

**PRE-QUALIFICATION/REGISTRATION OF SUPPLIERS/CONTRACTORS**

**PROVISION OF GOODS, SERVICES AND WORKS YEAR 2025/2027**

**BIDDERS CATEGORY NO…………………………………………….**

**CLOSING DATE:4th April 2025 AT 12:00 Noon**



**TENDER NOTICE**

**PRE-QUALIFICATION OF SUPPLIERS FOR THE SUPPLY OF GOODS, SERVICES AND WORKS**

**AIC Health Ministries (AICHM)** is a department of the Africa Inland Church responsible for the health programs within the Africa Inland Church-Kenya**. AICHM** invites applications for prequalification from interested vendors (including current suppliers) for the supply of goods, works and services to the organization for the period **2025 to 2027**.

**CATEGORY A: SUPPLY OF GOODS**

|  |  |
| --- | --- |
| **CATEGORY NO.** | **ITEM DESCRIPTION** |
| AICHM/2025-2027/A/01 | Supply and delivery of General Office Stationery, Toner, Cartridge and assorted General supplies |
| AICHM/2025-2027/A/02 | Supply and delivery of Office Furniture and related office fittings |
| AICHM/2025-2027/A/03 | Supply and delivery of Computers, Laptops, Hardware and Software, anti-virus, IT security solutions and related accessories |
| AICHM/2025-2027/A/04 | Supply and delivery of Printer, Scanners, Copiers and LCD Projectors |
| AICHM/2025-2027/A/05 | Supply and delivery of Medical/Laboratory Equipment |
| AICHM/2025-2027/A/06 | Supply and delivery of Pharmaceutical Drugs, Ophthalmic eyedrops/drugs and Vaccines |
| AICHM/2025-2027/A/07 | Supply of Laboratory Supplies and Consumables |
| AICHM/2025-2027/A/08 | Supply and delivery of Orthopedics Supplies (Theatre Screws, Plates, implants etc.) |
| AICHM/2025-2027/A/09 | Supply and delivery of Ophthalmic Supplies (Theatre Supplies, Lenses, frames etc.) |
| AICHM/2025-2027/A/10 | Supply and delivery of Medical Consumables i.e. Surgical consumables, Sutures, Dental consumables, radiology supplies, ENT supplies, Anesthesia consumables, Arthroscopy consumables, etc. |
| AICHM/2025-2027/A/11 | Supply and delivery of non-pharmaceuticals supplies. |
| AICHM/2025-2027/A/12 | Supply and delivery of Cereals, Dry Food and Related Products |

**CATEGORY B: PROVISION OF SERVICES AND WORKS**

|  |  |
| --- | --- |
| **CATEGORY NO.** | **ITEM DESCRIPTION** |
| AICHM/2025-2027/B/1 | Provision of Statutory and Donor/Project Audit services |
| AICHM/2025-2027/B/2 | Insurance Brokerage Services for Motor Vehicle and General insurance. |
| AICHM/2025-2027/B/3 | Insurance Brokerage Services for Staff Medical Insurance Cover, WIBA and GPA |
| AICHM/2025-2027/B/4 | Provision of Repair and Maintenance of Computer Hardware, Printers, Photocopiers, Scanners, LCD and General Electronic Items |
| AICHM/2025-2027/B/5 | Provision of Design, Printing and Publishing Services and Branded Materials (for Newsletters, Brochures, T-Shirts, Staff Uniforms, Caps, Fliers, Banners, Calendars, Envelopes, Booklets and Related Services) |
| AICHM/2025-2027/B/6 | Provision of Repair and Maintenance of Air Conditioner, Refrigerators and Freezers |
| AICHM/2025-2027/B/7 | Provision of Repair and Maintenance of Motor Vehicles |
| AICHM/2025-2027/B/8 | Provision of Construction, Renovation and Repair of Buildings Services, Constructions works. |
| AICHM/2025-2027/B/9 | Provision of Goods Transportation, Distribution and Courier Services |
| AICHM/2025-2027/B/10 | Provision of Accommodation and Conference Services |
| AICHM/2025-2027/B/11 | Provision of air ticketing and tour services (IATA/ KATA registered firms  only) (Flight bookings, Conferences and meeting services) |
| AICHM/2025-2027/B/12 | Consultancy Service (Training, Project Evaluations ETC) |
| AICHM/2025-2027/B/13 | Contractors Services (water Pans, Solar supply and installation, borehole ETC) |
| AICHM/2025-2027/B/14 | Provision of Photography, videography, aerial drone, audio visual production and editing services ETC |
| AICHM/2025-2027/B/15 | Provision of supply, installation, commissioning and maintenance of ERP Software. |
| AICHM/2025-2027/B/16 | Provision of Legal Services. |
| AICHM/2025-2027/B/17 | Provision of Asset Valuation and Tagging Services. |

The completed pre-qualification documents clearly indicating tender number and category should be placed inside plain, sealed and separate envelopes **(each category MUST be submitted in a separate envelope)** and the envelope clearly labelled as below:

**PRE-QUALIFICATION OF SUPPLIERS 2025-2027:**

**CATEGORY DESCRIPTION… (e.g. Category A and NO…(e.g. AICHM/2025-2027/A/01)** and addressed to:

**The Executive Director**

**AIC Health Ministries**

**P.O. BOX 40431-00100**

**NAIROBI**

To be deposited in the Tender Box situated at AIC Health Ministries reception on the AIC Offices Upperhill Road, opposite Rahimtulla Tower, Upper Hill, Nairobi. Pre-qualification documents should be received on or before **4th April, 2025 at** **12.00 Noon**

**Electronic bidding will not be permitted. Late tenders will be rejected.**

A complete set of Pre-qualification documents can be downloaded from AICHM website

[**www.aichm.org**](http://www.aichm.org) by interested Vendors upon payment of a non-refundable fee of Kshs.3,000 per category. The payment should be made through the following Bank account(s):

**Bank:** African Banking Corporation (ABC)

**Account Name:** AIC Health Ministries SIFA Account,

**Account Number:** 007234001000062

**Branch:** Libra House

**Swift code:** ABCLKENA

Or

**MPESA Paybill Number:** 111777

**Account Number:** 007234001000062

**Note: AICHM will not issue an eTIMS receipt for payment made**

Bidders will then attach the original banking deposit slip or MPESA Reference Message to the tender document as proof of Payment.

All inquiries should be in writing and sent to [inquiry@aichm.org](mailto:inquiry@aichm.org).

**AIC Health Ministries (AICHM) is committed to promoting inclusivity and equal opportunities. We strongly encourage applications from persons with disabilities, youth entrepreneurs, and women-led groups to participate in this prequalification process.**

**Pre-qualification documents can be downloaded at our website:** [**www.aichm.org**](http://www.aichm.org)

***AIC Health Ministries reserves the right to accept or reject any or all bids and is not bound to give any reasons for its decision***

**1. PRE-QUALIFICATION INSTRUCTIONS**

***1.1 Introduction***

AIC Health Ministries invites interested suppliers and consultants to qualify in the supplier database by meeting the criteria below. This pre-qualification is for consideration in the supply of goods and services to the organization for three years. It’s important to note that the pre- qualification process does not guarantee business; instead, it establishes eligibility for prequalified companies and individuals to be called upon for quotations when the organization needs their services or good

***1.2 Pre-qualification Objective***

The main objective is to supply and deliver assorted items and also provide services under relevant tenders/quotations to AIC Health Ministries as and when required during the stated period.

***1.3 Invitation of Pre-qualification***

Suppliers registered with Registrar of Companies under the Laws of Kenya in respective merchandise or services are invited to submit their Pre-Qualification documents to The Executive Director –AIC Health Ministries so that they may be pre-qualified for submission of quotations. Bids will be submitted in complete lots singly. The prospective suppliers are required to supply mandatory information for pre- qualification.

***1.4 Experience***

Prospective suppliers and contractors must have carried out successful supply and delivery of similar items/services to Government/Corporation/ NGOs/ institutions of similar size and complexity. Potential suppliers/contractors must demonstrate the willingness and commitment to meet the pre-qualification criteria.

