



**GREAT LAKES UNIVERSITY OF KISUMU**

*... your community partner ...*

**SUPPLIER PREQUALIFICATION FORM**

1. Duly completed application documents (original copy) in plain sealed envelope, clearly marked with prequalification category numbers as indicated above should be deposited in the tender box situated at the reception area and clearly addressed to,

**The Chair Person,**

**Tender committee GLUK,**

**P.O BOX 2224-40100, KISUMU.**

So as to reach the university not later than **Friday 28<sup>th</sup> February, 2020 at 11:00 A.M.**

2. All pages MUST be numbered /Serialized as well as tenders attachments.

**NOTE:**

Canvassing or giving of false information will lead to automatic disqualification.

The university has the right to accept or reject any prequalification and is not bound to give reasons for its decision.

Women, Youth and Persons living with disability are encouraged to apply.

After issuing letters to the successful bidders, the procurement officer and Finance representative will have to make a sight visit to all the suppliers so as to know their respective places of business so that the university may avoid dealing with brokers/briefcase suppliers.

**INSTRUCTION TO CANDIDATES**

The bidders are invited to apply for the prequalification of goods, services and works. GLUK will prequalify and enlist bidders from among those who will have submitted applications in accordance with the prequalification requirements for a period of one year.

The pre-qualification documents and the applicant's response therefore shall be the basis of pre-qualification. Bidders must familiarize themselves with the requirements described in this document while preparing their responses.

GLUK does not bind itself to assign services but shall endeavor to ensure equal treatment when opportunities arise.

**Applicants shall be informed of the results, immediately after completion of the process.**

In this selection procedure, the firm that attains the pass marks of **75** points out of **100** points specified in the criteria will be prequalified.

**Prequalified candidates will be asked to give quotations for the items required during the financial year on ‘as and when need arises ‘basis.**

**Clarifications**

Clarifications on this pre-qualification document should be done before the submission of their documents.

Pre-qualification documents **MUST BE SUBMITTED IN ENGLISH.**

Applicants will meet all cost associated with preparation and submission of their documents.

The closing date and time for the submission of the pre-qualification document shall be on 21/2/2020 at 11:00am.

Any pre-qualification document received after the deadline will be rejected as late application shall not be considered unless otherwise.

Committee officials from Great Lakes University of Kisumu shall open the applications immediately after the closing time for submission of PRE-QUALIFICATION Documents in the presence of applicant’s representatives who choose to attend.

**SUPPLIER REGISTRATION CRITERIA**

**TENDER REF/REG NO.....**

**TENDER NAME (DESCRIPTION):**

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

**Registration Criteria**

**A) Mandatory Requirements**

		<b>To be completed by the Evaluation Committee</b>	
<b>S/NO</b>	<b>Requirements</b>	<b>Yes</b>	<b>No</b>
<b>1</b>	Attach a copy of Certificate of company/Business Registration / Incorporation		
<b>2</b>	Attach a copy of a Valid Tax Compliance /Exemption Certificate		
<b>3</b>	Attach Copy of a Business Permit /Trading License		
<b>4</b>	Attach list of Directors For Sole Proprietors –Attach a Copy of National ID card for the owner and for a Partnership-Attach a Partnership deed		
<b>5</b>	Attach Valid Registration /License with relevant Bodies (Where Applicable)		

**B) Technical Evaluation**

<b>NO</b>	<b>Requirements(submit Evidence)</b>	<b>PART NO.</b>	<b>SCORE</b>
1	Year of experience	I	20
2	Supplier Personal Data	II	20
3	Financial Position- (attach copies of financial statement for the last three years)	III	15
4	Past performance and Experience-attach at least four current relevant LPO From four different companies you have dealt with)	IV	40
5	Litigation History	V	5
	<b>TOTAL</b>		<b>100</b>

Note:

The minimum score to qualify for prequalification shall be 75%. Applicants who will not meet this minimum score shall be disqualified at this stage.

**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 to your type of business.

**YOU ARE ADVISED THAT IT IS A SERIOUS OFFENCE TO GIVE FALSE INFORMATION ON THIS FORM**

**Part 1: General**

Company/Business Name.....

Location of Business

Premises.....

County of Operation.....

Street/Road.....

Plot No.....

Phone No.....

Email Address.....

Postal Address.....

Nature of Business.....

Registration Certificate No.....

Business Permit/License No..... Expiring Date.....

Tax Compliance Status.....

Maximum value of business which you can handle at any one time kshs.....

Name of your bankers.....Branch.....

Account No.....

**Part 2(a) – Sole Proprietor**

Your Name in Full.....Age.....

Nationality.....Country of Origin.....

Citizenship details.....

**Part 2(b) Partnership**

Give details of partners as follows:

NO	NAME	NATIONALITY	CITIZENSHIP DETAILS	NO. OF SHARES
1				
2				
3				
4				
5				

**Part 2(c) –Registered Company**

Private or Public.....

State the nominal and issued capital of the company

Nominal Kshs .....

Issued Kshs.....

Give details of all directors as:

NO	NAME	NATIONALITY	CITIZENSHIP DETAILS	NO. OF SHARES
1				
2				
3				
4				
5				

I/WE CERTIFY THAT THE INFORMATION ABOVE IS CORRECT

Date.....Signature of supplier.....Official R/Stamp

If Kenyan citizen, indicate “citizenship details” whether by birth, naturalization or Registration.

*(You may attach a separate sheet if space is required. The attachment must be duly signed and stamped).*

### SUPPLIER DETAILS FORM

S/NO	DETAILS	
1	NAME OF ORGANIZATION	
2	POSTAL ADDRESS	
3	POSTAL CODE	
4	TOWN	
5	PIN NUMBER	
6	BANK NAME	
7	BANK BRANCH	
8	BANK ACCOUNT NUMBER	
9	EMAIL ADDRESS	
10	DATE	
11	NAME OF DIRECTOR	
12	SIGNATURE	
13	INCORPORATION NUMBER/BUSINESS REGISTRATION NUMBER	
14	CONTACT PERSON(S): NAME	
	PHONE NO	

**SWORN STATEMENT.**

I declare that to the best of my knowledge the answers submitted in this prequalification information for the above provision of goods/services applied for I hereby state that:

1. The information and answers furnished in this prequalification questionnaire form (and any supporting documentation) are correct to the best of our knowledge and I understand any misrepresentation will render my organization ineligible to participate in any business activities with Great Lakes University of Kisumu.
2. That in case of being prequalified we acknowledge that this grants us the right to participate in due time in the submission of tender /quotation on the basis of provisions in the tender/ quotation document to follow.
3. We enclose all the required documents and the information required for the prequalification evaluation.
4. We will not engage in any corrupt practices with the commission or members of staffs.
5. We have not been debarred from participating in public procurement proceedings.

**OFFICIAL RUBBER STAMP**

**FOR OFFICIAL USE ONLY**

1. Name of Officer receiving the Document during Tender Opening;

S/NO	Name of officer	Signature	Date
1			
2			
3			
4			
5			

2. Names of Officer Who Evaluated the Documents

S/NO	Name of Officer	Signature	Date
1			
2			
3			
4			
5			

3. Recommendation of the Evaluation Committee

Approved: YES [ ] No [ ]

Not Approved (With Reason)

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

4. Approval by the Procurement Officer

Name.....Sign.....