



PHDA
Partners for Health and
Development in Africa

PRE-QUALIFICATION OF BIDDERS FOR
SUPPLY/ PROVISION OF GOODS, SERVICES
AND WORKS FOR FINANCIAL YEAR 2018-
2020

CATEGORY.....2018-2020

JANUARY, 2018

TABLE OF CONTENTS

SECTION 1: PRE-QUALIFICATION INSTRUCTION.....	3
1.1 Pre-qualification Document	3
1.2 Tender Prospective	3
1.3 Distribution Of Pre-Qualification Documents	3
1.4 Questions Arising	3
1.5 Additional Information.....	4
SECTION 2: BRIEF CONTRACT GUIDELINES/ REGULATIONS	4
2.1 Contracts Price	4
2.2 Payments	4
SECTION 3: PREQUALIFICATION DATA FORM INSTRUCTIONS	4
3.1 Prequalification Data Form	4
3.2 Incomplete Application	4
3.3 Qualification Mark	4
3.4 Pre-qualification Criteria	4
SECTION 4: SUMMARY OF MANDATORY DOCUMENTS CHECKLIST	5
OFFICIAL PRE-QUALIFICATION QUESTIONNAIRE	5-9

SECTION 1

PRE-QUALIFICATION INSTRUCTIONS

INTRODUCTION

PHDA would like to invite interested organizations who qualify by meeting the pre-set criteria as provided below to perform the contract of provision of goods and services.

1.1 PRE-QUALIFICATION DOCUMENT

This document includes questionnaire forms required of prospective suppliers. You are requested to provide information as accurately as possible and where space provided is not sufficient, please use a separate sheet of paper and bind together with this form.

All information provided will be treated as confidential.

1.2 TENDER PROSPECTIVE

In order to be considered for the tender, the prospective supplier must submit all the information herein requested. Ensure the information provided is correct. If the information given is found to be incorrect in any respect, the application shall not be considered.

1.3 DISTRIBUTION OF PRE-QUALIFICATION DOCUMENTS

A copy of the complete pre-qualification data and other requested information shall be deposited at the Tender Box based at PHDA offices at Geomaps center, 4th Floor, Matumabto road, Upper Hill Nairobi:-

Not later than 10.00 am on **2nd March, 2018**

1.4 ADDITIONAL INFORMATION

PHDA reserves the right to request submission of additional information from prospective bidders. PHDA also reserves the right to visit and inspect business premises of the applicants to verify information provided.

SECTION 2

BRIEF CONTRACT GUIDELINES/ REGULATIONS

2.1 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 committee.

2.2 PAYMENTS

All local purchases shall be on credit of a minimum of thirty (30) days or as it may be stipulated in the contract agreement.

SECTION 3

PREQUALIFICATION DATA FORM INSTRUCTIONS

3.1 PREQUALIFICATION DATA FORM

The attached questionnaire forms are to be completed by prospective suppliers/ contractors who wish to be pre-qualified for the specified tender category.

3.2 INCOMPLETE APPLICATION

The application forms which are not duly filled and stamped and submitted in the prescribed manner will not be considered. All the documents must be written in English language and in legible ink.

3.3 QUALIFICATION MARK

The qualification mark is 60 points and over.

3.4 PRE-QUALIFICATION CRITERIA

Information required:

1. Registration Document
2. Past Experience Proof
3. Most recent financial statement
4. Litigation History
5. Mandatory documents
6. Declaration

SECTION 4
SUMMARY OF MANDATORY DOCUMENTS CHECKLIST

- | | |
|--|--------------------------|
| 1. Company Profile (Indicate geographical coverage of business) | <input type="checkbox"/> |
| 2. Certified copy of Company Registration/ Incorporation | <input type="checkbox"/> |
| 3. Certified copy of PIN certificate | <input type="checkbox"/> |
| 4. Certified copy of recent Tax Compliance Certificate-if applicable | <input type="checkbox"/> |
| 5. Bank statements for the last 3 months | <input type="checkbox"/> |
| 6. 3 current letters of recommendation/ Reference/ LPO | <input type="checkbox"/> |

