

Telephone: + 265 01 880 862
Facsimile: + 265 01 880 862
: + 265 01 876 928

All Communications should be addressed to:
The Hospital Director



In reply please quote No.

31/QECH/S/25/10/24-202
Ministry of Health,
Queen Elizabeth Central Hospital
P.O. Box 95,
BLANTYRE
MALAWI.

To:
.....
.....
.....

Date: **25th OCTOBER, 2024.**

The Procuring Entity named above invites you to submit your quotation for carrying out the whole of the services as described herein. Any resulting order shall be subject to the Government of Malawi General Conditions of Contract for Local Purchase Orders (available on request) except where modified by this Request for Quotations.

SECTION A: QUOTATION REQUIREMENTS

1) Description of Services and Location

PROVISION OF MAINTENANCE SERVICE TO BIOCHEMISTRY EQUIPMENT (MINDRAY BS 430).

- 2) Services are to commence by **3 days** from the date of order.
 - 3) Services are to be completed by **7 days** from the date of order.
 - 4) Quotations must be valid for **30 days** from the date for receipt given below.
 - 5) Quotations and supporting documents as specified in Section B must be marked with the Procurement Number given above and indicate acceptance of the stated terms and conditions.
- 1) Quotations must be received, in sealed envelopes no later than: **15:00 Hrs. on 31TH OCTOBER, 2024.**
- 6) Quotations must be returned to: **The Internal Procurement Committee, Queen Elizabeth Central Hospital, P.O. Box 95, Blantyre. Att: The Procurement Officer, Tel; 01 880 882;**
 - 7) The attached Schedule of Rates and Prices at Section C together with any Terms of Reference or other documentation mentioned in Section C and appended, detail the services to be performed. You are requested to quote by completing Sections B and C. Quotations shall cover all costs of labour, materials, equipment, overheads, profits and all associated costs for performing the services including all taxes and duties. The total cost of performing the services shall be included in the items stated and the cost of any incidental services or materials shall be deemed to be included in the prices quoted.
 - 8) Quotations that are responsive, qualified and technically compliant will be ranked according to price. Award of contract will be made to the lowest priced quotation by the issue of a Local Purchase Order.

Signed: Name **McGeoffrey Kaunda**

Title/Position **Procurement Officer**
For and on behalf of the Purchaser

Your quotation is to be returned on this Form by completing and returning Sections B and C including any other information/certification required within this RFQ.

Telephone: + 265 01 880 862
Facsimile: + 265 01 880 862
: + 265 01 876 928

All Communications should be addressed to:
The Hospital Director



In reply please quote No.

31/QECH/S/25/10/24-202
Ministry of Health,
Queen Elizabeth Central Hospital
P.O. Box 95,
BLANTYRE
MALAWI.

SECTION B: QUOTATION SUBMISSION SHEET

- 1) Currency of Quotation: Malawi Kwacha
- 2) Services will commence withindays/weeks/months from date of Purchase Order.
- 3) Services to be completed bydays/weeks/months from date of Purchase Order
- 4) Validity period of this quotation isdays from the date for receipt of Quotations.
- 5) We enclose the following documents:
 - (i) Section C of the Request for Quotations completed and signed;
 - (ii) A copy of our Trading Licence
 - (iii) A copy of our Annual Tax Clearance Certificate (for the last financial year)
 - (iv) A list of recent Government contracts performed at **two**
 - (v) A copy of PPDA Certificate of registration
 - (vi) A copy of VAT certificate if you are allowed to deduct VAT.
 - (vii) A copy of Tax Exemption Certificate of certified and valid
 - (viii) A copy dealership from the manufacturer of the machine
- 6) We confirm that our quotation is subject to the terms and conditions stated in your Request for Quotations referenced above, and that any resulting contract will be subject to the Government of Malawi General Conditions of Contract for Local Purchase Orders.
- 7) We confirm that the prices quoted are fixed and firm for the duration of the validity period and will not be subject to revision or variation.

Authorised By:

Signature: _____ Name: _____

Position: _____ Date: _____

(DD/MM/YY)

Authorised for and on behalf of:

Company: _____

Registered Address:

.....
.....
.....

If any additional documentation is attached to your quotation, a signature and authorisation at Section B and Section C is still required as confirmation that the terms and conditions of this RFQ prevail over any attachments. If the Quotation is not authorised in Section B and Section C, the quotation may be rejected.

Telephone: + 265 01 880 862
Facsimile: + 265 01 880 862
: + 265 01 876 928

All Communications should be addressed to:
The Hospital Director



In reply please quote No.

31/QECH/S/25/10/24-202
Ministry of Health,
Queen Elizabeth Central Hospital
P.O. Box 95,
BLANTYRE
MALAWI.

SECTION C: SCHEDULE OF REQUIREMENTS (TO BE PRICED BY BIDDER)

Item No.	Description of Services (Append detailed specifications, requirements, explanations and/or Terms of Reference as necessary)	Unit of Measure	Qty	Unit Price	Total Price Kwacha
1	Provision of maintenance service to biochemistry equipment (mindray bs 430).	Each	01		
SUB TOTALS					
VAT 16.5%					
TOTALS					
PPDA LEVY (1%)					

The following attachments are appended to clarify the Description of Services:
[List each attachment e.g. detailed schedule of services, or terms of reference]

Authorised By:

Signature: _____

Name: _____

Position: _____

Date: _____

(DD/MM/YY)

Authorised for and on behalf of:

Company: _____