



**RFQ NUMBER** : 2412301684

**DATE** : 22.12.2023 **REQ No** : 1032304925

**REQ TITLE** : 1032304925: Water Proofing

**DELIVERY LOCATION** 

**CLOSING DATE** : 02.01.2024

| SL NO | ITEM CODE | SERVICE ID | DESCRIPTION                                  | QTY   | UOM | BRAND/ORIGIN | WARRANTY | UNIT PRICE | TOTAL<br>PRICE |
|-------|-----------|------------|--|-------|-----|--------------|----------|------------|----------------|
| 1     |           | ITEM-00001 | CHAMBER INSIDE WATER PROOFING & REPAIRING    | 1.500 | M-2 |              |          |            |                |
|       |           |            | WORK DESCRIPTION: PROCURE & SUPPLY           |       |     |              |          |            |                |
|       |           |            | SPECIAL SURFACE APPLIED/ INJECTION           |       |     |              |          |            |                |
|       |           |            | GROUTINGWA                                   |       |     |              |          |            |                |
|       |           |            | TER PROOFING REPAIRING COMPOUND AS PER       |       |     |              |          |            |                |
|       |           |            | DEWA APPROVAL WITH SPECIALIZEDWORK MAN       |       |     |              |          |            |                |
|       |           |            | SHIP ALL AS PER DEWA STANDARDS &             |       |     |              |          |            |                |
|       |           |            | SPECIFICATIONS INCLUD                        |       |     |              |          |            |                |
|       |           |            | INGREPAIR/REBOUND THE CONCRETE WALLS IF      |       |     |              |          |            |                |
|       |           |            | REQUIRED. ETC. I.E. BREAKING UPOF EXISTING   |       |     |              |          |            |                |
|       |           |            | DAMAGED CHAMBER WALLS/REPAIR MATERIALS       |       |     |              |          |            |                |
|       |           |            | AND THE                                      |       |     |              |          |            |                |
|       |           |            | BONDING AGENTFOR THE FRESH AND EXISTING      |       |     |              |          |            |                |
|       |           |            | CONCRETE SHALL BE APPROVED BY DEWA. ALL      |       |     |              |          |            |                |
|       |           |            | THELEAKS/ SEEPAGE OF THE GROUND WATER        |       |     |              |          |            |                |
|       |           |            | INTO THE CHAMB                               |       |     |              |          |            |                |
|       |           |            | ER SHALL BE SEALED ANDTHE CHAMBER SHALL BE   |       |     |              |          |            |                |
|       |           |            | MADE COMPLETELY WATERTIGHT INCLUDING ALL     |       |     |              |          |            |                |
|       |           |            | RELATEDWORK AND ENSURE FOR NO LEAKAGE        |       |     |              |          |            |                |
|       |           |            | FROM ALL J                                   |       |     |              |          |            |                |
|       |           |            | OINTS /GAPS I.E. ALLCONSTRUCTION JOINTS, GAP |       |     |              |          |            |                |
|       |           |            | BETWEEN WALL AND PIPE SURROUNDING, WALL      |       |     |              |          |            |                |
|       |           | 1          | SURFACESEEPAGE /DAMPNESS ETC.MINIMUM         |       |     |              |          |            |                |





