



INVITATION TO TENDER FOR TRANSPORT SERVICES FOR THE CEREBRAL PALSY ALLIANCE SINGAPORE (“CPAS”)

SECTION E – PRESCRIBED FORMS

1. This document comprises of the following:
 - (a) This Cover Letter
 - (b) Tender Form (2 pages)
 - (c) Tenderer’s Information (2 pages)
 - (d) Information of Major Shareholders
 - (e) Schedule of Persons Empowered to Act
 - (f) List of Relevant Track Record in the Last 5 Years
 - (g) Tender / Price Schedule
 - (h) Statement of Compliance (2 pages)
 - (i) Undertaking to Safeguard Official Information

Cerebral Palsy Alliance Singapore

Cerebral Palsy Centre

65 Pasir Ris Drive 1 Singapore 519529

TENDER FORM

To: Cerebral Palsy Alliance Singapore
Cerebral Palsy Centre
65 Pasir Ris Drive 1
Singapore 519529

Attn:

Name(s) of Tenderer(s):

Address:

TENDER REFERENCE: ITT/CTS/2024/0007

INVITATION TO TENDER FOR TRANSPORT SERVICES FOR THE CEREBRAL PALSY ALLIANCE SINGAPORE (CPAS)

1. We, _____ (Name(s) in Block Letters) hereby offer and undertake on the acceptance of this Tender to supply the goods and/or services required under this Invitation to Tender.
2. Our Tender is fully consistent with and does not contradict or derogate from anything in the Instructions to Tenderer and/or the Conditions of Contract or downgrade anything in your Requirement Specifications. You are entitled to disqualify our Tender if it is inconsistent with or contradicts or derogates from anything in the Instructions to Tenderer and/or Conditions of Contract or downgrades anything in the Requirement Specifications.
3. We declare that all the information provided in this Tender (including in the Prescribed Forms) are correct and true.
4. We undertake that we shall, if required by you, execute a formal agreement with you. If no formal agreement is executed, this Tender together with your Letter of Acceptance and/or Purchase Order shall constitute a binding contract between us on the terms of the Contract as defined in the Conditions of Contract.
5. OUR TENDER IS VALID FOR THREE (3) CALENDAR MONTHS FROM THE CLOSING DATE OF THIS TENDER.
6. We agree that as and when requested by you, we shall extend the validity of this Tender for one (1) or more periods not exceeding in total _____ calendar months.

7. Our price (herein referred to as “the Contract Price”) for the goods and/or services to be supplied by us is _____.
8. An itemized breakdown of the Contract Price for the goods and/or services is given in the price schedule attached.
9. We further undertake to give you any further information which you may require.
10. We understand that you are not bound to accept the lowest or any tender you may receive.
11. We understand that you have the right to accept parts of Tender from one or more Tenderers. We are *agreeable / not agreeable to this arrangement.
12. We undertake if our tender is accepted, to commence the delivery of goods and/or services on the date or dates specified in the Contract.
13. We warrant, represent and declare that we are duly authorised to submit, sign this Tender, receive instruction, give any information, accept any contract and act for and on behalf of _____ (Insert Name of firm or company).

Dated this _____ day of _____, 20_____

Tenderer's (as *Principal/Agent) Company or Business Registration No.¹:

Tenderer's Official Stamp¹:

Authorized Signature¹

Name:

Designation:

(*Delete whichever is not applicable)

NOTICE: This duly completed Tender Form **MUST** accompany every Tender. Any change to its wordings may render the Tender liable to **DISQUALIFICATION**.

¹ The Lead Member's registration number, official stamp and authorised signature must be provided.

TENDERER'S INFORMATION

Name of Tenderer:

1. **DETAILS ON COMPANY/FIRM/PERSON**

1.1 Address:

1.2 Contact Person:

Salutation *Miss / Mdm / Mr / Mrs / Ms

Name : _____

DID No : _____

HP No : _____

Fax No : _____

Email : _____

1.3 Type of Company/Firm:

* Corporation / Partnership / Sole Proprietorship/Joint Venture

1.4 Type of Business: _____

(Please indicate whether a factory is being operated)

1.5 Registration Number with ACRA: _____

(Please provide a copy of Business/Company profile registered with ACRA)

1.6 Qualification and experience of qualified personnel assigned to this project:
(Attach CVs)

2. **FINANCIAL INFORMATION**

2.1 GST Status

We are / are not * a taxable person under the Goods and Services Act.

