REPUBLIC OF KENYA

MINISTRY OF HEALTH
STATE DEPARTMENT FOR PUBLIC
HEALTH AND PROFESSIONAL
STANDARDS

P.O. BOX 30016 – 00100
NAIROBI

REGISTRATION OF SUPPLIERS FOR GOODS AND SERVICES
FOR FINANCIAL YEARS 2023–2024 AND 2024– 2025

TENDER NO.

1. MOH/SDPH&PS/REG/001/2023-2024
   TO
   MOH/SDPH&PS/REG/001/2023-2024
   &
2. MOH/SDPH&PS/REG/W1/2023- 2024
   TO
   MOH/SDPH&PS/REG/W2/2023- 2024

FIRM’S NAME:……………………………………………………………………………………………………

CATEGORY NO:……………………………………………………………………………………………………

Tender Date: 12/09/2023
Closing/Opening Date: 26/09/2023 AT 11.00 A.M
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# TENDER NOTICE

**INVITATION TO TENDERS FOR REGISTRATION OF SUPPLIERS FOR GOODS, WORKS AND SERVICES FOR FINANCIAL YEARS 2023–2024 AND 2024–2025**

## 1. SUPPLY OF GOODS

<table>
<thead>
<tr>
<th>CATEGORY NO.</th>
<th>ITEM DESCRIPTION</th>
<th>ELIGIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOH/SDPH&amp;PS/REG/C1/2023-2024</td>
<td>Supply of General Office Stationery</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C2/2023-2024</td>
<td>Supply and Delivery of Computers, Servers, Printers, UPS, Scanners Computer Spare parts, Consumables and Accessories</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C3/2023-2024</td>
<td>Supply and Delivery of Assorted Toners and Cartridges</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C4/2023-2024</td>
<td>Supply of cleaning Materials, Detergents, Disinfectants, Sanitizers and Tissue Papers</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C5/2023-2024</td>
<td>Supply and Delivery of Office Furniture and related office Fittings</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C6/2023-2024</td>
<td>Supply of Motor Vehicle Tyres, Tubes, Batteries and other consumables</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C7/2023-2024</td>
<td>Supply and Delivery of assorted Electrical Items</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C8/2023-2024</td>
<td>Supply of Newspapers, Magazines and Periodicals</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C9/2023-2024</td>
<td>Supply and delivery of Office Equipment Electronic and Telecommunication Equipment (Camera, TVs, Telephone Heads, Mobile Phones etc.)</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C10/2023-2024</td>
<td>Supply of Mobile Phone Airtime/prepaid Telephone Cards</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C11/2023-2024</td>
<td>Supply and Delivery of Bottled Water</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C12/2023-2024</td>
<td>Supply and Delivery of Vaccines</td>
<td>Only those Registered with Pharmacy and Poisons Board</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C13/2023-2024</td>
<td>Supply and Delivery of Nutritional supplements</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C14/2023-2024</td>
<td>Supply and Delivery of Pharmaceuticals and Non-Pharmaceutical items</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C15/2023-2024</td>
<td>Supply and Delivery of Laboratory items</td>
<td>Open To All</td>
</tr>
</tbody>
</table>