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|-------|-----------|------------|---|-----|-----|--------------|----------|------------|----------------|
|       |           |            | WARRANTY                                    |     |     |              |          |            |                |
|       |           |            | PERIOD SHALL BE FOR 5 YEARS FOR ALL WORK    |     |     |              |          |            |                |
|       |           |            | MAN SHIP &MATERIAL AFTER VERIFIED AND       |     |     |              |          |            |                |
|       |           |            | ISSUED COMPLETION CERTIFIED BY              |     |     |              |          |            |                |
|       |           |            | DEWAENGINEER. CHAMBER                       |     |     |              |          |            |                |
|       |           |            | SHALL BE LEAK TESTED AS PER DEWA            |     |     |              |          |            |                |
|       |           |            | SPECIFICATION AFTER COMPLETIONOF THE        |     |     |              |          |            |                |
|       |           |            | WORK. REPAIR SHALL BE CARRIED OUT FOR ALL   |     |     |              |          |            |                |
|       |           |            | SPECIFIED AND AS PER                        |     |     |              |          |            |                |
|       |           |            | DRAWING / AS INSTRUCTED AND DIRECTED BY THE |     |     |              |          |            |                |
|       |           |            | ENGINEER. RATES EXCLUSIVE OFSAFETY          |     |     |              |          |            |                |
|       |           |            | SHUTDOWN AND NOC#S FROM ALL CONCERNED       |     |     |              |          |            |                |
|       |           |            | AUTHORITIES, CO                             |     |     |              |          |            |                |
|       |           |            | ST SHALL BE INCLUDED DEWATERING,            |     |     |              |          |            |                |
|       |           |            | SCAFFOLDING, WORK DONE AREA SHALL BE        |     |     |              |          |            |                |
|       |           |            | MARKED FOREASY FUTURE IDENTIFICATION        |     |     |              |          |            |                |
|       |           |            | PURPOSE TO OBSERVE THE QU                   |     |     |              |          |            |                |
|       |           |            | ALITY OF WORK UNTILCOMPLETION OF WARRANTY   |     |     |              |          |            |                |
|       |           |            | PERIOD AND ALL OTHER NECESSARY SAFETY       |     |     |              |          |            |                |
|       |           |            | RELATED ITEMS REQUIRED TO COMPLETE THE      |     |     |              |          |            |                |
|       |           |            | WORK.SCOPE O                                |     |     |              |          |            |                |
|       |           |            | F WORK, TERMS & CONDITION:1)#LOCATION OF    |     |     |              |          |            |                |
|       |           |            | CHAMBER SHALL BE IDENTIFIED BY DEWA2)#RATE  |     |     |              |          |            |                |





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|-------|-----------|------------|---|-----|-----|--------------|----------|------------|----------------|
|       |           |            | INCLUSIVE OF PROVIDING SCAFFOLDING,         |     |     |              |          |            |                |
|       |           |            | DEWATERING I                                |     |     |              |          |            |                |
|       |           |            | F REQUIRED3)#IN TOTAL VALVE OF WORK DONE    |     |     |              |          |            |                |
|       |           |            | 5% WILL BE KEPT AS RETENTION AMOUNT ANDTHE  |     |     |              |          |            |                |
|       |           |            | SAME WILL BE RELEASED AFTER SUCCESSFULLY    |     |     |              |          |            |                |
|       |           |            | COMPLET                                     |     |     |              |          |            |                |
|       |           |            | ION OF 5YEARSWARRANTY PERIOD I.E. FROM THE  |     |     |              |          |            |                |
|       |           |            | ISSUE DATE OF COMPLETION                    |     |     |              |          |            |                |
|       |           |            | CERTIFICATE.4)#DURING THIS 5YEARS WARRANTY  |     |     |              |          |            |                |
|       |           |            | PERIOD IF DEWA NOTIC                        |     |     |              |          |            |                |
|       |           |            | E ANY DEFECTS/SEEPAGE IN WORK DONE AREA,    |     |     |              |          |            |                |
|       |           |            | CONTRACTOR MUST RECTIFY THE SAME WITH       |     |     |              |          |            |                |
|       |           |            | IN5DAYS FROM THE DATE OF INTIMATION. IF     |     |     |              |          |            |                |
|       |           |            | CONTRACTOR FA                               |     |     |              |          |            |                |
|       |           |            | ILS TO COMPLY PARTIALRETENTION AMOUNT WILL  |     |     |              |          |            |                |
|       |           |            | BE DEDUCTED TO RECTIFY THE                  |     |     |              |          |            |                |
|       |           |            | DEFECTS.5)#WORK DONE AREA SHALL BE MARKED   |     |     |              |          |            |                |
|       |           |            | IN ORDER IDENTIFY TH                        |     |     |              |          |            |                |
|       |           |            | E EXACT LOCATIONSTILL THE END OF WARRANTY   |     |     |              |          |            |                |
|       |           |            | PERIOD.6)#ALL THE WORK SHALL BE CARRIED OUT |     |     |              |          |            |                |
|       |           |            | IN SAFE MANNER WITH ALL                     |     |     |              |          |            |                |
|       |           |            | SAFETYMEASURES7)#WOR                        |     |     |              |          |            |                |
|       |           |            | K SHALL BE CARRYOUT AS PER THE ENGINEER     |     |     |              |          |            |                |





