HAZINA SACCO SOCIETY LTD PREQUALIFICATION 2019 AND 2020

PREQUALIFICATION FOR YEAR 2019 AND 2020
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P.O. Box 59877-00200, Nairobi. Tel: +2542719098/2722106/2428634
Email: info@hazinasacco.or.ke Website: www.hazinasacco.or.ke

PRE-QUALIFICATION OF SUPPLIERS FOR 2019-2020
Tender Reference No: HSS/PREQ/19-20

Hazina Sacco Society Ltd invites applications from interested and eligible firms for pre-qualifications for the supply of the under listed Goods, Services and Works for the Year 2019 and 2020. All the suppliers with whom we are currently engaged also need to re-apply

<table>
<thead>
<tr>
<th>Category Code</th>
<th>Item Description</th>
<th>Eligibility</th>
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<tbody>
<tr>
<td><strong>CATEGORY A: SUPPLY AND DELIVERY OF GOODS</strong></td>
<td></td>
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<tr>
<td>A1</td>
<td>HSS/PRO/01/19-20</td>
<td>Supply of General Office Stationery</td>
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<tr>
<td>A2</td>
<td>HSS/PRO/02/19-20</td>
<td>Supply Of Computers, Computer Consumables &amp; Accessories and Network Equipment</td>
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<tr>
<td>A3</td>
<td>HSS/PRO/03/19-20</td>
<td>Supply of office equipment and tools (photocopiers, scanners, printers, printers consumables, tonners and accessories, telephones and telecommunication equipment)</td>
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<tr>
<td>A4</td>
<td>HSS/PRO/04/19-20</td>
<td>Supply of Computer Software and Licenses.</td>
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<tr>
<td>A5</td>
<td>HSS/PRO/05/19-20</td>
<td>Supply of Office Furniture and Fittings, filing cabinets</td>
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<tr>
<td>A6</td>
<td>HSS/PRO/06/19-20</td>
<td>Supply and Design of forms, Promotional, Communication and Advertising items, Printing of Calendars, Brochures, Printing and embroidery of T-shirts, Caps, staff uniform and Related materials,</td>
</tr>
<tr>
<td>A7</td>
<td>HSS/PRO/07/19-20</td>
<td>Supply and Maintenance of Fire Equipment, Generators and Air Conditioners</td>
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<tr>
<td><strong>CATEGORY B: PROVISION OF GENERAL SERVICES</strong></td>
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<td></td>
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<tr>
<td>B1</td>
<td>HSS/PRO/08/19-20</td>
<td>Provision of General Printing work</td>
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<tr>
<td>B2</td>
<td>HSS/PRO/09/19-20</td>
<td>Provision of Fumigation and Pest Control Services</td>
</tr>
<tr>
<td>B3</td>
<td>HSS/PRO/10/19-20</td>
<td>Provision of office cleaning and Sanitary Services.</td>
</tr>
<tr>
<td>B4</td>
<td>HSS/PRO/11/19-20</td>
<td>Provision of Garbage Collection</td>
</tr>
<tr>
<td>B5</td>
<td>HSS/PRO/12/19-20</td>
<td>Provision of CCTV, Alarm System, Access Control &amp; Biometric</td>
</tr>
</tbody>
</table>
Register Maintenance

| B6  | HSS/PRO/13/19-20 | Repair & Maintenance of office equipment computer, Copiers & Printers | Open |
| B7  | HSS/PRO/14/19-20 | Repairs of Office Furniture and Fittings | Special Group |
| B8  | HSS/PRO/15/19-20 | Provision of Network Infrastructure Services & internet | Open |
| B9  | HSS/PRO/16/19-20 | Provision of security guard services | Open |
| B10 | HSS/PRO/17/19-20 | Provision of telephones and telecommunication equipment Maintenance Services | Open |
| B11 | HSS/PRO/18/19-20 | Provision of Simple Maintenance | Special Group |
| B12 | HSS/PRO/19/19-20 | Provision of cash in transit services | Open |
| B13 | HSS/PRO/20/19-20 | Provision of auctioneer services | Open |
| B14 | HSS/PRO/22/19-20 | Provision of debt collection Services | Open |