## 2. PROVISION OF SERVICES

<table>
<thead>
<tr>
<th>CATEGORY NO.</th>
<th>ITEM DESCRIPTION</th>
<th>ELIGIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOH/SDPH&amp;PS/REG/C16/2023-2024</td>
<td>Provision of mail services, local and international courier services</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C17/2023-2024</td>
<td>Provision of Outside Catering Services</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C18/2023-2024</td>
<td>Provision of General Printing Services, Design and Branding of Promotional Materials (T-Shirts, Caps, Banners, Posters, Flags and Give Away)</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C19/2023-2024</td>
<td>Provision of Engraving and Marking of Ministry’s Assets</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C20/2023-2024</td>
<td>Repair and Maintenance of Computers, Printers, Ups and Related Devices, upgrade and Biometric devices</td>
<td>Open To All</td>
</tr>
<tr>
<td>CATEGORY NO.</td>
<td>ITEM DESCRIPTION</td>
<td>ELIGIBILITY</td>
</tr>
<tr>
<td>--------------</td>
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<td>-------------</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C21 /2023-2024</td>
<td>Repair, Maintenance and Servicing of Motor Vehicles and Motorcycles</td>
<td>Only Garages Approved by Public Works</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C22 /2023-2024</td>
<td>Website, Bulk SMS, Database Development, Internet connectivity (ISP), Cloud Services.</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C23 /2023-2024</td>
<td>Provision of Pest Control and Fumigation Services</td>
<td>Only those Registered with Pest Control Board</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C24 /2023-2024</td>
<td>Repair, Servicing and Maintenance of Photocopiers, except where there is dealership contract(s)</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C25 /2023-2024</td>
<td>Installation and Repair and Maintenance of CCTV and Access Control Equipment</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C26 /2023-2024</td>
<td>Provision of Tracking service to Motor Vehicles.</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C27 /2023-2024</td>
<td>Provision of Transport Services that includes Taxies and Hire of Motor Vehicles</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C28 /2023-2024</td>
<td>Servicing and maintenance of office equipment, Shredders, Document Scanners, Franking machines, Document seals, Binding Machines, Furniture and Other Related Equipment</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C29 /2023-2024</td>
<td>Repair and Maintenance of Electronic Equipment and Systems</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C30 /2023-2024</td>
<td>Provision of Event Management Services</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C31 /2023-2024</td>
<td>Provision of Breakdown and Towing Services</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C32 /2023-2024</td>
<td>Provision of Translation and Interpreter services</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C33 /2023-2024</td>
<td>Provision of Hotel, Accommodation and Conferencing Services Country Wide.</td>
<td>Open To All</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C34 /2023-2024</td>
<td>Provision of Earth Moving and Landscaping Services</td>
<td>Youth, Women and Persons with Disability</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C35 /2022-2023</td>
<td>Provision of Team Building Services</td>
<td>Open To All</td>
</tr>
</tbody>
</table>

### 3. PROVISION OF CONSULTANCY SERVICES

<table>
<thead>
<tr>
<th>CATEGORY NO.</th>
<th>ITEM DESCRIPTION</th>
<th>ELIGIBILITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOH/SDPH&amp;PS/REG/C37 /2023-2024</td>
<td>Provision of Insurance Services (Medical, Motor Vehicles, Motor Cycles and other Related Equipment)</td>
<td>Open To All (Licensed Insurance Companies)</td>
</tr>
<tr>
<td>MOH/SDPH&amp;PS/REG/C38 /2023-2024</td>
<td>Registration for Consultancy services on work environment, employees and customer satisfaction</td>
<td>Open To All</td>
</tr>
</tbody>
</table>

### 4. PROVISION OF MINOR WORKS
Minor Construction Works, Partitioning, Repairs, Painting, and Demolition of Buildings, Offices and Structures
Open To All (Only Those Registered With NCA)

Minor Plumbing, Drainage and Sewerage Services
Open To All (Only Those Registered With NCA)

1) The Registration of suppliers/contractor’s documents detailing relevant terms and conditions, may be obtained at the Ministry’s website www.health.go.ke or www.tenders.go.ke. Tender documents obtained electronically will be free of charge.

2) Tenderers who download the tender document must forward their particulars immediately to procurement@health.go.ke to facilitate any further clarification or addendum.

3) The Tenderer shall chronologically serialize all pages of the tender documents submitted.

4) Duly completed Registration documents in clearly marked with the Tender Number and/or Registration Category No. should be ADDRESSED to:

PRINCIPAL SECRETARY,
MINISTRY OF HEALTH
STATE DEPARTMENT FOR PUBLIC HEALTH
AND PROFESSIONAL STANDARDS,
P. O. BOX 30016–00100 NAIROBI.

5) Completed tenders must be delivered to Tender box located at Afya House, 1st Floor on or before 26th September, 2023 at 11:00am.

6) Electronic Tenders will not be permitted.

7) Tenders will be opened immediately after the deadline date and time specified above or any deadline date and time specified later. Tenders will be publicly opened in the presence of the Tenderers’ designated representatives who choose to attend at the address below.

8) Any canvassing in whatever way will render the prospective bidder(s)/applicant(s) ineligible for participation.

9) Late tenders will be rejected.

