



Centre for Health Solutions - Kenya

Preferred Partner for Health Solutions

**PRE-QUALIFICATION OF BIDDERS FOR THE
SUPPLY/PROVISION OF GOODS, SERVICES AND WORKS
FOR 2024 FINANCIAL YEAR
ENDING DECEMBER 31, 2024**

CATEGORY CHS/2024

JANUARY 2024

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SECTION 1

1. PRE-QUALIFICATION INSTRUCTIONS

1.1 INTRODUCTION

The **CHIEF EXECUTIVE OFFICER, CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS)** would like to invite interested candidates who **must qualify** by meeting the set criteria provided by the procuring entity for the provision of goods and services.

1.2 PRE-QUALIFICATION OBJECTIVE

To qualify suppliers to supply and deliver assorted items and provide services under relevant tenders/quotations as and when required during the period ending December 31, 2024.

1.3 INVITATION OF PRE-QUALIFICATION

Suppliers registered with the registrar of companies under the laws of Kenya in the provision of respective merchandise or services are invited to submit their tender documents to the **CEO, CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS)**, so they may be pre-qualified for submission of tenders/quotations. Bids will be submitted in complete lots singly or in combination. The client requires prospective suppliers to supply mandatory information for tender.

1.4 EXPERIENCE

Prospective suppliers and contractors must have successfully supplied and delivered similar items/services to institutions of similar size and complexity. Potential suppliers /contractors must demonstrate the willingness and commitment to meet the tender criteria.

1.5 PRE-QUALIFICATION DOCUMENT

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

1.6 TENDER PROSPECTIVE

The prospective supplier must submit all the information herein as requested to be considered for the tender.

1.7 DISTRIBUTION OF PRE-QUALIFICATION DOCUMENTS

Prospective suppliers must submit one copy of the complete pre-qualification documents and other requested information to reach:-

THE CHIEF EXECUTIVE OFFICER,
CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS),
P.O. BOX 23248-00100,
NAIROBI.

Tel; 020-2710077/+254 (0) 724 71 0077

No later than 10:00 AM (Local time) on February 16, 2024.

The category applied for should be indicated on the envelope together with the vendor's company name.

1.8 QUESTIONS ARISING FROM DOCUMENTS

Questions that may arise from the tender documents should be directed to THE CHIEF EXECUTIVE OFFICER, whose address is given in 1.7 above or through email to procurement@chskenya.org.

1.9 ADDITIONAL INFORMATION

CENTRE FOR HEALTH SOLUTIONS – KENYA reserves the right to request additional information from prospective bidders.

1.10 INVITATION TO TENDER/QUOTATION

Bidding documents (Tender/Quotation) will be made available only to those bidders whose qualifications are accepted by **CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS)** after scoring 70% and above, soon after the completion of the tender evaluation process.

SECTION 2

2. 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 CUSTOMERS CLEARANCE

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

2.3 PRICING

The Local Purchase Order or contract shall be of unit price type or cumulative computed unit price and quantities required. Quantities may increase or decrease as determined by demand and on the authority of CHS.

2.4 PAYMENTS

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

SECTION 3

PRE-QUALIFICATION DATA FORM INSTRUCTION

3.1 PRE-QUALIFICATION DATA FORM

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

3.1.1 INCOMPLETE APPLICATION

The application forms that are not filled, duly stamped, 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 legible ink.

3.2 QUALIFICATION

3.2.1 THE TENDER DATA

It is understood and agreed that the tender data on the prospective bidders is to be used by **CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS)** in determining, according to its sole judgment and discretion, the qualifications of the prospective bidder to perform in respect to the tender lots as described by the client.

3.2.2 QUALIFICATION REQUIREMENTS

Prospective bidders will **not be** considered qualified unless in the judgment of **CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS)** they possess the capability, experience, qualified personnel available and sustainability of equipment and net current assets or working capital sufficient to satisfactorily execute the contract for goods/services.

3.3 ESSENTIAL CRITERIA FOR PRE-QUALIFICATION

3.3.1 EXPERIENCE

(a) The prospective bidder should have at least five years' experience in the supply of goods, services and allied items. Potential supplier/contractor should show competence, willingness and capacity to service the contract.

(b) Prospective suppliers require exceptional experience and capability to organize supply and deliver items or services at short notice.

3.3.2 PERSONNEL

The names, pertinent information and CVs of the key personnel to execute the contract must be indicated in form PQ3.

3.3.3 FINANCIAL CONDITION

The supplier's financial condition will be determined by the latest financial statement submitted with the tender documents and letters of reference from their bankers regarding supply credit position. Potential suppliers/contractors will be pre-qualified on the satisfactory information given. Details under PQ4.

3.3.4 PAST PERFORMANCE

Past performance will be given due consideration in qualifying bidders. Letters of reference from past customers should be included in form PQ5 where applicable.

3.4 STATEMENT

The application must include a sworn Statement Form PQ-6 by the tender applicant, confirming accuracy of all information shared with us.

3.5 WITHDRAWAL OF PRE-QUALIFICATION

Should a condition arise between the time the firm has tendered the bid and the opening date, which in the opinion of the Client/ CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS) 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 commitment, CENTRE FOR HEALTH SOLUTIONS – KENYA (CHS) reserves the right to reject the tender from such a bidder even though he was initially pre-qualified.

3.6 OUTLINED SUPPLY AND DELIVERY PROCEDURES

The applicant should also submit a brief statement of supply and service delivery methods and procedures he plans to execute the contract in form PQ-3.