**Category C: Consultancy Services**

| C1  | HSS/PRO/23/19-20 | Provision of Legal Services | Open |
| C2  | HSS/PRO/24/19-20 | Provision of external Audit Services (SASRA Approved Only.) | Open |
| C3  | HSS/PRO/25/19-20 | Provision of valuation services—Motor vehicles, Land & Buildings | Open |
| C4  | HSS/PRO/26/19-20 | Provision of land Surveying services | Open |
| C5  | HSS/PRO/27/19-20 | Provision of Training Services | Open |

**Category D: Works**

| D1  | HSS/PRO/28/19-20 | General maintenance Contractors (Painting, repairs, building partitioning, plumbing) | Open |

Applicants for Special category shall clearly mark letter “S” on the top right of the envelope.

Pre-qualification documents shall be downloaded free from our website: [www.hazinasacco.or.ke/downloads](http://www.hazinasacco.or.ke/downloads). Hard copies can also be accessed from the office upon payment of a non-refundable fee of Kshs. 1000/= per category payable in cash during normal office hours i.e. Monday to Friday 8:30 a.m. to 4:30 p.m.

Duly completed Pre-qualification documents in plain sealed envelopes clearly marked with the pre-qualification Item number, tender number HSS/PREQ/19/20/special category (where applicable) for pre-qualification of suppliers should be addressed to:

**The Chief Executive Officer,**
Hazina Sacco Society Ltd,
P.O Box 59877-00200 Nairobi

And deposited in the Tender Box situated at the Sacco reception, Kibera Road, off Ngong Road, Nairobi so as to be received on or before **Thursday 3rd January, 2019 at 3:00 pm.**

Hazina Sacco Society reserves the right to accept or reject any applications/Tender and does not bind itself to give any reasons for such decision(s)
INTRODUCTION

Hazina Sacco Society Ltd would like to invite interested candidates who must qualify by meeting the set criteria as provided by Hazina Sacco to perform the contract of supply and delivery or provision of goods and services to the society.

1.2 Objective

The main objective of pre-qualification of suppliers is to supply and deliver assorted Goods and Services under relevant Tenders/quotations to the Society as and when required during the two-year period ending 31st December 2020.

1.3 Invitation of Pre-qualification

Suppliers registered with the Registrar of Companies under the laws of Kenya in respective merchandise or services are invited to submit their pre-qualification documents to The Chief Executive Officer, Hazina Sacco Society, so as to be pre-qualified for submission of quotations. The prospective suppliers are required to provide mandatory information for pre-qualification.

1.4 Pre-qualification Documents

This document includes a questionnaire to be completed and returned with the tender and be supported by the requisite documents from eligible and competent bidders. In order to be considered for pre-qualification, prospective suppliers must submit all the information required on the forms / questionnaire.

1.5 Submission of Pre-qualification Documents

Duly completed pre-qualification and other supporting documents should be addressed to:

The Chief Executive Officer, Hazina Sacco Society Ltd,
P.O Box 59877- 00200,
Nairobi.

And

Be deposited in the Tender Box at Sacco reception, Kibera Road, off Ngong Road, Nairobi.

1.6 Pre-qualification

It is understood and agreed that the pre-qualification data on prospective bidders is to be used by the Society in determining, according to its sole judgment and discretion, the qualification of prospective bidders to perform in respect with the tender category as described by the client.
1.7 Essential Criteria for Pre-qualification

Experience - Prospective suppliers of goods and services should demonstrate ability and experience to organize, supply and deliver any of the categories of goods and services listed in the Tender Notice.

Financial Capability
The supplier’s financial capability will be determined by examination of the latest 2 year audited financial statements submitted with prequalification documents as well as letters of references from the bankers regarding credit/financial position.

Past Performance
The past performance of suppliers shall be given due consideration in the prequalification exercise. Letters of reference from the past and present clients should be included.

Capacity of the Firm
Prospective suppliers of goods and services should demonstrate that they have the technical, physical, logistical and human resource capacity to supply and deliver the category of goods and/or services that they are seeking to be pre-qualified for.