A. Address for obtaining further information

Ministry of Health
State Department for Public Health and Professional Standards,
P.O Box 30016-00100 Nairobi.
Procurement office 5th floor, Room 514,
TEL: +254-3310112
Email: procurement@health.go.ke
Afya House, Cathedral Road, Nairobi.
B. Address for Submission of Tenders

Principal Secretary
Ministry of Health,
State Department for Public Health and Professional Standards,
P.O BOX 20781-00200 NAIROBI
Tender documents to be deposited at the tender box situated at Afya House 1ST Floor, GTZ Boardroom,

C. Address for Opening of Tenders

PRINCIPAL SECRETARY
State Department for Public Health and Professional Standards
P. O. BOX 30016–00100 NAIROBI
1.0. REGISTRATION INSTRUCTIONS

1.1 Introduction

The Ministry of Health-State Department for Public Health and Professional Standards invites interested candidates who must qualify by meeting the set criteria as provided by the Procuring entity to perform the contract of supply and delivery of goods, provision of services and minor works to the government.

1.2 Registration Objective

The main objective of this part is to pre-qualify for supply and delivery of assorted items and also provide services under relevant tender categories to Ministry of Health-State Department for Public Health and Professional Standards on as and when required.

1.3 Invitation of Registration

Suppliers registered with Registrar of Companies under the Laws of Kenya in respective merchandise or services are invited to submit their registration documents to the Principal Secretary, Ministry of Health-State Department for Public Health and Professional Services so that they may be pre-qualified for submission of tenders. Applications will be submitted, singly as per category. The client requires prospective suppliers/contractors to supply mandatory information for registration.

1.4 Experience

Prospective suppliers and contractors must have carried out successfully supply and delivery of similar items/services to Government institutions of similar size and complexity. Potential suppliers/contractors must demonstrate the willingness and commitment to meet the pre-qualification criteria.

1.5 Registration Document

This document includes questionnaire forms and documents required of prospective suppliers.

1.6 In order to be considered for registration, prospective suppliers must submit all the information herein requested and as per Public Procurement and Asset Disposal Act,2015 and Regulations Section 23(1) & (2), 24(1) (2) and (3) (a-e).
1.7 Distribution of Registration Documents

Completed Registration Data and other requested information shall be submitted so as to reach:

Principal Secretary
State Department for Public Health and Professional Services
P.O Box 30016-00100 Nairobi.
Afya House, Cathedral Road, Nairobi.

Not later than, Tuesday, 26th September, 2023 at 11:00am (Local time)

1.8 Questions Arising from Documents
Questions that may arise from the Registration documents should be directed to procurement@health.go.ke to reach the Procuring entity not later than 4 days before tender submission date.

1.9 Additional Information

The Government reserves the right to request submission of additional information from prospective bidders.

1.10 Invitation to Tenders/Quotations

Bidding documents (Tender/Quotations) will be made available only to those bidders whose qualifications are accepted by Government, soon after the completion of the registration process.
2.0. BRIEF CONTRACT REGULATIONS/GUIDELINES

2.1 Taxes on imported materials

The supplier will have to pay custom duty and VAT as applicable for all imported materials to be supplied unless the item(s) is/are donor funded.

2.2 Customs clearance

The contractors shall be responsible for custom clearance of their imported goods and materials

2.3 Contract price

The contract shall be of unit price type or cumulative of computed unit price and quantities required. Quantities may increase or decrease as determined by demand and on the authority of the client’s accounting officer or tender.

2.4 Payments

All local purchase shall be on credit of a minimum of thirty (30) days or as may be stipulated in the agreement.
3.0. REGISTRATION DATA INSTRUCTIONS

3.1 Registration data forms

The attached questionnaire forms PQ-1, PQ-2, PQ-3, PQ-4, PQ-5, PQ-6, PQ-7, PQ-8, are to be completed by prospective suppliers/contractors who wish to be pre-qualified for submission of application for the specific tender.

3.1.1 The pre-qualified application forms which are NOT filled out completely and submitted in the prescribed manner will not be considered. All the documents that form part of the proposal must be written in English and in ink.

3.2 Qualification

3.2.1 It is understood and agreed that the REGISTRATION data on prospective bidders is to be used by the Ministry of Health-State Department for Public Health and Professional Services in determining, according to its sole judgment and discretion, the qualifications of prospective bidders to perform in respect to the tender category as described by the Client.

