

PREQUALIFICATION

FOR

YEAR 2023 AND 2024



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 2023 -2024

Tender Reference No: HSS/PREQ/23 - 24

Hazina Sacco Society Ltd invites applications from interested and eligible firms for pre-qualification for the supply of the under listed Goods, Services and Works for the **Year 2023/2024.** All the suppliers with whom we are currently engaged also need to re-apply.

| | Category Code | Item Description |
|----|--------------------|---|
| | | CATEGORY A: SUPPLY AND DELIVERY OF GOODS |
| A1 | HSS/PREQ/01/23-24 | Supply of general office stationery and other consumables. |
| A2 | HSS /PREQ/02/23-24 | Supply of computer software & licenses and hardware equipment. |
| A3 | HSS/PREQ/03/23-24 | Supply and repair of office furniture and fittings. |
| A4 | HSS/PREQ/04/23-24 | Provision of creative design services for promotional materials, calendars, financial reports, brochures, printing and embroidery of t-shirts, caps, staff uniform and related materials. |
| A5 | HSS/PREQ/05/23-24 | Supply and maintenance of fire equipment, generators and air conditioners. |
| | | CATEGORY B: PROVISION OF GENERAL SERVICES |
| B1 | HSS/PREQ/06/23-24 | Provision of office cleaning, sanitary, garbage collection, fumigation and pest control services. |
| B2 | HSS/PREQ/07/23-24 | Supply and maintenance of digital based IP telephone/phone, equipment and related spares/ accessories |
| В3 | HSS/PREQ/08/23-24 | Provision of outside catering and event management services. |
| B4 | HSS/PREQ/09/23-24 | Provision and maintenance of CCTV, alarm system, access control & biometric register, electrical installations and fire fighting equipments. |
| B5 | HSS/PREQ/10/23-24 | Repair & Maintenance of office equipment computers, copiers, printers, scanners and money counting machines. |
| В6 | HSS/PREQ/11/23-24 | Provision and maintenance of security services e.g guard services, alarm backup, electric fencing and CIT. |
| В7 | HSS/PREQ/12/23-24 | Provision of general insurance services. |
| B8 | HSS/PREQ/13/23-24 | Provision of medical insurance services. |

| B9 | HSS/PREQ/14/23-24 | Provision of auctioneer services. | |
|-----|-------------------|--|--|
| B10 | HSS/PREQ/15/23-24 | Provision of debt collection Services. | |
| B11 | HSS/PREQ/16/23-24 | Provision of legal services. | |
| B12 | HSS/PREQ/17/23-24 | Provision of external audit services. | |
| B13 | HSS/PREQ/18/23-24 | Provision of valuation services - motor vehicles, land & buildings. | |
| B14 | HSS/PREQ/19/23-24 | Provision of training services. | |
| | CATEGORY C: WORKS | | |
| C1 | HSS/PREQ/20/23-24 | General maintenance Contractors (painting, repairs, plumbing, building partitioning) | |

Interested suppliers may download forms from our website: www.hazinasacco.or.ke/downloads or collect them physically from our office during working hours. A non-refundable payment of Ksh. 1,000/= per category should be made through our PAYBILL: Business No. 850436, Account No. Your Company name 2023 attach mpesa reference number upon return of the form(s).

Duly completed documents to be put in plain sealed envelope marked with the category number "HSS/PREQ/...../23-24 and addressed to:

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

And should be deposited in the Sacco Tender box at the reception, Kibera Road off Ngong Road, Nairobi to be received on or before Friday 6th January, 2023 at 3:00 p.m.

The Sacco reserves the right to accept or reject any applications.

PRE-QUALIFICATION INSTRUCTIONS

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 **31**st **December 2024**.

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

PRE-QUALIFICATION CRITERIA

| | REQUIRED INFORMATION | FORM REF |
|---|--|----------|
| 1 | Prequalification documentation | PQ-1 |
| 2 | Pre-qualification data | PQ-2 |
| 3 | Financial position | PQ-3 |
| 4 | Past Experience- References | PQ-4A |
| 6 | Past Experience- Volume of business | PQ-4B |
| 6 | Human, Technical and Logistical Capacity | PQ-5 |
| 7 | Confidential report | PQ-6 |

