

(Use Provider's Letterhead)
(Name of Provider)
(Physical Address of Provider)

PERFORMANCE SECURING DECLARATION

Date: *(Insert day, month, and year)*

Subject of procurement and Ref number.: *(insert subject and reference number of procurement)*

To:

The Accounting Officer,

(Insert complete name of Procuring and Disposing Entity)

I/We*, the undersigned, declare as follows:

1. I/We* understand that, according to the conditions of the Contract, I/We* must submit a Performance Securing Declaration valid until successful completion of the contract.
2. I/We* accept that we shall be suspended by the Authority from being eligible for bidding in any public procurement or disposal process of Government for a period of three years if I/We*:
 - (i) Have failed to perform contractual obligations under this contract; or
 - (ii) Upon occurrence of any of the events and circumstances under the conditions of contract for which the contract is terminated arising from our default.
3. This Performance Securing Declaration shall cease to be valid upon completion of the contract/issuance of the Completion Certificate*, on the earlier of:
 - (i) Having completed all the obligations under the contract and made good all snags by the end of the Defects Liability Period/Warranty period*; or
 - (ii) Issuance of the Completion Certificate for all the works at the end of the Defects Liability Period.

Signed: _____ *(insert authorized signature)*

In the capacity of _____ *(insert designation of person signing the Performance Securing Declaration)*

Name: _____ *(insert complete name of person signing the Performance Securing Declaration)*

Duly authorized to sign the contract for and on behalf of: *(insert complete name of Provider)*

Dated on _____ day of _____ *(month)*, _____ *(year)*
(insert date of signing)

* Delete whichever is not applicable