

KERALAM MUSEUM OF HISTORY & HERITAGE

PARK VIEW, THIRUVANANTHAPURAM-33
(Nodal agency of all museums under Cultural Affairs Dept. Govt. of Kerala)
Website: www.museumkeralam.org ● Email: info@museumkeralam.org
Phone: 0471-2320231, +91-9567019037

KIM-11/2017

Notice

Sub:- Selection of Museum Consultancy firm for Keralam Museum

Applications are invited from competent and experienced organizations/institutions/agencies for empanelment as Museum Consultancy Firm for the implementation of various museum projects undertaken by Keralam Museum of History and Heritage. Reputed and interested organizations/ Institutions/Agencies having proven experience in the relevant fields may submit their application along with all supporting documents. Application form and other details can be downloaded from the website: www.museumkeralam.org

The above details in the prescribed application, in sealed envelopes, should reach the Executive Director, Keralam Museum of History and Heritage, Park View, Trivandrum on or before 5pm on 3.7.2017.

Trivandrum 09.06.2017

Executive Director Keralam Museum



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Park View, Thiruvananthapuram-33

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Selection of Museum Consultancy Firm

I. PROFORMA FOR GIVING Details of work experience and BIO-DATA

a. General Information

- 1. Name and Address of Individual/ Firm/ Consortium
- 2. Telephone No./Fax/ E-mail
- 3. PAN Number -
- 4. Service Tax Registration No.
- 5. Activity Areas
- 6. Total Experience in the relevant field
- 7. Experience in Government works
- 8. Details of empanelment, if any, in National Museum, New Delhi/
 Archaeological Survey of India (ASI) (use additional sheets)

b. Organizational Setup

- 1. Status (Individual/ Company/ Firm)
- 2. Year of Registration
- 3. Names & Address of Individuals/
 Directors/ Proprietors
- 4. Name, Qualification and Experience and years of association with firms of key personnel (In brief) (use additional sheets)

c. Architectural Wing

1. Name, Qualification and Experience and years of association with firm of key personnel (In brief)

(use additional sheets)

2. Council of Architects Registration No. and Details (use additional sheets)

d. Planning Wing

Name, Qualification and Experience and years of association with firm of key personnel (In brief) (use additional sheets)

e. Electrical Wing

- 1. Contractor's License /Class
- 2. PWD/CPWD Registration Details, if any -
- 3. Work Experience with details of Experience Certificates
- 4. Details of Electrical works completed

f. Museum Setting Design & Display, Conservation and Curation wing.

- 1. Details of museum designed, set up with modern methods of display and lighting (with photos)
- 2. Details of Conservation work of Objects taken up
- 3. Details of museum curation work Undertaken (give list of museum Curated)

g. Experience

Summary of Major Completed Projects (A minimum of the three projects costing above Rs. 50.00 Lakhs undertaken in the last 3 years

S1.	J	Name of	Cost of	Date	
No	& Location	Client	Project		
				Commencement	Completion
1.					

2.			
3.			

(Use additional sheets if required for further details)

h. Details of awards and testimonials.

II. Evaluation Procedure

Firms/ Applicants satisfying the minimum eligibility criteria will have to make a presentation of their work before the selection committee at their own expense.

a. Selection Criteria

	Item	Weightage
i.	Credibility of the Firm(Manpower, Experience	
	Financial capability etc.)	70%
ii.	Presentation of the existing projects/Interior designs	30%

The Firms will be given ranking based on the total points obtained as per the above weightage and the required number of Firms/Consultants will be empanelled. The decision of the Committee will be final. Copies of all documents should be attached along with this application. Originals should be presented at the time of presentation. A copy of the details given in this format should be send as soft copy along with this application.

CERTIFICATION

I/ We the under signed hereby certify that to the best of my/ our knowledge and belief, that the details including my/our qualification and my/our experience provided above are correctly described me/us.

Day/Month/Year

Signature of Individual/Authorized Representative of Firm