



**REQUEST FOR PROPOSAL (RFP) LARGE SCALE SOLAR POWER PLANTS FOR SABAH
(LSS-SABAH2024)
ECoS/JPIP/RFP/LSS2024**

RFP DOCUMENT PURCHASE PROCEDURE

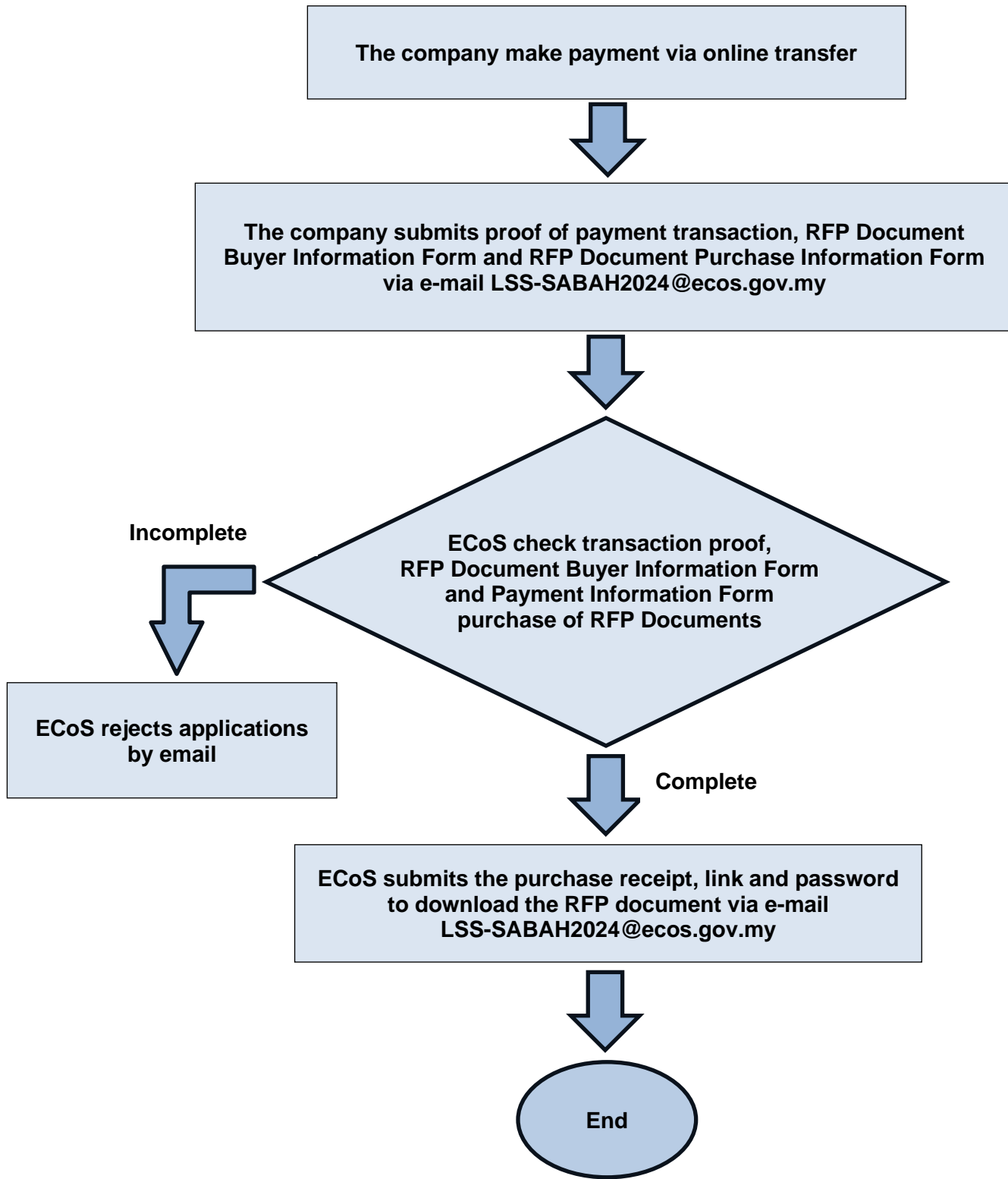
The following is the procedure for purchasing RFP documents online.

1. Payment must be made within the time period from 27 May 2024 at 08:00 am to 24 June 2024 at 05:00 pm. Any payment made outside the specified time will not be accepted.
2. ECoS only accepts payment online (online transfer) of RM2,000.00 for each purchase of the RFP document. Account details are as follows:
 - Account's Name : ENERGY COMMISSION OF SABAH
 - Account No. : 1019 6001 0200 871
 - Bank : Alliance Bank Malaysia Berhad
 - Branch : Sinsuran, Kota Kinabalu
 - Swift Code : MFBBMYKL
3. After payment, please submit the following to the email LSS-SABAH2024@ecos.gov.my:
 - 3.1 Proof of payment transaction by submitting a copy of the online transfer receipt.
 - 3.2 Completed forms are:
 - (a) RFP Document Buyer Information Form; and
 - (b) RFP Document Purchase Payment Information Form.

Also be reminded, only companies that make payment and fill in the above forms completely are qualified to participate in the bid.

4. A receipt and a link to download the RFP document will be provided via email to the buyer of the RFP document within 3 working days (09:00 am to 05:00 pm) after payment is confirmed by the Energy Commission of Sabah (ECoS). If the payment transaction is not successful within 3 working days after the purchase notification email is received by ECoS, an email rejecting the RFP document purchase request will be issued.
5. Any questions can be sent via email to LSS-SABAH2024@ecos.gov.my and will be answered during working hours (Monday to Friday, 09:00 am to 05:00 pm).

RFP DOCUMENT PURCHASE PROCEDURE FLOWCHART



Energy Commission of Sabah (ECoS)
Level 10, Plaza Shell, 29, Jalan Tunku Abdul Rahman,
88000 KOTA KINABALU, Sabah

www.ecos.gov.my
LSS-SABAH2024@ecos.gov.my



RFP DOCUMENT BUYER INFORMATION FORM

**COMPANY'S / CONSORTIA'S
NAME**

:

**COMPANY'S / CONSORTIA'S
ADDRESS**

:

CONTACT PERSON

:

E-MAIL ADDRESS

:

CONTACT NUMBER

:

Note: Please make sure all information is filled in accurately.



RFP PURCHASE PAYMENT INFORMATION FORM

Company's / Consortia's Name	<input type="text"/>
Payer's Name	<input type="text"/>
(if different from above):	<input type="text"/>
Bank:	<input type="text"/>
Payment Date:	<input type="text"/>
Bank Payment Reference No.:	<input type="text"/>
Payment Amount:	<input type="text"/>
Bid Reference Number:	<input type="text" value="ECoS/JPIP/RFP/LSS2024"/>

Note: Please make sure all information is filled in accurately.