3.7 PRE-QUALIFICATION CRITERIA

<i>No.</i>	<i>Information Required</i>	<i>Form Type</i>	<i>Point Score</i>
1.	Registration Document	PQ-1	23
2.	Pre-qualification data	PQ-2	28

<i>No.</i>	<i>Information Required</i>	<i>Form Type</i>	<i>Point Score</i>
3.	Supervisory personnel	PQ-3	8
4.	Financial position and Bank Details	PQ-4	15
5.	Experience	PQ-5	15
	Sworn statement	PQ-6	4
7.	Litigation History	PQ-7	2
8.	List of ongoing projects	PQ-8	5
			100

TOTAL

3.8 QUALIFICATION MARK

The qualification mark is 70% and over.

3.9 SUBMISSION OF PRE-QUALIFICATION DOCUMENT

The pre-qualification document should be arranged and submitted in the order below:

1. Official CHS Receipt
2. PQ 1
3. PQ 2
4. PQ 3
5. PQ 4
6. PQ 5
7. PQ 6
8. PQ 7
9. PQ 8

FORM PQ-1 PRE-QUALIFICATION DOCUMENTATION

All prospective candidates/ firms MUST provide:

- (a) A copy of the Certificate of Business Registration.
- (b) Copy of V.A.T Registration Certificate.
- (c) Tax compliance Certificate from Kenya Revenue Authority (Failure to produce this certificate to prove compliance will lead to automatic disqualification, thus no further evaluation of your application).**
- (d) Copies of PIN Certificates of firm/Company/Individual.
- (e) Bank references.
- (f) Capacity Statement; CV, academic and professional certificate, latest dealership letters (technical/experience/lab & medical equipment/computers etc.)
- (g) Statement to indicate a willingness to provide goods and services on credit
- (h) Applicants should only apply in their areas of expertise

FORM PQ-2: PRE-QUALIFICATION DATA

You are advised that it is a serious offence to give false information on this form.

GENERAL BUSINESS INFORMATION

Official Trading Name (As Registered):
KRA PIN:
Office Physical Location:
Street/Road:
Postal Address &Postal Code:
City:Country:
Telephone No.:
Nature of Business:
Current Trade License Number:Expiry Date:.....
Maximum Value of business you can handle at any one time, Kes.

CONTACT PERSON DETAILS

a) Name: b) Title:
c) Cellphone No.:d) Email address:

NOTE: The email address provided herein will be used when sending requests for quotations and LPOs, payments follow-ups etc.

BANK DETAILS

Bank Code:
Bank Name:
Bank Branch Code:
Bank Branch Name:
Bank Account Name:
Bank Account Number:
Swift Code:

ORGANIZATION AND BUSINESS INFORMATION

Managing Director or Designate:

Telephone No:

Email Address:

CONFIDENTIAL BUSINESS QUESTIONNAIRE

To be completed as applicable.

PART (A) –Sole Proprietor

Name:

Nationality: Country of Origin:

ID/Passport Number:

PART (B) –Partnership

No	Name	Nationality	ID/Passport Number	Shares
1.				
2.				
3.				
4.				
5.				

PART (C) –Registered Companies

Private or Public:

State the nominal and issue capital of the company

Nominal Kes.....Issue Kes.....

Give details of all directors as follows:

No	Name	Nationality	ID/Passport Number	Shares
1.				
2.				
3.				

No	Name	Nationality	ID/Passport Number	Shares
4.				
5.				

If Kenyan Citizen, indicate under Citizenship Details whether by Birth, Naturalization or Registration.

Date:

Signature & Stamp of Tender:

FORM PQ-3: PERSONNEL INFORMATION

SUPERVISOR

Name:

Academic Qualification:

Professional Qualification:

Length of service with contractor or supplier position held:

PROPOSED TECHNICAL PERSONNEL AND DESIGNATION

(a)

(b)

(c)

(d)

(e)

(f)

(g)

A brief statement of supply and service delivery method the supplier plans to use to execute the contract.....

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FORM PQ-4: FINANCIAL POSITION DETAILS

4.1 Attach a copy of the firm's two recent audited and certified financial statements giving a summary of assets and current liabilities/or any other financial support.

FORM PQ-5: PAST EXPERIENCE

NAMES OF APPLICANTS, OTHER CLIENTS, AND VALUES OF CONTRACT/ORDERS IN THE LAST TWO YEARS (Please attach LPOs that support the information provided)

1.

Name of 1st client (organization).....

Address of client (organization).....

Name of the contact person at the client (Organization).....

Telephone no. of client.....

Value of contract.....

Duration of contract.....

2.

Name of 2nd client (organization)

Address of client (organization).....

Name of the contact person at the client (organization).....

Telephone no. of client.....

Value of contract.....

Duration of contract (Date).....

3.

Name of 3rd Client (organization).....

Address of client (organization).....

Name of the contact person at the client (organization).....

Telephone no. of client.....

Value of contract.....

Duration of contract (Date).....

FORM PQ-6: SWORN STATEMENT

Having studied the tender information for the above project we/I hereby state:

- a) The information furnished in our application is accurate to the best of my/our knowledge.
- b) If we are qualified, we acknowledge that this grants me/us the right to participate in due time in submitting a tender or quotation based on provisions in the tender or quotation documents to follow.
- c) We/I have enclosed all the documents and information required for the pre-qualification evaluation.

Date.....

Applicant's Name.....

Represented by.....

Signature.....

Designation.....

(Full name and designation of the person signing and stamp or seal.)

FORM PQ-7: LITIGATION HISTORY

Provide any litigation or arbitration history resulting from any contractual obligation. If none state so.

FORM PQ-8: LIST OF ONGOING CONTRACTS/ PROJECTS (GOODS, SERVICES)

List and provide evidence of three recent ongoing contracts/projects in the last three years.