

**Expression of Interest (EOI) for Consulting Firms – Consultancy for the Development of a Landslide Asset Management System (LAMS) for the National Building Research Institute (NBRI) under the AIIB-funded Reduction of Landslide Vulnerability by Mitigation Measures Project (RLVMMP).**

**Contract No:** RLVMMP/CONSUL/Comp.04/Asst.M/10

**EOI Submission Form**

**Project Name:** Reduction of Landslide Vulnerability by Mitigation Measures Project (RLVMMP) – Consultancy for the Development of a Landslide Asset Management System (LAMS)

**Project Country:** Sri Lanka

**Loan No./Grant No.:** L0124A

**Reference No:** RLVMMP/CONSUL/Comp.04/Asst.M/10

**I. Consulting Firm Information**

Date of Incorporation: \_\_\_\_\_

Country of Incorporation: \_\_\_\_\_

1 Consultant Name: \_\_\_\_\_

2 Acronym: \_\_\_\_\_

EOI Submission Authorized by: \_\_\_\_\_

Capacity (Designation): \_\_\_\_\_

**Associations (Joint Venture or Sub-consultancy)**

| Consultant | Acronym | Country of Incorporation <sup>1</sup> | Joint Venture (JV) or Sub-consultant | EOI Submission Authorized By | Position |
|------------|---------|---------------------------------------|--------------------------------------|------------------------------|----------|
|            |         |                                       |                                      |                              |          |
|            |         |                                       |                                      |                              |          |
|            |         |                                       |                                      |                              |          |

**I confirm that:**

- ☐ Documentation regarding our corporate structure including beneficial ownership has been attached.
- ☐ Documentation regarding the authorized signatory (Power of Attorney) has been attached.
- ☐ A written agreement to associate for the purpose of this Expression of Interest has been signed between the consortium partners and has been attached.

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<sup>1</sup> The lead consultant must submit a copy of the Certificate of Incorporation of itself and of each JV member and sub-consultant through IV. EOI Attachments.

## II. Relevant Experiences

### A. General Experience

A1. The firm shall have experience of at least 10 years in the field of Software Development for Asset Management Systems, where at least two comparable assignments have been completed within the last five years. In case of a Joint Venture, at least one member must meet this requirement.

| Year | Name of Client and Project Name | Type of Service | Current Status (Completed / Ongoing) |
|------|---------------------------------|-----------------|--------------------------------------|
|      |                                 |                 |                                      |
|      |                                 |                 |                                      |
|      |                                 |                 |                                      |

A2. Software Development for Asset Management related consultancy experience within the last 10 years – Minimum 02 contracts of Consultancy Contract Amount not less than LKR 159.50 Million (USD 0.48 Mn).

| Item | Name of Client & Project Name | Type of Service | Duration (Start/End date) | Location of Service | Contract Amount of Consultancy (Rs) |
|------|-------------------------------|-----------------|---------------------------|---------------------|-------------------------------------|
| 1    |                               |                 |                           |                     |                                     |
| 2    |                               |                 |                           |                     |                                     |

### B. Specific Experience

Specific experience in developing an Asset Management System, or related consultancy experience, complying with the requirements set out under Section 6 (Qualifications and Experience) of the Terms of Reference (ToR).

| Item | Name of Client & Project Name | Type of Service | Duration (Start/End date) | Location of Service | Contract Amount of Consultancy (Rs) |
|------|-------------------------------|-----------------|---------------------------|---------------------|-------------------------------------|
| 1    |                               |                 |                           |                     |                                     |
| 2    |                               |                 |                           |                     |                                     |
| 3    |                               |                 |                           |                     |                                     |

**Details of Specific Technical Experience relevant to Item B above:**

| <b>Item</b> | <b>Name of Client &amp; Project Name</b> | <b>Web / Mobile Development</b> | <b>Database Management</b> | <b>GIS Integration</b> | <b>IoT / Real-time Data Systems</b> | <b>AI-based Forecast Modelling</b> |
|-------------|------------------------------------------|---------------------------------|----------------------------|------------------------|-------------------------------------|------------------------------------|
| 1           |                                          |                                 |                            |                        |                                     |                                    |
| 2           |                                          |                                 |                            |                        |                                     |                                    |
| 3           |                                          |                                 |                            |                        |                                     |                                    |

*(Please indicate Yes / No in each column, as applicable.)*

Please provide relevant project information as per the Project Information Form (annexed herewith) with supporting documents for evaluation.

### **III. Average Annual Consultancy Turnover**

The audited balance sheets or, if not required by the laws of the Tenderer's country, other financial statements acceptable to the Employer, for the last 05 years shall be submitted and must demonstrate the Consultant's financial capacity, the current soundness of its financial position, and its prospective long-term profitability.

As the minimum requirement, the Consultant's net worth, calculated as the difference between total assets and total liabilities, shall be positive. A negative trend in the area of profitability shall be a cause for rejection of the EOI, whereby the EOI shall be considered Non-Responsive. In case of a Joint Venture, all members combined must meet this requirement.