***1.5 Pre-qualification Document***

This document includes questionnaire forms and documents required of prospective suppliers. In order to be considered for pre-qualification, prospective suppliers must submit all the information herein requested and any bidder who does not meet all the relevant **mandatory requirements** will be disqualified

**N/B: All the documents should be bound and paginated.**

***1.6 Questions Arising from Documents***

Questions that may arise from the pre-qualification documents should be directed to the

Tender Committee though Email [inquiry@aichm.org](mailto:inquiry@aichm.org) not later than **28th March 2025:**

***1.7 Additional Information***

AIC Health Ministries reserves the right to request submission of additional information from prospective bidders.

**1.8 *Request for quotations***

Request for quotations will be made available only to those bidders whose qualifications are accepted by AIC Health Ministries at the disclosure of the tender committee after the completion of the pre – qualification process.

**2. BRIEF CONTRACT REGULATIONS/GUIDELINES**

**2.1 *Taxes on Imported Materials***

AIC Health Ministries is not exempted from any tax with exemptions on particular funded projects e.g. Global Fund etc.

**2.2 *Customs Clearance***

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

**2.3 *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 on the authority of the Executive Director or Tender Committee. Prices quoted should be inclusive of all delivery charges and valid for 90 days.

**2.4 *Payments***

All local purchase shall be on credit of a minimum of thirty (30) days or as may be stipulated in the Contract Agreement.

**2.4 *AIC Health Ministries Policies***

The bidder shall comply with the following Policies, which are available upon request or can be downloaded in AIC Health Ministries Website: <https://aichm.org/tender.php> : **AIC Health Ministries Code of ethics for procurement, AICHM supplier code of conduct and AICHM terms and conditions of purchase**

**3. PRE-QUALIFICATION DATA INSTRUCTIONS**

***3.1 Pre-Qualification Data Forms***

The attached questionnaire forms PQ-1, PQ-2, PQ-3, PQ-4, PQ-5, PQ-6, PQ-7, PQ-8, are to be completed by prospective suppliers/contractors who wish to be pre-qualified for submission of tender for the specific tender. Prospective suppliers/contractors are also expected to sign and stamp **AIC Health Forms available under downloads on AICHM website** [**https://aichm.org/tender.php**](https://aichm.org/tender.php) **. Incase of any challenges in accessing the forms kindly request the forms via email:** [**inquiry@aichm.org**](mailto:inquiry@aichm.org)

**3.1.1** The pre-qualified application forms which are not filled out completely 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 ink.

***3.2 Qualification***

**3.2.1** It is understood and agreed that the pre-qualification data on prospective bidders is to be used by AIC Health Ministries in determining, according to its sole judgment and discretion, the qualifications of prospective bidders to perform in respect to the Tender Category as described by the client.

**3.2.2** Prospective bidders will not be considered qualified unless in the judgment of AIC Health Ministries they possess capability, experience, qualified personnel available and suitability 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 (**a) **Experience:** Prospective bidders shall have at least 2 years’ experience in the supply of goods, services and allied items and in case of potential supplier/contractor they should show competence, willingness and capacity to service the contract.

(b) Prospective supplier requires special experience and capability to organize supply and delivery of items, or services at short notice.

**3.3.2 Personnel**

The names pertinent information and CV of the key personnel for individual or group to execute the contract must be indicated in form PQ-3.

**3.3.3 Financial Condition**

The Supplier’s financial condition will be determined by latest financial statement submitted with the prequalification documents as well as letters of reference from their bankers regarding suppliers/contractors credit position. Potential suppliers/contractors will be pre- qualified on the satisfactory information given.

**3.3.4** Special consideration will be given to the financial resources available as working capital, taking into account the amount of uncompleted orders on contract and now in progress. Data to be filled/ provided on Form PQ-4. However, potential bidders should provide evidence of financial capability to execute the contract.

**3.3.5 Past Performance**

Past performance will be given due consideration in pre-qualifying bidders. Letter of reference from past customers should be included in Form PQ-6 (at least from three organizations- attach copy of LPO/LSO/Contract)

***3.4 Statement***

Application must include a sworn statement Form PQ-8 by the Tenderer ensuring the accuracy of the information given.