3.2.2 Prospective bidders will not be considered qualified unless in the judgment of Technical Ministry of Health-State Department for Public Health and Professional Services they possess capability, experience, qualified personnel available and suitability of equipment and net current assets or working capital sufficient to satisfactorily execute the contract for goods/services.

3.3 Essential Criteria for Registration

(a) Experience: Prospective bidders shall have at least 2 years’ experience in the supply of goods, works, services and allied items in case of potential supplier/contractor should show competence, willingness and capacity to service the contract.
(b) Prospective candidates require special experience and capability to organize supply and delivery of items, or services at short notice.
(c) Ministry of Health reserves to request for additional qualification information at the tender/quotiation stage.
(d) The firms must be registered in Kenya, with certificate of Registration, Incorporation copies of which must be attached.
(e) The firm must show proof that it has paid all its statutory obligations and have Valid Tax Compliance Certificate from the Kenya Revenue Authority (KRA).
(f) Firms must submit CR12 issued within the last six (6) months and which must be attached

3.3.2 Personnel
The names and pertinent information and CVs of the key personnel for individual or group to execute the contract must be indicated in form PQ-3.

3.3.3 Financial Condition
The candidate’s financial condition will be determined by latest financial statement submitted with the prequalification documents as well as letters of reference from their bankers regarding
suppliers/contractor’s credit position. Potential suppliers/contractors will be pre-qualified on the satisfactory information given.

3.3.4 Past Performance
Past performance will be given due consideration in pre-qualifying bidders. Letter of reference from past customers should be included in Form PQ-6

3.4 Statement
Applicants must include a sworn statement Form PQ-8 by the Tenderer ensuring the accuracy of the information given.

3.5 Withdrawal of Prequalification
Should a condition arise between the time the firm is pre-qualified to bid and the bid opening date which in the opinion of the Client/Government could substantially change the performance and qualification of the bidder or his ability to perform such as but not limited to bankruptcy, change in ownership or new commitments, the Government reserves the right to reject the tender from such a bidder even though he was initially prequalified.

Any form of Corruption shall lead to deregistration from the list of registered suppliers.

3.6 The firm must have a fixed Business Premise and must be registered in Kenya, with certificate of Registration, Incorporation/Memorandum and Articles of Association, copies of which must be attached.
Mandatory - Copy of current business license and Registration (by registrar of companies) in fields applied for.

3.6.1 The firm must show proof that it has paid all its statutory obligations and have current Tax Compliance Certificate

3.7 Invitation to Tender.
The successful firms that will be registered will be issued with Request for Quotation documents from time to time and as and when need arises and all firms invited are expected to quote. Those wishing not to participate are required to indicate reasons for non-participation on the tender/quotation form/email failing which the firm may be deleted from Ministry of Health panel of suppliers.

All suppliers MUST have a valid email address and any change must be communicated to the Ministry.
FORM PQ-1: REGISTRATION DOCUMENTS

All firms MUST provide:

CATEGORY: A: OPEN TO ALL

PRELIMINARY EVALUATION (MANDATORY REQUIREMENTS)

<table>
<thead>
<tr>
<th>No</th>
<th>Requirements</th>
<th>Requirement</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Copy of Certificate of Registration/Incorporation</td>
<td>Mandatory</td>
</tr>
<tr>
<td>2</td>
<td>Copy of Valid Tax Compliance Certificate</td>
<td>Mandatory</td>
</tr>
<tr>
<td>3</td>
<td>Valid Single Business Permit from a County Government</td>
<td>Mandatory</td>
</tr>
<tr>
<td>4</td>
<td>A Copy of CR 12 for companies issued within the last 6 months i.e from July 2022</td>
<td>Mandatory</td>
</tr>
<tr>
<td>5</td>
<td>Certificates from affiliated Professional Bodies/ Associations, where the nature of supply or service is applicable/specific to your line of business e.g. NCA</td>
<td>Mandatory</td>
</tr>
<tr>
<td>6</td>
<td>Firm’s audited accounts for previous one year. (Attach proof)</td>
<td>Mandatory</td>
</tr>
<tr>
<td>7</td>
<td>All the pages of the tender document/attachments must be serialized</td>
<td>Mandatory</td>
</tr>
<tr>
<td>8</td>
<td>Dully Completed Forms in PQ-2, PQ-3, PQ-4, PQ-5, PQ-6, PQ-7, PQ-8, PQ-9</td>
<td>Mandatory</td>
</tr>
</tbody>
</table>

