes  No |
| **Comments:** | |

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| On-site delivery | **Answer:** |
| The PCO **must** offer SIWI & WWW delegates registration services on-site at venue during the event. Project leader should plan and manage the staff required present on-site: scanning hostess, staffing registration desk, printing badges, payments. | Yes  No |
| **Comments:** | |

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| Innovation and proactivity | **Answer:** |
| The PCO **shall** offer SIWI innovative solutions and work proactively. | Yes  No |
| **Comments:** | |

# Candidate’s Declaration and Signature

## Formal requirements

The request to participate **must** be signed by the authorized signatory of the candidate.

This page may be scanned and appended as a separate appendix to the request to participate.

## Candidate’s declaration

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| **I, the undersigned, being the authorized signatory of the above candidate, hereby declare the following:**   * **that the candidate is not subject to any of the situations listed in section 3.1,** * **that all the requirements stated in the procurement documents are fulfilled,** * **and that all the information provided in this request to participate is accurate and correct.** | |
| **Signature** |  |
| **Name in block letters** |  |
| **Title** |  |
| **Place and date** |  |

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| If the signatory is not the authorized signatory of the candidate, a signed power of attorney must be appended to the request to participate, stating that the person in question is authorized to sign on behalf of the candidate. |