***3.5 Withdrawal of Prequalification***

Should a condition arise between the time the firm is pre-qualified to bid and the bid opening date which could substantially change the performance and qualification of the bidder or the ability to perform such as but not limited to bankruptcy, change in ownership or new commitments, then AIC Health Ministries reserves the right to reject the tender from such a bidder even though they have been initially pre-qualified.

***3.6 Information on Suppliers***

The firm must have a fixed Business Premise and must be registered in Kenya, with certificate of Registration, Incorporation/Memorandum and Articles of Association, copies of which must be attached.

**3.6.1** The firm must show proof that it has paid all its statutory obligations and have current Tax Compliance Certificate or any other relevant certificate.

**3.6.2** The firm must declare any conflict of interest in relation to any member of staff. AIC Health Ministries will not procure goods or services from suppliers where the employees have not declared conflict of interest.

**3.6.3** AIC Health Ministries may carry out a due diligence exercise for the shortlisted prequalified suppliers.

**3.6.4** Any effort by the tenderer to influence AIC Health Ministries in the tender evaluation, tender comparison or contract award decisions may result in the rejection of the tenderers’ tender.

***3.7 Preliminary Evaluation***

There shall be two phases of carrying out the evaluation of pre-qualification applications:

a) Preliminary Evaluation; and

b) Technical Evaluation

**3.7.1 Preliminary Evaluation**

a) All the applications shall be sorted out according to the various categories and levels contained in the application for pre-qualification form.

b) Pre-screening shall be done for all the applications in each category to determine responsiveness by providing all the mandatory documents

c) Casual applicants shall be considered substantially non-responsive and shall be excluded from those considered for detailed evaluation

d) A list shall be compiled for those tenderers who pass the preliminary evaluation to be evaluated in detail.

**3.7.2 Technical Evaluation**

a) The evaluation committee shall undertake a thorough and objective analysis of the suppliers contained in the list;

b) A detailed assessment of each applicant will be made in the course of evaluating the application.

c) Details of the applicant’s organizational structure/people, financial capability, annual turnover for the last two years’/bank statements, experience in the relevant field, available resources and references will be assessed as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| ***3.8*** | ***Evaluation Criteria*** |  | |
|  | **Required Information** | **Form Type** | **Points Score** |
|  | 1. Registration Documentation | PQ-1 | 30 |
|  | 2. Pre-qualification Data | PQ-2 | 10 |
|  | 3. Supervisory Personnel | PQ-3 | 10 |
|  | 4. Financial Position | PQ-4 | 20 |
|  | 5. Confidential Report | PQ-5 | 15 |
|  | 6. Past Experience | PQ-6 | 15 |
|  |  |  |  |

**TOTAL** **100**

***A candidate must meet all requirements under mandatory evaluation to qualify for evaluation under technical/general requirements***

***Pass mark under Technical/general requirements is 70% and above. A candidate shall be considered pre-qualified if their total points is 70%***

**4. FORM PQ-1 REGISTRATION DOCUMENTATION**

**Mandatory Requirements:**

1. Copy of Certificate of Registration/Incorporation of Business Name.
2. Copy of PIN Certificate of firm/company/individual from Kenya Revenue Authority.
3. List of Directors, telephone, and their postal address (Attach CR12)
4. Proof of registration with National Council for Persons with Disability (NCPWD)
5. AGPO registration for Women and Youth.
6. Certified last 6months bank statement of account (sole traders/ partnership)/Audited bank accounts for the last 2years (ltd company).
7. Copy of Current/Valid Tax Compliance Certificate from Kenya Revenue Authority
8. Copy of valid Trade License/ Current business licenses from relevant authorities e.g. City council.
9. Copy of Registration certificate as a contractor by Professional bodies/Authorities. E.g., NCA, EPRA, WARMA and other relevant authorities for all civil/ works contractors
10. Copy of Letter of recommendation from 3 previous organizations served with similar works
11. Copy of Practicing Certificate for all professionals e.g. certificate of affiliated bodies/associations (Pharmacist license, legal, medical)
12. Copy of Memorandum of Understanding or Articles of Association
13. Transport Hire firms must attach evidence of having taken all the Insurance covers.
14. Where mandatory for service provision, each firm must attach evidence of registration with Professional bodies/Authorities e.g. IATA, Municipal / City Council Certificates of health for food stuffs handling,
15. Copy of quality assurance certificates if any e.g. ISO 9000/9001
16. Evidence of Physical Location of business premises
17. Signed and Stamped AIC Health Ministries Procurements documents found in below links:

* Supplier Code of Ethics: <https://aichm.org/assets/docs/AICHM_SupplierCodeOfEthics.pdf>
* Conflict of Interest: <https://aichm.org/assets/docs/AICHM_DeclarationOfNonConflictOfInterest.pdf>
* Declaration of Suppliers: <https://aichm.org/assets/docs/AICHM_DeclarationForAllSuppliers.pdf>
* PO terms and conditions: <https://aichm.org/assets/docs/AICHM_PurchaseOrderStandardTermsAndConditions_Revised.pdf>

**(Max 30 points)**

**5. FORM PQ-2: PRE-QUALIFICATION DATA**

**REGISTRATION OF SUPPLIERS APPLICATION FORM**

1/We ……………………………………………………………………………………………………………

…………………...............................................................(***Name of Company/Firm***)

hereby apply for registration as supplier(s)

of ……………………………………………………………………………………………………

…………………………………………………………………………………………………...

(Item Description)

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

Post Office Address

…………………………………………………………………………………………………… Town …………………………………………………………………………………………. Street …………………………………………………………………………………………. Name of building ……………………………………………………………………………. Room /Office No. ……………………………………………… Floor No. …………………. Telephone Nos. ………………………………………………………………………………. **Email address (MUST)………………………………………………………………………** Full Name of applicant ……………………………………………………………………… Other branches location ……………………………………………………………………. Organization & Business Information

Management Personnel ………………………………………………………………………. Chief Executive ……………………………………………………………………………… Secretary ……………………………………………………………………………………… General Manager ………………………………………………………………………………

Treasurer ……………………………………………………………………………………… Other………………………………………………………………………………………….

Partnership (if applicable)

Names of Partners

3. Business founded or incorporated …………………………………………………………….

4. Under present management since …………………………………………………………….

5. Net worth equivalent

KSH………………………………………………………………………………………….

6. Bank reference and address

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

………………………………………………………….…………………………………………………………

7. Bonding company reference address

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

……………………………………………………………………………………..……………………………...

8. Enclose copy of organization chart of the firm indicating the main fields of activities

…………………………………………………………………………………………………….

9. State any technological innovations or specific attributes which distinguish you from your competitors ….……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………...........

10. Indicate terms of trade/sale………………………………………………………………………………

**(10 Points)**

**PQ-3 SUPERVISORY PERSONNEL**

Name ………………………………………………………………………………

Age …………………………………………………………………………………

Academic Qualification ……………………………………………………………

Under graduate…………………………………………………………………….

Post graduate………………………………………………………………………

Diploma……………………………………………………………………………

High School……………………………………………………………………….

Professional Qualification …………………………………………………………

……………………………………………………………………………………..

(*Attach Certificates if any*)

Length of service with Contractor or Supplier position held

………………………………………………………………………………………

(*Attach copies of certificates of at least 2 key personnel in the organization*)- 5marks each

**(10 Points)**

**6. FORM PQ-4: FINANCIAL POSITION AND TERMS OF TRADE**

(1) Attach a copy of the most recent two years audited accounts (From 2021 and above) -

7 marks

(2) Attach letters of recommendation from the firm’s bankers- 7 marks

(3) State Credit period (minimum proposed is 30 days) – 6 marks

**(20 Points)**

**7. FORM PQ-5: CONFIDENTIAL BUSINESS QUESTIONNAIRE**

You are requested to give the particulars indicated in Part I 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

\*if Kenya Citizen, indicate under “Citizenship Details” whether by Birth, Naturalization or

Registration.