CATEGORY B: YOUTH, WOMEN & PERSONS WITH DISABILITY

PRELIMINARY EVALUATION (MANDATORY REQUIREMENTS)

<table>
<thead>
<tr>
<th>Requirements</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Copy of Certificate of Registration/Incorporation</td>
<td>Mandatory</td>
</tr>
<tr>
<td>2 Copy of Valid Tax Compliance Certificate from Kenya Revenue Authority</td>
<td>Mandatory</td>
</tr>
<tr>
<td>3 A Copy of CR 12 for companies issued within the last 6 months i.e from January 2022</td>
<td>Mandatory</td>
</tr>
<tr>
<td>4 Valid Registration Certificate from The National Treasury (Applicable for firms owned by Youth, Women and Persons with Disability)</td>
<td>Mandatory</td>
</tr>
<tr>
<td>5 All the pages of the tender document/attachments must be serialized</td>
<td>Mandatory</td>
</tr>
</tbody>
</table>
PART I: REGISTRATION DOCUMENTATION

Firms must provide copies of the following applicable to Open & AGPO:

a) Copies of Certificate of Incorporation/Partnership deed/Business registration
b) Copy of Valid AGPO Registration Certificate from The National Treasury (Applicable for firms owned by Youth, Women and Persons with Disability)
c) Valid Tax Compliance Certificate
d) Copy of valid Single Business Permit from County Government for non AGPO firms
e) A Copy of CR 12 for companies issued within the last 6 months i.e from February 2023
f) Copies of relevant registration certificates/permits/licenses specific to your line of business from applicable bodies’ e.g. Ministry of Public Works, NCA, AAK, MISK, CA, LSK, ACPAK, ACPSK, ISPAK, PCB, etc.
g) Current letters of recommendation or LPOs/LSOs from previous organizations served (provide at least 2) for Non AGPO.
h) Copies of current practicing Certificates for all professionals where applicable from relevant/applicable bodies.
i) Where registration for service provision is mandatory, the firm must attach evidence of valid registration certificate with relevant Professional bodies/Authorities.

FORM PQ-2: REGISTRATION DATA

All firms MUST fill and stamp the following form:

REGISTRATION DATA

1. Types of Businesses..........................................................................................................

   Legal name of firm.............................................................................................................
   Post office address...........................................................................................................
   Street and Address...........................................................................................................
   City....................................................................................................................................
   Country .............................................................................................................................
   Telephone No..................................................................................................................
   Person to contact..............................................................................................................
Title……………………………………………………………………………………

2. Organization & Business Information……………………………………………………

   General Manager…………………………………………………………………………
   Directors…………………………………………………………………………………
   Others……………………………………………………………………………………
   Partnership (if applicable)……………………………………………………………..
   Names of Partners………………………………………………………………………

3. Year of Business Registration…………………………………………………………

4. Under present management since………………………………………………………

5. Net worth equivalent Kshs……………………………………………………………..

6. Bank reference and address……………………………………………………………
FORM PQ-3: SUPERVISORY PERSONNEL

All firms MUST give the following details;

Name of director/manager ..............................................................
Academic qualification......................................................................
Professional qualification.................................................................
Length of service with contractor or supplier position held ..................
.................................................................................................

Construction/or service experience
a) Name of project.................................................................
b) Character and nature of project ..............................................
c) Contract value.................................................................
d) Location of project.................................................................
e) Period of project.................................................................
f) Title and responsibility in project..............................................
g) Other........................................................................

Proposed Technical Personnel
(a) ........................................................................
(b) ........................................................................
(c) ........................................................................
(d) ........................................................................
(e) ........................................................................
(f) ........................................................................
(g) ........................................................................

Proposed position in this project if contract is awarded ..................
.................................................................................................
FORM PQ-4: FINANCIAL POSITION

All bidders MUST attach bank reference letters from the banks where they maintain account.
FORM PQ-5: CONFIDENTIAL BUSINESS QUESTIONNAIRE
All bidders MUST complete and stamp the confidential business questionnaire;

CONFIDENTIAL BUSINESS QUESTIONNAIRE
You are requested to give the particulars indicated in part 1 and either part 2 (a) 2 (b) or 2 (c) whichever applies in your type of business.
You are advised that it is a serious offence to give false information on this Form.