1.8 Notification of Pre-qualification

All participants shall be notified formally of the outcome after completion of the prequalification process

1.9 Presentation

A table of contents illustrating the contents of the documents is compulsory, as it creates ease of evaluation and will help verify the contents

2.0 Verification

The Society shall have the right to visit the suppliers’ premises to verify the information provided in the document and ascertain as part of the prequalification process, that the supplier in deed has the capability to provide the stated goods and or service

<table>
<thead>
<tr>
<th>REQUIRED INFORMATION</th>
<th>FORM REF</th>
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<tbody>
<tr>
<td>1 Prequalification documentation</td>
<td>PQ-1</td>
</tr>
<tr>
<td>2 Pre-qualification data</td>
<td>PQ-2</td>
</tr>
<tr>
<td>3 Financial position</td>
<td>PQ-3</td>
</tr>
<tr>
<td>4 Past Experience- References</td>
<td>PQ-4A</td>
</tr>
<tr>
<td>6 Past Experience- Volume of business</td>
<td>PQ-4B</td>
</tr>
<tr>
<td>6 Human, Technical and Logistical Capacity</td>
<td>PQ-5</td>
</tr>
<tr>
<td>7 Confidential report</td>
<td>PQ-6</td>
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</tbody>
</table>
FORM PQ-1

PRE-QUALIFICATION DOCUMENTS

(ALL THESE ARE MANDATORY, AND FAILURE TO ATTACH ANY OF THEM WILL LEAD TO AN AUTOMATIC DISQUALIFICATION)

All firms must provide:-

1. Copy of Certificate of Registration/ Incorporation

2. Tax Compliance Certificate from Kenya Revenue Authority

3. Copy of Pin Certificates of firm/company/individual.

4. Registration with the National treasury (Directorate of Procurement) for The Special groups

5. Copy of certificate from regulatory body for category C and D

**NOTE:** Expired Documents are deemed NOT-ATTACHED
REGISTRATION OF SUPPLIERS APPLICATION FORM

Part 1 - General Information

I/We .................................................................................................................. hereby apply for registration (Name of company/firm)

as supplier(s) of ..................................................................................................... (Item Description)

............................................................................................................................... (Category No.)

Physical Location of Business Premises:

............................................................................................................................... Postal Address:

............................................................................................................................... Business Registration Ref No:

............................................................................................................................... Date of registration of business:

............................................................................................................................... Telephone No..........................................................................................................

Mobile No/s: ........................................................................................................

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

Nature of Business:

............................................................................................................................... Full name of applicant

............................................................................................................................... Other business branches (if any)
Part 2 (a) - Sole Proprietors

Name: ..................................................................................................................

Age: ....................................................................................................................

Nationality: ........................................................................................................

ID/Passport No: .............................................

Part 2 (b) - Partnership
Give details of partners as follows:

<table>
<thead>
<tr>
<th>No</th>
<th>Name</th>
<th>Citizenship</th>
<th>Residence</th>
<th>Shares</th>
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<tbody>
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</table>

Part 2 (c) - Registered Company

Private or Public Company: .................................................................

Please state Nominal and Issued capital for the Company:

Nominal Kshs. : .................................................................

Issued Kshs. : .................................................................
Give details of all Directors as follows:

<table>
<thead>
<tr>
<th>No</th>
<th>Name</th>
<th>Citizenship</th>
<th>Residence</th>
<th>Shares</th>
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</table>

**Part 3 - Names of All Associated or Holding Companies (if any)**

1. ........................................................................................................................................
2. ........................................................................................................................................
3. ........................................................................................................................................
4. ........................................................................................................................................
5. ........................................................................................................................................

**NB:** If more companies are applicable, please give the information on a separate sheet of paper.
FORM PQ-3

FINANCIAL POSITION

Attach a copy of firm’s latest two years certified audited financial statements giving summary of assets and liabilities, income and expenditure, cash flow statement.

Attach letters of reference from the bankers regarding supplier’s credit position.
FORM PQ-4A

PAST EXPERIENCE- REFERENCES

Names of Key Clients with Whom the Applicant Has Done Business in the Last Two Years Including the Values of Contracts/Orders.

1st Organization

Name of client (organization) .................................................................