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|-------|-----------|------------|---|-----|-----|--------------|----------|------------|----------------|
|       |           |            | INSTRUCTION, DEWASTANDARD AND FOLLOW        |     |     |              |          |            |                |
|       |           |            | THE BELOW MENTIONED HSE                     |     |     |              |          |            |                |
|       |           |            | REQUIREMENTS.8)#ENSURE THAT P               |     |     |              |          |            |                |
|       |           |            | ERSONNEL PROPOSED TO DEPLOY AT SITE ARE     |     |     |              |          |            |                |
|       |           |            | IN FULLPOSSESSION OF RELEVANT PPE9)#TIME    |     |     |              |          |            |                |
|       |           |            | DURATION TO COMPLETED ONE CHAMBER MAX 7     |     |     |              |          |            |                |
|       |           |            | CALENDA                                     |     |     |              |          |            |                |
|       |           |            | R DAYS ARE ALLOWED (I.E. STARTS FROM THE    |     |     |              |          |            |                |
|       |           |            | CHAMBER SHUTDOWN SCHEDULED DATE             |     |     |              |          |            |                |
|       |           |            | ORCHAMBER LOCATION SHOWN DATE WHICH         |     |     |              |          |            |                |
|       |           |            | EVER SUIT TO SITE COND                      |     |     |              |          |            |                |
|       |           |            | ITION OF THATPARTICULAR CHAMBER ) IF FAILED |     |     |              |          |            |                |
|       |           |            | TO COMPLY WITH IN THE TIME FRAME            |     |     |              |          |            |                |
|       |           |            | /STIPULATED TIME , DELAY FOR EACH DAY 5%    |     |     |              |          |            |                |
|       |           |            | WILL B                                      |     |     |              |          |            |                |
|       |           |            | E DEDUCTED FROM THETOTAL COST WHICH         |     |     |              |          |            |                |
|       |           |            | INCURRED FOR EACH CHAMBER.10)#WORK WILL     |     |     |              |          |            |                |
|       |           |            | BE ASSIGNED ONLY BASED ON RECEIVING         |     |     |              |          |            |                |
|       |           |            | COMPLAINTS ORNOTIF                          |     |     |              |          |            |                |
|       |           |            | ICATION (NOD) I.E. AS & WHEN REQUIREMENT    |     |     |              |          |            |                |
|       |           |            | ARISES11)#PRECONSTRUCTION & POST            |     |     |              |          |            |                |
|       |           |            | CONSTRUCTION RECORD SHALL BE MAINTAINED     |     |     |              |          |            |                |
|       |           |            | FORALL WORKS AND T                          |     |     |              |          |            |                |