FORM PQ-1

PRE-QUALIFICATION DOCUMENTS

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

| No. | Documentation | Applicable categories |
|-----|---|--|
| | A copy of the Deposit slip of Ksh 1,000. Quote the Mpesa reference no. for the payment done | All categories as indicated on the listing above |
| 1. | Duly filled in registration details of the company | All categories |
| 2. | Submission of copy of Company or Firm's Certificate of | All categories |
| | Incorporation/Registration | |
| 3. | Submission of copy of the Company's Current Valid Tax | All categories |
| | Compliance Certificate | |
| 4. | Submission of Copy of Valid PIN certificate | All categories |
| 5 | Submission of copy of the CR 12 as issued by the | All categories |
| | registrar of Companies on the Registrar's letterhead | |
| | giving the names and shareholding of the | |
| | directors/partners/sole proprietor. | |
| 6 | Submission of resumes/CVs of at least three (3) key staff | All categories |
| | that will be directly involved in the area of assignment, | |
| | detailing their skills and experience | |
| 7 | Submission of copies of at least 5 Recommendation | All categories |
| | letters from past and existing clients (2020 to date) | |
| 8 | Submission of copies of at least 5 recent/ existing | All categories |
| | evidence of recent/existing clients where supplier has | |
| | supplied similar goods/services (evidence of existence of | |
| | each contract)/LPOs/LSOs | |
| 9 | Copy of manufacturer's authorization letter | A2 |
| 10 | Copies of relevant certificates/licenses that mandate your | В9 |

| | organization to provide auctioneering services. | |
|----|---|---------|
| | Current practicing certificate issued by the Law Society of Kenya | B11 |
| | Copies of relevant certificates/licenses that mandate your organization to provide debt collection services from a recognized accreditation body or business permit | B10 |
| 13 | Association of Kenya insurers (AKI) as applicable to your organization. Current license by Insurance regulatory authority | B7 & B8 |
| 14 | Copy of certificate of registration with the Institute of Certified Public Accountants of Kenya (ICPAK) or The Institute of Internal Auditors (IIA) for the firm or partner | B12 |

NOTE: Expired Documents are deemed NOT-ATTACHED

FORM PQ 2 PRE-QUALIFICATION DATA

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: |
| Nature of Business: |
| Full name of applicant |
| Other business branches (if any) |
| other business brunenes (ii diry) |

| | Part 2 (a) - Sole Proprietors | | | | |
|---|---|-------------------------|-----------|--------|--|
| | Name: | | | | |
| | Age: | | | | |
| | Nationality: | | | | |
| | ID/Passport No: | | | | |
| Part 2 (b) - Partnership Give details of partners as follows: | | | | | |
| | | | | | |
| No | Name | Citizenship | Residence | Shares | |
| No | Name | Citizenship | Residence | Shares | |
| | Name | Citizenship | Residence | Shares | |
| 1 | Name | Citizenship | Residence | Shares | |
| 1 2 | Name | Citizenship | Residence | Shares | |
| 1 2 3 | Name | Citizenship | Residence | Shares | |
| 1 2 3 4 5 | Name 2 (c) - Registered Compa | | Residence | Shares | |
| 1 2 3 4 5 Part | | ny | | | |
| 1 2 3 4 5 Part | 2 (c) - Registered Compa | ny | | | |
| 1 2 3 4 5 Part Priva | 2 (c) - Registered Compa te or Public Company: | ny capital for the C | Company: | | |

Give details of all Directors as Follows:

| No | Name | Citizenship | Residence | Shares |
|----|------|-------------|-----------|--------|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |

| 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.

| 1 st 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) |
| 2 nd 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) |

| 5 Cheff (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 nd highest value contract |
| Name of client (organization) |
| Value of Contract |
| Name of 3 rd highest value contract |

| Name of client (organization) | | | |
|--|------------------|---------------------------|--|
| Value of Contract | | | |
| | | | |
| FORM PQ-5 | | | |
| HUMAN, TECHNICAL AND LOG | ISTICAL 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) | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Managerial and key Personnel Competency List the key managerial and technical staff of your organization (attach their CVs) | | | |
| Name of Key Staff | Position held | Position Held from (Date) | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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) one tim | What is the maximum value of business which you can handle at any |
| Kshs | |
| | |
| other co | State some of the factors that in your own opinion distinguish you from ompetitors. |
| | |
| | |
| | |
| | |
| (d) S | state whether or not you have experienced, in the area of non- |
| • | nance by your company, any problem(s) with any contract(s) awarded to any organization during the last 12 months and give a brief |
| explana | tion/description of the problem(s) and how you managed to solve it. |
| | |
| | |
| | |
| | |
| | |

| (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. | |
| | |
| | |
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| | |
| | |
| 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 |
| <u>DECLARATION</u> |
| 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 $% \left(1\right) =\left(1\right) \left(1\right)$ |
| best of our knowledge. |
| |
| Name |
| For and on behalf of |
| Position |
| Signature |
| Date |
| |
| Stamp |