Our GST registration number is _____.

2.2 Financial Information for the last 3 years:

Year	20XX	20XX	20XX
Annual Turnover \$K			
Net Profit Before Tax \$K			
Paid Up Capital \$K			

(Please attach Balance Sheet, Profit & Loss Statements and Cash Flow statements for the period mentioned above)

2.3 Cheque Payment Details ("A/C Payee Only"):

Name of A/C : _____

Address : _____

(*Delete whichever is not applicable)

INFORMATION ON MAJOR SHAREHOLDERS

Name of Tenderer:

Person, Company or Corporation who/which owns, whether directly or indirectly, at least 20% of the total number of shares in the Tenderer or who/which controls at least 20% of the voting rights in the Tenderer		Details of shares held by such person, company or corporation		
Name	Address	Number of Shares	% of Shares	Class of Shares

SCHEDULE OF PERSONS EMPOWERED TO ACT

Name of Tenderer:

The following persons are empowered to sign contract documents and act on the firm's / company's behalf:

Name	NRIC / ID No.	Position Held

LIST OF RELEVANT TRACK RECORD IN THE LAST 5 YEARS

Name of Tenderer: _____

Contract No. / Name of Project	Client	Contract Sum	Contract Period		Value of Work
			From	To	Completed

Please use separate sheet if the space is insufficient.

TENDER / PRICE SCHEDULE

Name of Tenderer: _____

S/N	Type of Bus	EIPIC		CPASS		DAC		GROW		Remarks
		Child (\$)	Caregiver (\$)							
1	Non-Hydraulic Air Con Bus									
2	Non-Hydraulic Air Con Bus									

Additional Charges <u>or</u> Included in 'Contract Price'		Details	Amount (\$)
A	Charges for special events (e.g. Sports Day, Outings, Graduation)		
B	Charges for special venues		
C	Surcharges for Saturdays, Sundays and Public Holidays		
D	Cancellation Charges		
E	Others (please specify)		

Notes:

- (a) There shall be no hidden costs.
- (b) This is a sample and may be adapted provided that a detailed itemised cost breakdown is provided.
- (c) All prices stated must be without GST.
- (d) It would be good if Tenderer could support the Tender submission with a transport schedule/plan; on how Tenderer's existing/available fleet would be activated to perform the Contract, if awarded.

STATEMENT OF COMPLIANCE

Name of Transport Service Provider: _____

Tenderers shall put a “√” if the particular criteria can be met and a “X” if it cannot be met under Column 2.

This Statement of Compliance shall be submitted together with the Tender.

CRITERIA	√ or X
(1) Have read and understood SECTION A - INSTRUCTIONS TO TENDERERS and SECTION B - CONDITIONS OF CONTRACT and are able to comply accordingly if awarded the Contract.	
(2) Can provide reliable and efficient bus transport services to meet the requirements of EIPIC.	
(3) Can provide reliable and efficient bus transport services to meet the requirements of CPASS.	
(4) Can provide reliable and efficient bus transport services to meet the requirements of DAC and GROW.	
(5) Can provide buses equipped with hydraulic lifts to cater for children and clients with special needs, under CPASS, DAC and GROW.	
(6) Can make the necessary contingent bus transport and pick-up arrangements in the event that the SCHOOL requires both SCHOOL sessions to be combined into one. Can meet the requirements of not arriving at the scheduled venue more than 15	
(7) minutes before the commencement time and 15 minutes after the dismissal time of the respective programmes.	
(8) Can meet the expectation of children/clients not having to travel for more than one (1) hour on either journey to or from the scheduled venue unless the same is due to an unforeseen traffic hold up or a bus breakdown.	
(9) Can provide bus transport for newly enrolled children and clients within two (2) weeks after the Contractor has been notified in writing.	
(10) Have existing fleet that are licensed by the Land Transport Authority (“LTA”) and meet the LTA’s safety requirements for the operations of Private Buses.	
(11) All buses provided are air-conditioned and comes with licensed drivers and licensed bus attendants.	
(12) All buses provided are roadworthy, clean and in good working condition.	
(13) Will take out and maintain adequate insurance coverage for all passengers including third party liability insurance and shall provide copies of the said insurance policies to the CPAS, if awarded the Contract.	
(14) All buses are operated by LTA’s vocational licensed drivers (with a good safety record) who: Know the roads well and have the knowledge of the right venue and how to get there without depending on the staff/ students; Are able to converse in Basic English Language; Are courteous and polite; and Are able to quickly liaise with CPAS for contingencies, in the event of an emergency.	