Part 1 – General:

Business Name ..........................................................................................................
Location of Business premises ..................................................................................
Plot No. ........................................ Street/Road .......................................................
Postal Address ......................................Tel No. ..................................................
Nature of Business ..................................................................................................
Current Trade License No. ......................................... Expiry date .........................
Maximum value of business which you handle at any one time KES ......................
Name of your bankers ......................................................... Branch .....................
Are you an agent of the Kenya National Trading Corporation? YES/NO ..............

Part 2 (a) – Sole Partnerships:
Your name in full ....................................................................................................
Age .................................................. Nationality .............................................
Country of origin ..................................................................................................
Citizenship details .................................................................................................

Part 2 (b) – Partnership:

<table>
<thead>
<tr>
<th>Name</th>
<th>Nationality</th>
<th>Citizenship Details</th>
<th>Shares</th>
</tr>
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Part 2 (c) – Registered Company Private or Public
State the nominal and issued capita of the company

Nominal K£ .............................................................................................................
Issued K£ .............................................................................................................
Give details of all directors as follows: - Name | Nationality | Citizenship | Details

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Signature .........................Date & Stamp of Tenderer.................................................If Kenyan Citizen indicate under Citizenship Details whether by Birth, Naturalization or Registration
FORM PQ-6: PAST EXPERIENCE

(This section is mandatory only to Non-AGPO bidders. AGPO registered bidders will automatically qualify in this category.)

LIST NAMES OF AT LEAST FIVE (5) CLIENTS (Give the contacts of the organization).
**FORM PQ-7: LITIGATION HISTORY**

Applicants, including each of the partners of a joint venture, should provide information of any history of litigation or arbitration resulting from contracts executed in the last five years or currently under execution (Instructions to Applicants, para. 4.8). A separate sheet should be used for each partner of a joint venture.

Please indicate if no litigation history to qualify in this section.

<table>
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<tr>
<th>Award FOR or AGAINST Applicant</th>
<th>Name of client, cause of litigation and matter in dispute</th>
<th>Disputed amount (current value Kshs.)</th>
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FORM PQ-8: SWORN STATEMENT

Having studied the registration information for the above tender category We/I hereby state:

a. That the information furnished in our/my application is accurate to the best of our/my knowledge.

b. That in case of being pre-qualified we/I acknowledge that this grants us the right to participate in due time in the submission of a tender or quotation on the basis of provision in the tender or quotation documents to follow.

c. That REGISTRATION bidders will be invited randomly to participate in the tender/quotations as and when there is a requirement.

d. We/I enclose all the required documents and information required for the pre-qualification evaluation.

Date……………………………………………………………………………………………………

Applicant’s Name……………………………………………………………………………………

Represented by……………………………………………………………………………………

Signature…………………………………………………………………………………………

Stamp/Seal…………………………………………………………………………………………

(Full name and designation of the person signing and stamp or seal).
FORM PQ-9: ELECTRONIC FUNDS TRANSFER DETAILS

Physical & Postal Address

Box No. ..........................................................
Building ......................................................
Road / Street ..............................................
Date ...........................................................

To: The Director General

........................................................................
........................................................................
........................................................................
........................................................................
........................................................................

NAIROBI

Dear Sir,

ELECTRONIC FUNDS TRANSFER DETAILS

We hereby provide the following bank details for Electronic Fund Transfer Purposes.

Name of Supplier: ..........................................................
Bank and branch: ..........................................................
Bank and Branch Code: ..............................................
Bank Account Number: ...........................................
Pin Number (Tax): ...................................................
VAT Number (Tax): ..................................................

Valid Email Address of Supplier: ..................................
Contact Person: ......................................................
Company Registration No: ........................................

The following certificates are hereby attached:

1. Tax Compliance Certificate
2. Registration Certificates
We certify, under the Seal of the Company, that the information provided above is correct.

Yours faithfully

Signature: ……………………………………………………………………………………………
Name of Company Secretary: ………………………………………………………………………
ID/No……………………………………………………………………………………………………

Signature: ……………………………………………………………………………………………
Name of Director: ………………………………………………………………………………………
ID/No……………………………………………………………………………………………………

Affix Company Seal Here