

## **Tender Submission - Instruction to bidders**

It is mandatory for Bidders to upload a copy of their bid in the **TENDER LINK** Electronic Tender Box no later than **4:00pm on Wednesday 18<sup>th</sup> NOVEMBER, 2015**.

To register your interest and tender a response, view 'Current Tenders' at:  
<https://www.tenderlink.com/fea>

For further information contact The Secretary Tender Committee, by e-mail  
[TDelairewa@fea.com.fj](mailto:TDelairewa@fea.com.fj)

In addition, hard copies of the tender, one original and one copy must be deposited in the tender box located at the FEA Head Office, 2 Marlow Street, Suva, Fiji no later than **4:00pm, Wednesday 18<sup>th</sup> NOVEMBER, 2015**- Addressed as

### **Tender – MR 177/2015 – Supply of CAT3516 Generator Overhaul Parts**

**The Secretary Tender Committee  
Fiji Electricity Authority  
Head Office  
Suva  
Fiji**

- **Hard copies of the Tender bid will also be accepted after the closing date and time provided a soft copy is uploaded in the e-Tender Box and it is dispatched before the closing date and time.**
- **Tenders received after 4:00pm on the closing date of **Wednesday 18<sup>th</sup> NOVEMBER, 2015**, will not be considered.**
- **Lowest bid will not necessarily be accepted as successful bid.**
- **It is the responsibility of the bidder to pay courier chargers and all other cost associated with the delivery of the hard copy of the Tender submission.**

**TENDER SUBMISSION CHECK LIST**

***The Bidders must ensure that the details and documentation mention below must submitted as part of their tender Bid***

Tender Number \_\_\_\_\_

Tender Name \_\_\_\_\_

1. Full Company Name: \_\_\_\_\_  
**(Attach copy of Registration Certificate)**
2. Director/Owner(s): \_\_\_\_\_
3. Postal Address: \_\_\_\_\_
4. Phone Contact: \_\_\_\_\_
5. Fax Number: \_\_\_\_\_
6. Email address: \_\_\_\_\_
7. Office Location: \_\_\_\_\_
8. TIN Number: \_\_\_\_\_  
**(Attach copy of the VAT Registration Certificate – Local Bidders Only)**
9. Company Registration Number: \_\_\_\_\_  
**(Attach copy of the Business License)**
10. FNPF Employer Registration Number: \_\_\_\_\_  
**(For Local Bidders only)**
11. Contact Person: \_\_\_\_\_

I declare that all the above information is correct.

Name: \_\_\_\_\_ Position: \_\_\_\_\_ Sign: \_\_\_\_\_

Date: \_\_\_\_\_