#### **Average Annual Consultancy Turnover**

| <b>Year</b>                                | <b>Amount (LKR)</b> |
|--------------------------------------------|---------------------|
|                                            |                     |
|                                            |                     |
|                                            |                     |
|                                            |                     |
|                                            |                     |
| <b>Average Annual Consultancy Turnover</b> |                     |

#### **IV. EOI Attachments**

| <b>SN</b> | <b>Description</b>                                                                          |
|-----------|---------------------------------------------------------------------------------------------|
| 1         | Certificate of Incorporation of the lead member                                             |
| 2         | Certificate of Incorporation of the JV member (for each member)                             |
| 3         | Certificate of Incorporation of the Sub-Consultant (for each sub-consultant)                |
| 4         | Letter of Association or Letter of Intent to form an association or joint venture           |
| 5         | Audited financial statements / other acceptable financial statements for the last 05 years  |
| 6         | Documentary evidence in support of General and Specific Experience claimed under Section II |

## V. Eligibility Declaration

We, the undersigned, certify to the best of our knowledge and belief:

- ☐ We have read the advertisement, including the Terms of Reference (TOR), for this assignment.
- ☐ Neither the consulting firm nor its JV member or sub-consultant or any of its experts prepared the TOR for this activity.
- ☐ We confirm that the project references submitted as part of this EOI accurately reflect the experience of the specified firm/consortium.
- ☐ We further confirm that, if any of our experts is engaged to prepare the TOR for any ensuing assignment resulting from our work product under this assignment, our firm, JV member or sub-consultant, and the expert(s) will be disqualified from short-listing and participation in the assignment.
- ☐ All consulting entities and experts proposed in this EOI are eligible to participate in AIIB-funded, supported and administered activities.
- ☐ The lead entity and JV member or sub-consultant are NOT currently sanctioned by AIIB or other MDBs. Neither the consulting firm nor the JV member or sub-consultant has ever been convicted of an integrity-related offense or crime related to theft, corruption, fraud, collusion or coercion.
- ☐ We understand that it is our obligation to notify AIIB should any member of the consortium become ineligible to work with AIIB or other MDBs or be convicted of an integrity-related offense or crime as described above.
- ☐ JV member or sub-consultant, including all proposed experts named in this EOI, confirmed their interest in this activity in writing.
- ☐ JV member or sub-consultant, including all proposed experts named in this EOI, authorized us in writing to represent them in expressing interest in this activity.
- ☐ None of the proposed consortiums are subsidiaries of and/or dependent on the Executing Agency or the Implementing Agency or individuals related to them.
- ☐ We understand that any misrepresentations that knowingly or recklessly mislead or attempt to mislead may lead to the automatic rejection of the proposal or cancellation of the contract, if awarded, and may result in further remedial action, in accordance with AIIB's Prohibited Practice<sup>2</sup>.

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<sup>2</sup> Eligibility refers to AIIB's Procurement Policy, Clause 5.8 and 7.0 on Prohibited Practice and Integrity.

We hereby confirm that the information provided above is accurate and submit our Expression of Interest for the Consultancy for the Development of a Landslide Asset Management System (LAMS) for the National Building Research Institute (NBRI) under the AIIB-funded Reduction of Landslide Vulnerability by Mitigation Measures Project (RLVMMP).

Signature of Authorized Person (with official seal): \_\_\_\_\_

**Name:** \_\_\_\_\_

**Designation:** \_\_\_\_\_

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

**Annexure**  
**Project Information Form**

Project \_\_\_\_ of \_\_\_\_

|                                                                                                          |  |
|----------------------------------------------------------------------------------------------------------|--|
| <b>Project Name</b>                                                                                      |  |
| <b>Name of Client</b>                                                                                    |  |
| <b>Country / Project Location</b>                                                                        |  |
| <b>Participation (As lead firm / As associate firm)</b>                                                  |  |
| <b>Value of Services (US\$)</b>                                                                          |  |
| <b>Source of Financing</b>                                                                               |  |
| <b>Consultancy Services – (i) No. of Staff (ii) No. of Person-Months</b>                                 |  |
| <b>Length of Consultancy Assignment</b>                                                                  |  |
| <b>Start Date (dd/mm/yyyy)</b>                                                                           |  |
| <b>Scheduled Date of Completion (dd/mm/yyyy)</b>                                                         |  |
| <b>Actual Date of Completion (dd/mm/yyyy)</b>                                                            |  |
| <b>Continuous / Intermittent</b>                                                                         |  |
| <b>Name of Associate Firms (if any)</b>                                                                  |  |
| <b>No. of Person-Months of Professional Staff Provided by Associated Firm(s)</b>                         |  |
| <b>Name of Senior Staff (Project Director/Coordinator, Team Leader) Involved and Functions Performed</b> |  |

**Detailed Narrative Description of the Project:**

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**Detailed Description of the Actual Services Provided by your Firm:**

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*(Please insert more tables as necessary)*