OFFICIAL PRE-QUALIFICATION QUESTIONNAIRE:

1. General and Company / Business Information			
a. Company Name			
b. Trade Name(If different from the above)			
c. Nature of Organization (Partnership/ Sole Proprietor/ Ltd Company)			
d. Physical Location of business premises		Telephone No:	
		P. O. Box	
		Email Address	
e. Contact person name		Telephone No:	
		Email Address	
f. Share holders	Name:	Nationality:	Percentage shares

2. Capability and competency to deliver goods and services		
a. Name Category of Products to deliver		
b. Type of Supplier	Manufacturer/ wholesaler/ retailers/ agent/ other (Please specify)	
c. If manufacturer or service organization, are your products certified by KEBS or affiliated to a recognized accrediting body?	Attach certificate	
d. If you are not a manufacturer are you an authorized dealer	Yes/No (Attach authorization letter)	
e. What is your average response time to a request for a quote		
f. What is the average response to delivery of goods/ services after issuance of Purchase Order		
g. If you intend to subcontract to perform part of the obligation under your area of business, please provide details (Attach separate sheet)		
h. Geographical coverage / List of towns of the company's operation		
i. Who have been your major corporate clients for the past 2 years? State clients name, product service provided, value of contract, contact person		
Organization	Contact Person	Contact Telephone No.
1.		
2.		
3.		
4.		

5.		
6.		
3. Professional Organization		
Please indicate to which professional or trade bodies your organization belongs		
1.		
2.		
3.		
4. Comments		
Please insert any general comments you wish to make.		

5. Declaration		
For the purposes of transparency and fair dealing, all vendors shall make full disclosure of any past/ existing business relationship with any PHDA employee and or Board. Do you have a relationship with any PHDA employee and/ or Board member that would cause any real or perceived conflict of interest?		
Yes/ _____ No- _____ - _____ (Specify)		
I _____ declare, for and on behalf of _____ (company/firm) that all information furnished to PHDA in connection with this prequalification is true and accurate in all materials respect. PHDA is hereby authorized to make such inquires relating to the information shared including with the firms/ company's clients and bankers as it may deem necessary without prior notice to the firm/ company.		
COMPLIANCE WITH KENYA PROCUREMENT LEGISLATION		
PHDA will disqualify any supplier who:		
1. Is bankrupt or is being wound up, where his affairs are being administered by the court, where he has entered into an arrangement with creditors, where he has suspended business antilogous situation arising from similar procedure under national law and regulation.		
2. Has been convicted by a judgment which has the force of res judicator in accordance with the legal provision of the country or any offence concerning his professional conduct.		
3. Has committed any act of grave professional misconduct.		
4. Has not fulfilled obligation relating to the payment of taxes in accordance with the legal provision of the host country- Kenya.		
5. Is guilty of serious misrepresentation in supplying the information required under this section.		
6. Has been subject of conviction of corruption.		
7. Has been subject of conviction of fraud.		
Please confirm whether any of the above applies to your organization or its Directors or any other person who has powers of representation, decision or control of the organization?		

Yes/ No _____ Where the answer is affirmative, please provide details _____

PHDA may seek evidence at a later date , in confirmation of your answer and reserves the right to verify the information with any relevant competent authority

For Official Use Only

Review if the following documents have been attached

Document	Tick
1. Completed and signed PHDA vendor pre-qualification form.	
2. Certified copy of Certificate of Registration and incorporation.	
3. Certified copy of VAT compliance certificate	
4. Certified copy of PIN certificates of firm/ company/ individual	
5. List of ongoing contracts, LPOs, reference letter.	
6. Company profile.	

Vendor Approved By: (Procurement Committee Members)

1.Name: _____
 Designation: _____
 Signature: _____

2.Name: _____
 Designation: _____
 Signature: _____

3.Name: _____
 Designation _____

Signature _____

4.Name: _____

Designation: _____

Signature: _____

5.Name: _____

Designation: _____

Signature: _____