



BIIROO KONISTIRAAKSHINII MOOTUMMAA NAANNOO OROMIYAA

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OROMIA REGIONAL STATE CONSTRUCTION BUREAU



Company Profile and Project Status Reporting Form For Contractor

April 2020

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1 Profile of the Contractor

Contractor's Legal Name: _____

Nationality: _____

Address

City: _____

Street: _____

Website: _____

Email: _____

Fax: _____

P.O. Box: _____

Tel No.: _____

1.1 Legal Information

TIN No: _____

VAT Reg. No: _____

Tread License Reg. No: _____

Construction License Reg. No: _____

1.2 Technical Capability

1.2.1 Experience of the Contractor

State all projects you have been performing for the past 5 years starting from latest to oldest and fill all required information in the table 1.1 below.

Table: 1-1

Name of project/kind of works	Value of Works	Period of Contract	Percentage of Works Completed	Client and Place	Prime Contractor (P) or Subcontractor (S)	Final acceptance issued?
A. In Home Country						
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>

Name of project/kind of works	Value of Works	Period of Contract	Percentage of Works Completed	Client and Place	Prime Contractor (P) or Subcontractor (S)	Final acceptance issued?
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
B. Abroad						
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>
						Yes: <input type="checkbox"/> Not Yet <input type="checkbox"/> No: <input type="checkbox"/>

1.2.2 Professional Capacity of the Contractor

State all permanent technical staff of your company in the table 1.2 below.

Table 1-2: Manpower list in the company

No.	Position	Name	profession / filed of specialization	General Experience	Similar Experience	PLN or DLN for operators	Gross monthly Salary	Employment Agreement
1								
2								
3								
4								
5								
6								
7								
8								
9								

NB

- 1) All labors in the company have to be recorded
- 2) If the above table not sufficient; provide copies or inserting row and provided the information you have
- 3) PLN (professional license number)
- 4) DLN (Driver License number)

1.2.3 Resource Capacity of the Contractor

Table 1-3: List of Office Equipment

No	Equipment type (Name)	Identification. No	Production date	Capacity
1				
2				
3				
4				
5				
6				
7				
8				
9				

Table 1-4: List of Machinery and Plants

No	Equipment type	Identification. No	Production date	Capacity
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

NB

- 1) *If the above table not sufficient; provide copies or inserting row and provided the information you do not want to left*

1.2.4 Financial Performance

Table 1-5: Contractor financial information

Year	Start	1st Year	2nd Year	3rd Year	4th Year	5thYear (last year)	Total
Money in (1)							
Money out (2)							
Cost of goods (3)							
Overhead cost (4)							
Total money out (5) 3&4							
Cash flow positive/negative (6= (1)-(5))							
Beginning checking Account Balance (7)							
Ending Checking Account Balance (8= (7) +(6))							

Table 1-6: contractor compliance

Financial Information	(Birr)				Average
	Year 1	Year 2	Year 3	Total	
Statement of financial position (information from balance sheet)					
Total assets (TA)					
Total financial liabilities					
Total equity/Net worth (NW)					
Current assets					
Current liabilities					
Working capital (WC)					
Current Asses/Current Liabilities					
Information from income statement					
Total revenue					
Earnings before interest, taxes, depreciation, and amortization (EBITDA)					
Earnings before taxes (EBT)					
Cash flow information					
Cash flow from operating activities					

Table 1-7: contractor cash flow requirement

Cash Flow Requirement (Net of the Contractor other commitments shall be greater or equal to cash flow requirement of this project)	
Financial Resource	Amount in Birr
Line of intent of credit	
credit deposit	
Total	
Total monthly invoice amount of Current Commitments	
Cash flow requirement for this project	
Net of the Bidder's other commitments	

Table 1-8: contractor Annual Turnover

Annual Turnover (Birr)					
Year 1	Year 2	Year 3	Year 4	Year 5	Average

1.2.5 Ongoing Projects

Table 1-9: List out all ongoing projects carrying out by your company

No	Name of the project	Client	Supervisor
1			
2			
3			

2 Project Status Report

2.1 Executive Summary

Summarise the progress of each progress separately in not more than 2 pages. Include a summary of the Works Physical and Financial Progress against planned progress. Highlight major issues and their resolution.

