

TECHNICAL SHEET

All information entered in this form will be utilized for the sole purpose of gathering the data to support the accurate performance of the services to be provided by Nexos Consulting. All Nexos Consulting employees, agents, subcontractors and representatives are to use said information in accordance to Privacy Agreement contained in the Service Contract Signed and Dated between ATTENDEE and NEXOS CONSULTING.

A COMPANY PROFILE

1 Name of the Corporation

2 Date of Incorporation (MM/YYYY)

3 License Number

4 Headquarters Address

City Province Zip Code

5 Website

6 Business Phone Number

	CODE	International	Area	Number
Line 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Line 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Line 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

7 Fax Number

	CODE	International	Area	Number
Fax 1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fax 2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fax 3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

8 General Email

9 Capital's Country of Origin Percentage
(Country of Origin of the largest percentage of capital)

Company's Logo

Corporate Seal *(If Applicable)*

B LEGAL REPRESENTATIVE

(For the purpose of any legal related matters of this Event between ATTENDEE & PEMEX)

10 Name of Representative

11 Title

12 Direct Line

	CODES	International	Area	Number
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

13 Business Address

City Province Zip Code

14 Direct Fax

	CODES	International	Area	Number
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

15 Email

16 Mobile

	CODES	International	Area	Number
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

17 Educational Background
(Degrees, Designations, Certifications, Experience Related to the Product and/or Company)

C CONTACT PERSON

(If Different from Legal Representative)

18 Name of Representative

19 Title

20 Direct Line

	CODES	International	Area	Number
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

21 Business Address

City Province Zip Code

22 Direct Fax

	CODES	International	Area	Number
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

23 Email

24 Mobile

	CODES	International	Area	Number
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

25 Educational Background
(Degrees, Designations, Certifications, Experience Related to the Product and/or Company)

If you require more than one page to fit the Technical information of your product/service, fill in and print this page as many times required. Please note that you will enter the advantages of your company or product/service in Section F, this Section (D) is strictly for **Technical Information**.

D TECHNICAL EVALUATION CRITERIA & REQUIREMENTS

(Field 26 & 27 to be included together in the space available)

26 General Technical Description of the Product/Service

27 Technical Capacity Related to the Product/Services

(All information must be strictly a complete technical description with all the applicable information to your product/service, such as: measurements, weight, temperature, external requirements, main function, installation requirements, etc). A set of Photographs of the product must be attached to this page.

Technical Description Page Number of

Continued

D TECHNICAL EVALUATION CRITERIA & REQUIREMENTS (Product/Service)

28 Personnel Please fill in every field, if not applicable write n/a

(In Relation to the Product Performance)

a Manager (If applicable)

Name Title

CODES	International	Area	Number
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Business Location Direct Line

CODES	International	Area	Number
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Email Direct Fax

Educational Background (Degrees, Designations, Certifications, Experience Related to the Product and/or Company)

b Supervisor (If applicable)

Name Title

CODES	International	Area	Number
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Business Location Direct Line

CODES	International	Area	Number
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Email Direct Fax

Educational Background (Degrees, Designations, Certifications, Experience Related to the Product and/or Company)

c Labour - Installation (If applicable)

c.1 Designated Employee, Contractor yes No

Name

Contact Information	Educational Background
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c.2 Subcontractor yes No

Company's Name Contact Person

Contact Information

d Labour - Performance (If applicable)

Number of Personnel Required Education Required

Professional Background Required

Minimum Years of Experience Required Years

e Labour - Maintenance (If applicable)

Number of Personnel Required Education Required

Professional Background Required

Minimum Years of Experience Required Years

29 Industrial Safety - Policies

(List the Security Policies Applicable to your Product)

Continued

D TECHNICAL EVALUATION CRITERIA & REQUIREMENTS

(Product/Service)

30 Environmental Impact & Safeguard *(Product/Service)*

Can your product/service impact the environment?

 yes/no

Explain

What measures you take to reduce such impact? List them.

31 Organizational Chart *(In Relation to the Product)* Copy/Paste

F COMPANY & PRODUCT VERIFIABLE ADVANTAGES

32 Company's Strengths List them.

33 Successful Contracts with similar characteristics

a	Signing Date <input type="text"/> <small>(MM/YYYY)</small>	Company's Name <input type="text"/>	Completion Date <input type="text"/> <small>(MM/YYYY)</small>
b	Signing Date <input type="text"/> <small>(MM/YYYY)</small>	Company's Name <input type="text"/>	Completion Date <input type="text"/> <small>(MM/YYYY)</small>
c	Signing Date <input type="text"/> <small>(MM/YYYY)</small>	Company's Name <input type="text"/>	Completion Date <input type="text"/> <small>(MM/YYYY)</small>

34 Advantages of your product in relation to competitors List them.

Continued

F COMPANY & PRODUCT VERIFIABLE ADVANTAGES

35 Quantifiable Outcome resulted from the performance of your product.

(Reduction of costs, time, increased quality, performance, etc. Statistical percentages, results, etc.)

36 International Customer/Client's Location

	Last Contract's Year	Company's Name	Country	# of contracts/projects with them
a	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
b	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
c	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
d	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
e	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
f	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

G ATTACHMENTS

(Quality Certificates for Company, Product/Service, Technical Sheet, Pictures, Recommendation letters, etc) IMPORTANT NOTE: Do not Include Brochures

Attachment's List

No.	Document Type/Name	Notes on Document
1	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>
4	<input type="text"/>	<input type="text"/>
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7	<input type="text"/>	<input type="text"/>
8	<input type="text"/>	<input type="text"/>
9	<input type="text"/>	<input type="text"/>
10	<input type="text"/>	<input type="text"/>
11	<input type="text"/>	<input type="text"/>
12	<input type="text"/>	<input type="text"/>
13	<input type="text"/>	<input type="text"/>
14	<input type="text"/>	<input type="text"/>
15	<input type="text"/>	<input type="text"/>