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|       |           |            | O BE SUBMITTED THE SAME FOR BILL           |     |     |              |          |            |                |
|       |           |            | CERTIFICATION.12)#DEWA#S REPRESENTATIVE    |     |     |              |          |            |                |
|       |           |            | SHALL BE ACCOMPANIED WITH CONTRACTOR       |     |     |              |          |            |                |
|       |           |            | DURINGEXECUTION TO FAC                     |     |     |              |          |            |                |
|       |           |            | ILITATE THE WORK.13)#AS PER DEWA STANDARD  |     |     |              |          |            |                |
|       |           |            | CONTACTOR SHALL SUBMIT THE METHOD          |     |     |              |          |            |                |
|       |           |            | STATEMENTWITH SHOP DRAWINGS, MATERIALS     |     |     |              |          |            |                |
|       |           |            | FOR APPROVAL PRIO                          |     |     |              |          |            |                |
|       |           |            | R TO START THE WORK.14)#ALL DEBRIS ITEMS   |     |     |              |          |            |                |
|       |           |            | WHICH ARE REMOVED FROM THE EXISTING        |     |     |              |          |            |                |
|       |           |            | CHAMBERS SHALLBE DISPOSED AT APPROVED DM   |     |     |              |          |            |                |
|       |           |            | YARD15)#CONTRA                             |     |     |              |          |            |                |
|       |           |            | CTOR SHALL BE FULLY RESPONSIBLE FOR ALL    |     |     |              |          |            |                |
|       |           |            | SAFELY RELATED ISSUE.HSE REQUIREMENTS TO   |     |     |              |          |            |                |
|       |           |            | BE COMPLIED BY CONTRACTOR1.#ALL HSE        |     |     |              |          |            |                |
|       |           |            | MEASURES AND PR                            |     |     |              |          |            |                |
|       |           |            | ECAUTIONS IN ACCORDANCE TO                 |     |     |              |          |            |                |
|       |           |            | DUBAIMUNICIPALITY/RTA RULES & REGULATION   |     |     |              |          |            |                |
|       |           |            | SHALL BE IMPLEMENTED AT SITE PRIORTO       |     |     |              |          |            |                |
|       |           |            | COMMENCEMENT OF WORK.2.#REL                |     |     |              |          |            |                |
|       |           |            | EVANT PROCEDURE AND METHOD STATEMENT OF    |     |     |              |          |            |                |
|       |           |            | RELATED WORK RELATED TOSITE SAFETY         |     |     |              |          |            |                |
|       |           |            | STIPULATED IN SECTION 10, DUBAI GOVERNMENT |     |     |              |          |            |                |





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|       |           |            | & REGULATION.3                             |     |     |              |          |            |                |
|       |           |            | .#METHOD OF STATEMENT ALONG WITH RISK      |     |     |              |          |            |                |
|       |           |            | ASSESSMENT TO BE CONVEYED TO THEWORK       |     |     |              |          |            |                |
|       |           |            | FORCE THROUGH TOOLBOX TALK MEETING         |     |     |              |          |            |                |
|       |           |            | BEFORE THE WORK STARTS                     |     |     |              |          |            |                |
|       |           |            | .4.#ENSURE THAT WORKERS WERE USING         |     |     |              |          |            |                |
|       |           |            | PERSONNEL PROTECTIVE EQUIPMENTSUITABLE     |     |     |              |          |            |                |
|       |           |            | TO THEIR WORK.5.#INSPECTION TO BE CARRIED  |     |     |              |          |            |                |
|       |           |            | OUT ON HAND TOOL                           |     |     |              |          |            |                |
|       |           |            | FOR FREE OF DIRT, OIL, GREASE OR RUST AND  |     |     |              |          |            |                |
|       |           |            | NOT USING TAPE ON HANDLE OF TOOLS,         |     |     |              |          |            |                |
|       |           |            | DAMAGED CORD, DAMAGED SHELLS, AND PROPER   |     |     |              |          |            |                |
|       |           |            | BLADE GUARDS AN                            |     |     |              |          |            |                |
|       |           |            | D FOR SOUND CONDITION.6.#INSPECTION TO BE  |     |     |              |          |            |                |
|       |           |            | CARRIED OUT FOR ALL TYPES OF HEAVY         |     |     |              |          |            |                |
|       |           |            | MACHINERIES FORPROPER DOCUMENTS SUCH AS    |     |     |              |          |            |                |
|       |           |            | AN OPERATOR LIC                            |     |     |              |          |            |                |
|       |           |            | ENSE, VEHICLE LICENSE, ANDSAFETY           |     |     |              |          |            |                |
|       |           |            | CERTIFICATES OF THE MACHINERY AND LIFTING  |     |     |              |          |            |                |
|       |           |            | EQUIPMENT#SCERTIFICATES.7.#FIRST AID SHALL |     |     |              |          |            |                |
|       |           |            | BE PROVIDED AT                             |     |     |              |          |            |                |
|       |           |            | SITE.8.#BEFORE WORK START OUR HEAVY        |     |     |              |          |            |                |
|       |           |            | EQUIPMENT#S BEEN USED, BARRICADE THEAREA   |     |     |              |          |            |                |