***Part I - General***

Business Name ………………………………………………………………………………… Location of business premises………………………………………………………….………… Plot No. …………………………………….……… Street/Road………………………….…. ….. Postal Address…………………………………………….…………. Tel. No………………...…... Email address (MUST)…………………………………………………………………………. Nature of business……………………………………………………………………………… Current Trade License. No………………………………….………Expiring date……….…….

Maximum value of business which you can handle at any one time: KSH………………………… Name of your bankers…………………………………………………Branch

Account No……………………………………. Branch………………………. Swift code……………………………………. Branch code…………………….

Bank Currency………………

***Part 2 (b) Partnership***

Given details of partners as follows:

***Name Nationality Citizenship Details***

***Shares***

**…………………………………………………………………………………………..**

**…………………………………………………………………………………………..**

**………………………………………………………………………………………….**

**………………………………………………………………………………………….**

***Part 2 (c) – Registered Company:***

Private or Public………………………………………………………………………. State the nominal and issued capital of company

Nominal KHz.………………………………. Issued KHz.………………………………….

Given details of all directors as follows: -

**Name Nationality Citizenship Details Shares**

1. ………………………………………………………………………………………

2. ………………………………………………………………………………………

3. ………………………………………………………………………………………

4. ………………………………………………………………………………………

**Date ………………………………. Signature of Candidate……………………………….**

**(15 Points)**

**8. FORM PQ-6: PAST EXPERIENCE**

**NAMES OF THE APPLICANTS CLIENTS IN THE LAST TWO YEARS NAMES OF OTHER CLIENTS AND VALUES OF CONTRACT/ORDERS**

1.

I) Name of Client (organization) ………………………………………………………

ii) Address of Client (organization) ……………………………………………………

iii) Name of Contact Person at the client (organization) ………………………………. iv) Telephone No. of Client …………………………………………………………….

v) Value of Contract ……………………………………………………………………

vi) Duration of Contract (date) …………………………………………………………. (Attach documental evidence of existence of contract)

2. Name of 2nd Client (organization)

I) Name of Client (organization) ………………………………………………………

ii) Address of Client (organization) ……………………………………………………

iii) Name of Contact Person at the client (organization) ………………………………. iv) Telephone No. of Client …………………………………………………………….

v) Value of Contract ……………………………………………………………………

vi) Duration of Contract (date) …………………………………………………………. (Attach documental evidence of existence of contract)

3. Name of 3rd. Client (organization)

I) Name of Client (organization) ………………………………………………………. ii) Address of Client (organization) …………………………………………………….

iii) Name of Contact Person at the client (organization) ………………………………. iv) Telephone No. of Client …………………………………………………………….

v) Value of Contract ……………………………………………………………………

vi) Duration of Contract (date) …………………………………………………………. (Attach documental evidence of existence of contract)

4. Others …………………………………………………………………………………………

**(10 Points)**

**Three (3) marks each and an additional point for one other**

**9. FORM PQ-7: LITIGATION HISTORY**

Name of Contract Supplier

Contractors/Suppliers should provide information on any history of litigation or arbitration resulting from contracts executed in the last five years or currently under execution.

|  |  |  |  |
| --- | --- | --- | --- |
| **YEAR** | **AWARD FOR OR AGAINST** | **NAME OF CLIENT CAUSE OF LITIGATION AND MATTER IN DISPUTE** | **DISPUTED AMOUNT (CURRENT VALUE, KSHS. EQUIVALENT** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**10. FORM PQ-8: SWORN STATEMENT**

Having studied the pre-qualification information for the above project we/I hereby state:

a. The information furnished in our application is accurate to the best of our knowledge.

b. That in case of being pre-qualified we acknowledge that this grants us the right to participate in due time in the submission of a tender or quotation on the basis of provisions in the tender or quotation documents to follow.

c. We enclose all the required documents and information required for the pre- qualification evaluation.

**Date: …………………………………………………………………...**

**Applicant’s Name: ……………………………………………………………... Represented by: ……………………………………………………………...**

**Signature: …………………………………………………………….**

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