CRITERIA	√ or X
(15) All drivers, bus attendants and staff are not illegal immigrants and that if they are foreign workers, they possess the necessary permits as required under the Singapore Law.	
(16) The bus drivers and attendants provided do not: Suffer from any medical conditions that may affect the operation of vehicles; Have any criminal records or been charged with any offences in Singapore or any other country; Engage in any illegal and/ or criminal activities; and Have any financial embarrassment.	
(17) Can establish a procedure for bus drivers of the buses supplied under the Contract to collect the Transport Fees and to keep proper record of the same.	
(18) Can ensure and be responsible for the conduct of the bus drivers and bus attendants at all times while providing the bus transport services under the Contract and shall comply with the duties specified in Annex B.	
(19) Can provide bus services for transportation of children and clients for other CPAS events or other purpose, as and when required, within the "Contract Price". Example of such events are; Sports Day, Outings and School Graduation.	
(20) Can provide a hotline or contact point(s) for CPAS to call in an emergency (including after office hours weekends and public holidays).	

DECLARATION

- We hereby certify and declare that the information given in PART G – TENDER / PRICE SCHEDULE and PART H – STATEMENT OF COMPLIANCE (including all attached documents) are true, correct and complete. We understand that misrepresentation of any facts will render our Tender invalid. Cerebral Palsy Alliance Singapore (CPAS) is entitled to make direct enquiries and obtain references from any person, firm, limited liability partnership or company to verify the information herein or regarding our competence and general reputation.
- We hereby declare that the registered entity has not been suspended or debarred from quoting or tendering for any public sector tenders.

Signature of Tenderer and Tenderer's official stamp:

For and behalf of Tenderer

Name of Authorised Signatory : _____

Designation : _____

NRIC No : _____

Name of Tenderer

Name & Designation

UNDERTAKING TO SAFEGUARD OFFICIAL INFORMATION

1. The attention of the Party, whose particulars are set out below, has been drawn to the Official Secrets Act (Chapter 213, 2012 Revised Edition) and in particular to Section 5 thereof which relates to the safeguarding of official information.

Name of Party: _____

NRIC/Passport/ACRA No: _____

2. The Party understands and agree that all official information acquired by him/her/them pursuant to the Invitation to Tender (Tender Reference: ITT/CTS/2024/0007) is of a strictly secret and confidential nature, and is not to be published or communicated by him/her/them to any other person in any form whatsoever except in the course of performance of his/her/their contractual obligations, whether during or after the completion of all contractual obligations.
3. The Party undertakes to:
 - (a) Ensure that any other person who is authorised by him/her/them to have access to any official information shall similarly sign an undertaking to safeguard such official information; and
 - (b) Return any document received from Cerebral Palsy Alliance Singapore, any other copies made or reproduced from such document or part thereof whenever required by Cerebral Palsy Alliance Singapore.
4. The Party further understands and agrees that any breach or neglect of this undertaking may render him/her/them liable to prosecution under the Official Secrets Act.

Authorised Signature

Full Name in BLOCKS

NRIC/Passport No.

Designation

Name of Company/Entity

Date

Company Stamp

Signature of Witness

Full Name in BLOCKS

NRIC/Passport No.

Date