



GOVERNMENT OF BERMUDA
Ministry of Public Works and Environment

Annex E

Swing Bridge Replacement 2026

Local Benefits Form

LOCAL BENEFITS FORM

(SOCIAL, ECONOMIC AND ENVIRONMENTAL)

All pages of this form must be completed and returned with the Proponent's response.

This form is used to gather information to influence, help economic transformation and enable meaningful participation of Bermudians, Bermudian Companies and Bermudian "Specified Businesses" (small or medium sized) in the performance of the Swing Bridge Replacement Project. The Government's aim is to encourage good practice, skills, training opportunities and increase participation in the local economy.

Local Benefits are worth 30% of the total Score in the project Evaluation Matrix.

Proponent:

Date:

Definitions

"Specified Business", according to the Code of Practice Project Management and Procurement (page 8 and 9), means a Bermudian-owned and owner-operated business enterprise with such characteristics as the Bermuda Economic Development Corporation may determine and

(A) gross annual sales of less than one million dollars, or an annual payroll of less than five hundred thousand dollars; or

(B) at least three of the following attributes:

- (i) gross annual revenue of between \$1,000,000 and \$5,000,000;
- (ii) net assets of less than \$2,500,000;
- (iii) an annual payroll of between \$500,000 and \$2,500,000;
- (iv) between a minimum of 11 and a maximum of 50 employees; and
- (v) been in operation for a minimum of 10 years.

Please note that BEDC has not yet requested any additional requirements of businesses to be categorized as a Specified Business. Any Bermuda owned company that satisfies the criteria on item A or item B above will be considered a Specified Business.

"Proposed Participation Rate" is the proportion of the Proponent's lump sum total in his offer, that is proposed to be paid to Bermudian suppliers, sub-contractors, or local labour. Housing, hotels and per diem costs are excluded. The participation rate shall be calculated as:

$$\frac{SUM\ OF\ EXPENSES\ IN\ BERMUDA}{PROPONENT'S\ LUMP\ SUM\ TOTAL} \times 100$$

Participation in Local Economy

1. Please state your Proposed Participation Rate%

Please indicate whether you are submitting a Participation Outline Strategy

Yes No

2. Proponent’s Employees/Bermudians

Please indicate the total number of persons employed by the company and the number of Bermudian employees. Please indicate number of Bermudians in Project Team.

NUMBER OF NON-BERMUDIANS	
NUMBER OF BERMUDIANS	
NUMBER OF SPOUSES OF BERMUDIANS	
TOTAL NUMBER OF EMPLOYEES	
NUMBER OF BERMUDIANS AND SPOUSES OF BERMUDIANS IN PROJECT TEAM	

3. Please list major Bermudian Owned Contractor, sub-contractors or sub-contractor trades proposed to participate on the contract, and corresponding role in the table below. Please add more lines as necessary. Also state whether each listed contractor or sub-contractor is a Specified Business (Y) or not (N).

PROPOSED SUB-CONTRACTOR OR TRADE	Specified Business Y/N	Proposed Role, Services or Products Supplied	Participation Rate

4. Subcontractor's Employees/Bermudians

Please indicate the total number of persons employed by each proposed Bermudian Owned Subcontractor and the number of Bermudian employees. Please add tables as necessary.

For: *[Insert Proposed Subcontractor or Trade]*

NUMBER OF NON-BERMUDIANS	
NUMBER OF BERMUDIANS	
NUMBER OF SPOUSES OF BERMUDIANS	
TOTAL NUMBER OF EMPLOYEES	
NUMBER OF BERMUDIANS AND SPOUSES OF BERMUDIANS IN PROJECT TEAM	

For: *[Insert Proposed Subcontractor or Trade]*

NUMBER OF NON-BERMUDIANS	
NUMBER OF BERMUDIANS	
NUMBER OF SPOUSES OF BERMUDIANS	
TOTAL NUMBER OF EMPLOYEES	
NUMBER OF BERMUDIANS AND SPOUSES OF BERMUDIANS IN PROJECT TEAM	

5. Total number of proposed Bermudians and spouses of Bermudians in Project Team

Skill Development – Internships/ Apprenticeships/ Training Opportunities

6. Does your business offer internships, apprenticeships or other training opportunities?

Yes No

7. Please indicate below what training opportunities exist. (add more lines as needed)

NAME OF TRAINING OPPORTUNITY PROPOSED	Number of positions	Description
TOTAL		

8. How many training opportunities for Bermudians or spouses of Bermudians is the Proponent’s team willing to provide in this project?

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Please indicate whether you are submitting a Training Proposal

- Yes No

9. Safety and Health, Sustainability, and Environmental Policies

Please indicate whether you are submitting:

- a) Safety and Health Policy

Yes No
- b) Safety and Health Record Report

Yes No
- c) Environmental Policy

Yes No
- d) Sustainable Goods and Services Policy

Yes No