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|       |           |            | USING HARD BARRIERS, SAFETY CONES, WARNING |     |     |              |          |            |                |
|       |           |            | NETS, WARNI                                |     |     |              |          |            |                |
|       |           |            | NG TAPES,SAND BAGS ETC. TRAFFIC SYSTEM     |     |     |              |          |            |                |
|       |           |            | SUCH AS WARNING SIGNS, REDUCE SPEED        |     |     |              |          |            |                |
|       |           |            | SIGNS,MANDATORY SIGNS, DIVERSION SIGNS,    |     |     |              |          |            |                |
|       |           |            | ETC. TO BE PLACED                          |     |     |              |          |            |                |
|       |           |            | IF LOCATIONREQUIRES.9.#SUITABLE AND        |     |     |              |          |            |                |
|       |           |            | SUFFICIENT ACCESS SHALL BE PROVIDED IN     |     |     |              |          |            |                |
|       |           |            | WORK AREA.SAFETY HAZARD & PREPARATION TO   |     |     |              |          |            |                |
|       |           |            | BE FOLLOWED BY                             |     |     |              |          |            |                |
|       |           |            | CONTRACTORTOXICS GASES: AIR QUALITY        |     |     |              |          |            |                |
|       |           |            | MONITOR SHALL BE PACED INSIDE THE CHAMBER  |     |     |              |          |            |                |
|       |           |            | TOMONITOR THE AIR QUALITY AND TOXICS GASES |     |     |              |          |            |                |
|       |           |            | INSIDE TH                                  |     |     |              |          |            |                |
|       |           |            | E CHAMBER.ELECTRICAL SAFETY: WARNING SIGNS |     |     |              |          |            |                |
|       |           |            | NEAR OPERATING EQUIPMENT#S TO BEDISPLAYED  |     |     |              |          |            |                |
|       |           |            | CHECK ELECTRICAL DEVICES/TOOLS AND         |     |     |              |          |            |                |
|       |           |            | GENERATOR AR                               |     |     |              |          |            |                |
|       |           |            | E EARTHED ANDELCB/MSSB ARE PROVIDED IN     |     |     |              |          |            |                |
|       |           |            | ELECTRICAL CIRCUIT.HAND TOOLS: DEFECTED    |     |     |              |          |            |                |
|       |           |            | HAND TOOLS MUST NOT BE USED AND SHALL BE   |     |     |              |          |            |                |
|       |           |            | REMOVEDFROM                                |     |     |              |          |            |                |
| 1     |           |            | SITE PERSONAL DEPLOYED                     |     |     |              |          |            |                |





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|       |           |            | SHALL BEFAMILIAR TO USE THE TOOLS AT SITE. SAFETY INSTRUCTION TO USE THE TOOLS /EQUIPMENT SHALL BE DISPLAYED ON SITE.SEPARATELY |     |     |              |          |            |                |

TOTAL AMOUNT IN WORDS:

TOTAL AMOUNT:

#### **SPECIAL NOTES / INSTRUCTIONS:**

Chamber inside water proofing works for CMU team.

for more details, mohamed.jinna@dewa.gov.ae fahad.alobeidli@dewa.gov.ae saood.almarzooqi@dewa.gov.ae

#### **STANDARD TERMS & CONDITIONS**

- 1) Prices should be 'DDP' delivery duty paid at DEWA stores.
- 2) Quotation to be submitted only in local currency U.A.E Dirhams
- 3) DEWA Standard payment terms is '30 days credit' from the date of acceptance of material





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4) No DEWA staff or his or her relatives up to third degree should have ownership or partnership in your company, and your participation in DEWA tenders / RFQs should not constitute a Conflict or perceived Conflict of Interest.

5) The offered product and/ or services in the Quotation, shall be conforming and in accordance with DEWA Energy Management Policy & EnMS Manual.

**SUPPLIER'S REMARKS:** 

SUPPLIER'S SIGNATURE AND STAMP