Address of client (organization).....................................................................................

Name of contact person at the client/organization.........................................................

Telephone No. of client....................................................................................................

Value of Contract.............................................................................................................

Duration of Contract (date)..............................................................................................

(Attach documental evidence of existence of contract - attachment )

2nd client (organization)

Name of client (organization) ...........................................................................................

Address of client (organization)....................................................................................... 

Name of contact person at the client/organization...........................................................

Telephone No. of client......................................................................................................

Value of Contract.............................................................................................................

Duration of Contract (date)..............................................................................................

(Attach documental evidence of existence of contract - attachment)
3\textsuperscript{rd} client (organization)
Name of client (organization) ..........................................................

Address of client (organization) ..........................................................

Name of contact person at the client/organization ................................

Telephone No. of client ....................................................................... 

Value of Contract ..............................................................................

Duration of Contract (date) ............................................................... 

(Attach documental evidence of existence of contract - attachment)

FORM PQ-4B

PAST EXPERIENCE- VOLUME OF BUSINESS
State three highest value of business you have handled in the past 12 months

Name of Highest value contract
Name of client (organization) ..........................................................

Value of Contract ..............................................................................

Name of 2\textsuperscript{nd} highest value contract
Name of client (organization) ..........................................................

Value of Contract ..............................................................................

Name of 3\textsuperscript{rd} highest value contract
Name of client (organization) ..........................................................

Value of Contract ..............................................................................
**FORM PQ-5**

**HUMAN, TECHNICAL AND LOGISTICAL CAPACITY**

Please provide the following and any other evidence of your firm’s physical, human, technical and logistical capacity to supply and deliver should you be awarded a tender

**Physical facilities**

Evidence of physical premises (place of business) e.g. attachment of latest utility bill (Electricity, Water bill, Council Rates payments, etc)

<table>
<thead>
<tr>
<th>Name of Key Staff</th>
<th>Position held</th>
<th>Position Held from (Date)</th>
</tr>
</thead>
<tbody>
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</table>

Briefly describe how you would manage a situation where you are coincidentally engaged in three major yet critical client assignments concurrently. How would you go about ensuring that all the client assignments/contracts are delivered on a timely and quality basis while ensuring that all clients are satisfied with the level of customer service?

……………………………………………………………………………………………………………………………………

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FORM PQ 6

CONFIDENTIAL BUSINESS QUESTIONNAIRE-
(To be filled by All Prospective Suppliers)

Part 1

(a) How many years have you been in business under the present business name?
................................................................................................................................................................................
................................................................................................................................................................................

(b) What is the maximum value of business which you can handle at any one time?

Kshs ........................................................................................................................................................................
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(c) State some of the factors that in your own opinion distinguish you from other competitors.
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(d) State whether or not you have experienced, in the area of non-performance by your company, any problem(s) with any contract(s) awarded to you by any organization during the last 12 months and give a brief explanation/description of the problem(s) and how you managed to solve it.
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(e) Give any other information relating to your company that you may consider relevant to your bid to do business with Hazina Sacco Society Ltd.

Part 2

STATUS OF COMPLIANCE WITH STATUTORY REQUIREMENTS

(a) VAT Registration Number

(b) PIN Number

(c) State any Quality Assurance Certification e.g. ISO 9000 held by the company

(d) State if the Company is a subject of bankruptcy proceedings, in receivership, Administrative receivership or any other form of liquidation as defined by the applicable law.

(e) Assets and Liabilities:

Total Assets in Kshs

Current Assets in Kshs

Total Liabilities in Kshs
Net Worth (Total Assets-Total Liabilities)  
………………………………………………………………………………………………………………

Working Capital  ……………………………………………………………………………………………

(f)  Terms of Sale / Trade:-
Credit Period Yes/ No

(If Yes Please Indicate Number of Credit Days)

(g) Name of Bankers and Branch

Part 3
DECLARATION
Having studied the pre-qualification information for the above exercise, I/we hereby state that the information furnished in our application is accurate to the best of our knowledge.

Name ……………………………………………………………………………………………………………

For and on behalf of …………………………………………………………………………………………………

Position…………………………………………………………………………………………………………

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

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

Stamp