2.2 Project Information

Table 2-1: Project Information

Project Type:		Reporting Period:	From:	
			To:	
Project Name:				
Project Description:				
Name of person completing this report: (incl. title and e-mail address)				

Contract Data

Table 2-2: Contract Data

Construction Contract Data	
Funding	
Client	
Type of Contract	
Contractor	
Notification of Award	
Contract Signing Date	
Commencement Date	
Original Completion Date	
Original Contract Period	
Extension of Time Approved (days)	
Revised Completion Date	
Actual Completion Date	
Delay period (days)	

Financial Data	Local Currency (ETB)
Contract Amount	
Liquidated Damages	
Advance Payments	
Price Adjustment to date	
Value of Variations Approved	
Payments to date (incl. advance)	

Guarantees	
Performance Guarantee	
Date Received	
Expiry Date	
Amount (Foreign Currency)	
Amount (Local Currency)	
Advance Guarantee	
Date Received	
Expiry Date	
Amount (Foreign Currency)	
Amount (Local Currency)	

2.2.1 Manpower assigned for this project

Table 2-3: List of Manpower

No	Position	Name	Profession / filed of specialization	General Experience	Similar Experience	PLN or DLN for operators	Gross monthly Salary	Employment Agreement
1								
2								
3								
5								
6								

NB

- 1) If the above table not sufficient; provide copies or inserting row and provided the information you have*
- 2) PLN (professional license number)*
- 3) DLN (Driver License number)*

2.2.2 List of equipment assigned for this project

Table 2-4: List of equipment

No	Equipment type	Identification. No	Production date	Capacity	Average Recorded Productivity while performing
1					
2					
3					
4					
5					
6					

2.2.3 Financial Management

Provide a summary of the financial progress of the project.

Provide a table showing details of Variation Orders (VOs) granted, or pending, and a table showing details of claims and potential changes that have cost or time implications.

Table 2-5: Variation Orders issued

VO No.	Description	Amount of Varied Work		Date of Issue	Status
		Addition as result of VO (ETB)	Reduction as result of VO (ETB)		
VO-1					

Table 2-6: Variation Orders Pending / Claims

Item No.	Description	Potential Addition (ETB)	Potential Reduction (ETB)	Date of Notification	Remarks / Status

1) Contractor cash flow for project stated above

Table 2-7: monthly cash flow table

Month	Start	1 st month	2 nd month	3 rd month	4 th month	5 th month	6 th month	7 th month	Total
Money in (1)									
Money out (2)									
Cost of goods (3)									
Overhead cost (4)									
Total money out (5) 3&4									
Cash flow positive/negative (6= (1)-(5))									
Beginning checking Account Balance (7)									
Ending Checking Account Balance (8= (7) +(6))									

Table 2-8: Quarterly cash flow table

Quarter	Start	1 st quarter	2 nd quarter	3 rd quarter	4 th quarter	5 th quarter	6 th quarter	7 th quarter	Total
Money in (1)									
Money out (2)									
Cost of goods (3)									
Overhead cost (4)									
Total money out (5) 3&4									

Cash flow positive/negative (6= (1)-(5))									
Beginning checking Account Balance (7)									
Ending Checking Account Balance (8= (7) +(6))									

Table 2-9: Yearly cash flow table

Year	Start	1 st Year	2 nd Year	3 rd Year	4 th Year	5 th Year	Total
Money in (1)							
Money out (2)							
Cost of goods (3)							
Overhead cost (4)							
Total money out (5) 3&4							
Cash flow positive/negative (6= (1)-(5))							
Beginning checking Account Balance (7)							
Ending Checking Account Balance (8= (7) +(6))							

NB

- 1) If the above tables not sufficient; provide copies or inserting column and provided the information you have
- 2) It is better to use all the above tables, and also it is advisable to use one table for each project
- 3) Contract value (project cost): _____
- 4) Cost after completion: _____
- 5) If the project is on progress the above 6-8 are replaced by the followings
- 6) Physical status (%): _____
- 7) Financial status (%): _____
- 8) Total payment collected: _____
- 9) If the project is complex project state the followings
 - a) State special equipment / machineries you are using for

 - b) State technologies you are using for

 - c) Construction materials you are using for

 - d) Laboratory and filed tests

 - e) Specialized professionals and filed of specialization

2.2.4 Key Issues

Identify and summarise key issues that may effect the period of performance or cost of the works contract. Propose solutions where appropriate. Indicate revised schedule in the following table considering the issues discussed.

Table 2-10: Project Schedule

Project Start Date:		Planned End Date:				
Major Milestones		Status	Plan Date	Revised	Actual Date	% Complete
1						
2						
3						