



Supply Chain Documents

STIMA DT SACCO SOCIETY LIMITED

SUPPLIER REGISTRATION FORM

ST/REG/03/2023

REGISTRATION FOR PROVISION OF LAND SURVEY AND GIS SERVICES

Name of Supplier: _____
(Print in capital letters)

Business Address

Physical Address/Road	
P.O. Box/ Code	
City/County	
Country (<i>For international suppliers</i>)	

Specify areas of specialization

1	
2	
3.	

Statutory Details (*Please attach*)-Mandatory

Certificate of Registration/Incorporation	
CR12 certificate-Current. CR.13 for partnerships or National Identity card/Passport for sole proprietor.	
Valid VAT Compliance certificate	
Company Registered Office (details physical location office/lease)	
Business Permit-Current	
Certified Audited Books of Accounts (At least 3years) (2020, 2021 & 2022)	

Communication-Sales/Finance

Details	Sales contact 1	Sales Contact II-	Finance Contact
Name			
Mobile No.			
Company Tel. No.			
Email Address			

Banking Details: All Suppliers must open an account with Stima Sacco and provide account numbers immediately.

Terms of Payment (Please tick below)

(This is mandatory for prequalification)

30 Days	
45 Days	
Disclaimer	<i>This account is opened for preferential pricing only</i>
Note: The aging analysis is based on date of invoicing; and goods fully delivered	

EVALUATION CRITERION

1: Technical Qualification

Tenderers fully complying with mandatory requirements will be subjected to technical evaluation on capacity to deliver the contract based on the technical parameters given below:

	Evaluation Attribute	Weighting Score	Max Score
1.	Mandatory i. Certificate of Registration/Incorporation ii. KRA PIN Certificate iii. KRA Tax Compliance Certificate iv. CR-12 certificate v. Audited Books of Accounts (At least 3years) vi. Company Registered Office (details physical location office/lease) vii. Companies current address (<i>Telephone No. and Post office numbers</i>)	20	

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2.	Brief description of the organization profile (Directors' certificate for survey license by land surveyors board, company history, contacts details and services offered) (15 points)	15	
3.	Outline of five recent assignments. Include references of active/current sites, recommendations, and contact details of personnel to be contacted (3 points each)	15	
4.	Surveying Equipment - Proof of ownership/leasing Documents i. GPS (RTK) – 4 No. and precision) (2 points each) ii. Total Stations – 2No. (1 point each)	10	
5.	Personnel: 1. Lead Surveyor (10 points) i. Academic qualification Certificates-minimum bachelors of science degree in Surveying/Geomatics/Geospatial Engineering ii. At least 10 years' experience iii. ISK Full Membership (MISK) iv. Certificate for Survey License by Land Surveyors Board v. Annual Practicing License-2023 2. GIS Expert , 2 No. (5 points) i. Academic Qualification, Bachelors degree ii. Certificate in GIS iii. 3 years' experience 3. Support Staff. 5 No. (10 points) Degree/Diploma/Certificate Holders in Surveying/Cartography/GIS	25	
6.	Logistics -Motorvehicles + Ownership/Lease Documents	15	
	Total		100

Vendors will be required to score 70% and above on the above Technical Evaluation to be invited to tender to a maximum of fifteen (15) candidates ranked from the candidate with the highest technical score.



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SWORN STATEMENT

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

- The information furnished in our application is accurate to the best of our knowledge.
- That in case we are successful, 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.
- We will not engage in corrupt practices with Stima Sacco Members of Staff.
- We are not debarred from participating in Public Procurement proceedings by PPRA.
- When our legal, technical, or financial conditions or the contractual capacity of the firm changes, we volunteer to inform you of the status and acknowledge your right to review the registration made.
- We enclose all the required documents and information for the registration evaluation.

Applicant's Name

Represented by

Signature

Date

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

FORM PQ-5 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)

Applicant's Name

Signature and stamp

Date

CONFLICT OF INTEREST DECLARATION

A conflict of interest includes any activity or interest that could conflict with or appear to conflict with your responsibilities to **STIMA SACCO**. The company expects all suppliers to immediately disclose any situation in which they are, or may become involved, that could result in an actual or potential conflict of interest.

This policy applies to all suppliers. Canvassing for orders, corrupt & fraudulent deals will lead to immediate blacklisting from our supplier base.

If you have an activity, interest, investment, or relationship that should be brought to the attention of the management, please provide relevant information and attach to this form.

Do you or any of your relatives have an ownership interest in, or are any of your relatives employed by STIMA SACCO? Answer: (No) (Yes) if yes,

Name of Company	Address of Company	Your relationship to the person employed or having an interest	Position Held
		Spouse[] Sibling [] Other[]	

I/We do hereby confirm that the information given above is correct and undertake to inform you of any changes which take place. I/We accept to follow the stipulated conditions in your procurement orders.

Supplier Authorization (By senior management)

I declare that the above information is true and correct.

Name _____ Title _____

Signature _____ Date _____

CO. stamp



Supply Chain Documents

Official Use Only (STIMA SACCO)

Supply Chain Manager Comments & Approval:

Approval/ Rejection Remarks.....	
.....	
Signature:	Date:

CEO or His/ Her Designate:

Approval/ Rejection Remarks.....	
.....	
Signature:	Date: