**SUPPLIER PRE-QUALIFICATION QUESTIONNAIRE**

This prequalification questionnaire is to be completed by prospective suppliers who wish to provide goods or services to AFRALTI. The information is strictly confidential and solely for the use of AFRALTI.

Company Name:------------------------------------------------

POSTAL ADDRESS:------------------------------------

Tel/Fax-----------------------------------------------------

E-mail:------------------------------------------------------

All applicants must indicate the details below:

Category applied for:-------------------------------------------

Item Description:----------------------------------------------------

**INTRODUCTION**

AFRALTI invites you to submit sealed applications for Prequalification of suppliers for (3) three years that is 2017/18, 2018/19, 2019/20 .To be eligible, the candidate must provide the following documents:-

1. License of trade and certificate of business registration
2. A declaration or certificate that the candidates have fulfilled the obligation to pay taxes- Tax Compliance certificate
3. An abstract of the candidate’s accounts accompanied by a certificate by a certified Auditor for the last one year. In absence of this, a certified copy of Bank account statement for the last one year.

**GENERAL AND COMPANY INFORMATION**

1. COMPANY PROFILE
2. Company Name;---------------------------------------------
3. Trading Name (if different from above) ----------------------------------------
4. Legal status (partnership/sole proprietor/ Ltd. Company) --------------------------
5. a) Company registration certificate No.------------------------------(attach copy)

b) Certification by regulatory bodies (e.g. CA, NCA etc.) (Attach copies)

1. Nature of business licensed to operate ---------------------------------------------
2. Current trade license No ------------- Expiring Date---------------------- (attach copy)
3. (a) PIN No.------------------------------------- (Attach copy)

(b) Tax compliance certificate (attach copy)

1. Contact Person: Name------------------------------------------ Title:-------------------------------------------------------------
2. Tel .No. ------------------------------------------------
3. Postal Addresses: -------------------------------------------------------

* Tel No:---------------------------------------------------------------
* Fax: ----------------------------------------

1. Physical location;---------------------------------------------
2. E-mail addresses:---------------------------------------------------
3. Website—---------------------------------------------------------------
4. Name of Bank:-------------------------------- Branch:------------------------------
5. Insurers (attach Insurance Copies) -------------------------------------------
6. Names of Directors and their nationality:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No.** | **Names of Partners/Shareholders** | **Nationality** | **Citizenship** | **Percentage of Shares** |
| **1** |  |  |  |  |
| **2** |  |  |  |  |
| **3** |  |  |  |  |
| **4** |  |  |  |  |
| **5** |  |  |  |  |

1. **ELIGIBILITY**
2. Have you or your principals been subject of legal proceedings for insolvency,

Bankruptcy, receivership or your business activities suspended for related reasons? -------------------------------------------------------------------------------

------- If yes, when------------- (if yes, you must present legal documentary evidence that you are cleared and your business is now solvent)

1. Are you or your staff or agents subject of legal proceedings for corrupt or unethical business practice or offered any inducement to any procurement entity so that you can be considered for award of a tender?Yes---- No ------
2. Is the firm making this application or any of its directors been debarred or suspended from participating in public procurement or have any procurement entity initiated proceedings of that nature against the firm or one of its directors, for any reason whatsoever?---------

**(C) CAPABILITY TO DELIVER GOODS OR SERVICES**

1. What products/services do you want to be considered to supply---------------------------------------------------------------
2. How many employees do you have? ---------. How many are permanent? ------

How many are temporary? ---------------

1. Which quality standards certification have you attained in the last two years? (Attach copies and give details on a separate sheet of paper)
2. Provide details of your key personnel and attach their CV’S (Use a separate sheet of paper)
3. What is the country of origin for goods or services? -------------------------------------- Are you a manufacturer/wholesaler/retailer/other (please specify)----------------------------
4. If a manufacturer or service organization, are your products certified by Kenya Bureau of standards or are you affiliated to a recognized accrediting body? Yes/No. (Attach documentary evidence of certification)
5. If you are not a manufacture, are you an authorized dealer? – Yes----No-----(attach manufactures authorization)--------------------------------------------
6. What is the maximum value of business, which you can handle at any one time?----------------------------------------------------------
7. If your firm is pre-qualified and awarded the tender to supply goods or services, will you abide by the agreed delivery period, quality and price as per specifications by AFRALTI – Yes/ No
8. Who are your major corporate clients for the past 3 yrs. State Clients name, Product service Provided, value of goods, works or service and contact person.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **No.** | **Name of organization** | **Value of business(KES)** | **Contact Person** | **Tel. No.** | **Email Address** |
| **1** |  |  |  |  |  |
| **2** |  |  |  |  |  |
| **3** |  |  |  |  |  |
| **4** |  |  |  |  |  |
| **5** |  |  |  |  |  |

**(D) PAST AND CURRENT PERFORMANCE AND EXPERIENCE**

1. Is this firm or its directors in any way associated with any other firm that is currently conducting business with or have applied to be considered for prequalification with AFRALTI ? If yes, please provide the name(s) of those firm(s), their address, and their nature of business and indicate the relationship with the company making this application.:------ (Attach details)
2. Have you at any one time been requested to quote for supply of goods and services and failed to return the quotation? Give reason for your action? -----------------------------
3. Have you at any one time been issued with a purchase order by AFRALTI and failed to deliver the goods or services? Give reason for your action ---------------------------
4. If you are a current or previous period supplier of goods and services to AFRALTI, have you at any one time been issued with a letter of cancellation of LPO for failure to supply goods within the agreed time or supplying inferior goods not within specifications?

**DECLARATION**

Declaration of Business relationship (company owner/management) for purpose of transparency and fair dealing, all vendors shall make full disclosure of any existing business relationship with any AFRALTI employee.

Are you a relative or do you have a relationship with any AFRALTI employee that would cause any real or perceived conflict of interest?

Yes/No---------- (specify) -------------------------------------------------------------

Information submitted by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Title\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Stamp: