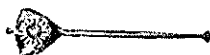


Bidding Document for Request for Quotation for Non-Consultancy Services



PARLIAMENT OF MALAWI



Parliament Building, Presidential Way, Private Bag B362, Capital City, Lilongwe 3.

Telephone: 01 773566/773208/773790

Fax: 01 774196

E-mail: parliament@parliament.gov.mw

REQUEST FOR QUOTATIONS

PROCUREMENT REF NO: POM/RFQ/PDU/2/S/MV/2026-27/040

To:
.....

Date: 23rd July, 2026

The Procuring and Disposing 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 except where modified by this Request for Quotations.

SECTION A: QUOTATION REQUIREMENTS

1. Description of Services and Location: Provision of Motor Vehicle services
2. Services are to commence within: 14 days from the date of order.
3. Services are to be completed within: 4 days from the date of commencement.
4. Quotations must be valid for: 45 days from the deadline of submission.
5. Quotations and supporting documents as specified in Section B must be marked with the Procurement Reference Number given above and indicate acceptance of the stated terms and conditions.
6. Quotations must be received, in sealed envelopes no later than: 29th July, 2026, Time: 12:00 hours.

Quotations must be returned to the Chairperson of the IPDC: The Chairperson, Internal Procurement and Disposal Committee, National Assembly, Parliament Building, Private Bag B362, Lilongwe 3.
Attention: The Acting Chief Procurement Officer

Bidding Document for Request for Quotation for Non-Consultancy Services

7. The attached Schedule of Rates and Prices in 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 C and D. Quotations shall cover all costs of labour, materials, equipment, overheads, profits and all associated costs for performing the services including all taxes, levies 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.

Bidding Document for Request for Quotation for Non-Consultancy Services
Your quotation is to be returned on this Form by completing and returning Sections C and D including any other information and certification as stated within this RFQ.

SECTION B: QUOTATION SUBMISSION SHEET

1. Currency of Quotation:
2. Services will commence within [insert number] [days/weeks/months] from date of Purchase Order.
3. Services to be completed within [insert number] [days/weeks/months] from date of commencement.
4. Validity period of this quotation is [insert number] [days/weeks/weeks] from the deadline for submission.
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
 - (v) There are times when bidders are not paid in time. As such invoices may be due for 60 days from date of issue of the invoice. Attach a copy of 60 days compliance.
 - (vi) *Note: You are required to attend pre-bid meeting on 27th July, 2026, at 10:00am. this will form part of evaluation.*
 - (vii) **Minimum Qualification and Technical Requirements**

Bidders shall provide the following information and supporting documentation as part of their submission:

- i. **Garage Facilities**
 - a. *Indicate the physical location of the garage/workshop.*
 - b. *Demonstrate that the garage is adequately equipped with the necessary tools, machinery, diagnostic equipment, and other facilities required to undertake the maintenance and repair services.*
- ii. **Security of the Garage**
 - a. *Provide details of the security arrangements at the garage,*
- iii. **Previous Experience**
 - a. *Submit evidence of at least three (3) contracts of a similar nature successfully completed within the last five (5) years. The evidence should include copies of contract award letters, Local Purchase Orders (LPOs), contracts, completion certificates,*
- iv. **Key Personnel**
 - a. *Provide the qualifications, professional certifications, and curriculum vitae (CV) of the Head Mechanical Supervisor or Workshop Manager who will oversee the execution of the contract.*

Bidding Document for Request for Quotation for Non-Consultancy Services

- b. The supervisor should possess relevant qualifications in Automotive or Mechanical Engineering (or an equivalent field) and demonstrate adequate experience in managing vehicle maintenance and repair services.*
- v. **Workshop Capacity**
 - a. Indicate the number of service bays, lifting equipment, and the average number of vehicles that can be serviced simultaneously.*
- vi. **Availability of Spare Parts**
 - a. Demonstrate the capacity to source and supply genuine or manufacturer-approved spare parts within reasonable lead times.*
- vii. **Equipment Inventory**
 - a. Provide an inventory of major workshop equipment, including diagnostic scanners, vehicle lifts, compressors, wheel alignment machines, welding equipment, and any other specialized tools relevant to the assignment.*
- viii. **Business Registration and Compliance**
 - a. Submit copies of a valid Business Registration Certificate, Tax Clearance Certificate, and any other statutory licences or permits required to operate a motor vehicle repair workshop.*

- 6. We offer to supply in conformity with the Request for Quotations Documents and in accordance with the delivery schedule required in Section D: Schedule of Requirements.
- 7. We have examined and have no reservations to the Request for Quotations Document, including Addenda No: (Insert Number and date) of Addenda.
- 8. Our price shall be fixed for the duration of the validity period.
- 9. We declare that our firm, Directors and Beneficial owners do not engage in corrupt, fraudulent and/or uncompetitive practices whenever participating in procurement proceedings.

AUTHORISED BY: [to be completed by someone who has the power of attorney for the Bidder]

Signature _____ Name: _____
:

Position: _____ Date: _____
(DD/MM/YY)

Authorised for and on behalf of (Company name):

Company _____
:

Registered Address:

Bidding Document for Request for Quotation for Non-Consultancy Services

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

Bidding Document for Request for Quotation for Non-Consultancy Services

SECTION C: SCHEDULE OF RATES AND PRICES (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	Quantity	Unit Price Kwacha	
1	Maintenance of various Motor vehicles <i>Note: I have attached assessment report of each motor vehicle. Quote each motor vehicle based on assessment report.</i>	AU	9		
Sub-Total					
VAT					
PPDA Levy (1%)					
Total Bid Price					

Note: You will be required to attend Pre-Bid Meeting Monday, 27th July, 2026, 10:00am at Parliament Building. This will form part of evaluation

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: _____

Authorised for and on behalf of: _____ (DD/MM/YY)

Company: _____
Official Date Stamp: _____

Bidding Document for Request for Quotation for Non-Consultancy Services

SECTION D: Beneficial Ownership Disclosure

T1B Beneficial Ownership Disclosure Form

INSTRUCTIONS TO BIDDERS: DELETE THIS BOX ONCE YOU HAVE COMPLETED THE FORM

This Beneficial Ownership Disclosure Form ("Form") is to be completed by the Bidder. In case of joint venture, the Bidder must submit a separate Form for each member. The beneficial ownership information to be submitted in this Form shall be current as of the date of its submission.

For the purposes of this Form, a Beneficial Owner of a Bidder is any natural person who ultimately owns or controls the Bidder by meeting one or more of the following conditions:

1. directly or indirectly holding 5% or more of the shares
2. directly or indirectly holding 5% or more of the voting rights
3. directly or indirectly having the right to appoint a majority of the board of directors or equivalent governing body of the Bidder.
4. directly or indirectly, has a substantial economic interest in or receives substantial economic benefit from, a company, whether acting alone or together with other persons;
5. has a significant stake in a company and on whose behalf activity of a company is conducted; or
6. exercises significant control or influence over a person through a formal or informal agreement, and where such ownership, control or interest is through a trust, the trustee (s), beneficiaries, or anyone who controls the trust.

Date: [insert date] Procurement Reference No.: [insert procurement reference number] Page [insert page number] of [insert total number of pages] pages

To: [insert complete name of Procuring and Disposing Entity]

In response to your request in the Letter of Acceptance dated [insert date of letter of Acceptance] to furnish additional information on beneficial ownership: [select one option as applicable and delete the options that are not applicable]

(i) we hereby provide the following beneficial ownership information.

Details of beneficial ownership

Bidding Document for Request for Quotation for Non-Consultancy Services

Identity of Beneficial Owner	Directly or indirectly holding 5% or more of the shares (Yes / No)	Directly or indirectly holding 5 % or more of the Voting Rights (Yes / No)	Directly or indirectly having the right to appoint a majority of the board of the directors or an equivalent governing body of the Bidder (Yes / No)
[include full name (last, middle, first), nationality, country of residence]			

OR

(ii) We declare that there is no Beneficial Owner meeting one or more of the following conditions:

- directly or indirectly holding 5% or more of the shares
- directly or indirectly holding 5% or more of the voting rights
- directly or indirectly having the right to appoint a majority of the board of directors or equivalent governing body of the Bidder.
- directly or indirectly, has a substantial economic interest in or receives substantial economic benefit from, a company, whether acting alone or together with other persons;
- has a significant stake in a company and on whose behalf activity of a company is conducted; or
- exercises significant control or influence over a person through a formal or informal agreement, and where such ownership, control or interest is through a trust, the trustee (s), beneficiaries, or anyone who controls the trust.

OR

(iii) We declare that we are unable to identify any Beneficial Owner meeting one or more of the following conditions. [If this option is selected, the Bidder shall provide explanation on why it is unable to identify any Beneficial Owner]

Bidding Document for Request for Quotation for Non-Consultancy Services

- directly or indirectly holding 5% or more of the shares
- directly or indirectly holding 5% or more of the voting rights
- directly or indirectly having the right to appoint a majority of the board of directors or equivalent governing body of the Bidder]"
- directly or indirectly, has a substantial economic interest in or receives substantial economic benefit from, a company, whether acting alone or together with other persons;
- has a significant stake in a company and on whose behalf activity of a company is conducted; or
- exercises significant control or influence over a person through a formal or informal agreement, and where such ownership, control or interest is through a trust, the trustee (s), beneficiaries, or anyone who controls the trust.

Name of the Bidder: [insert complete name of the Bidder]¹

Name of the person duly authorized to sign the Bid on behalf of the Bidder: [insert complete name of person duly authorized to sign the Bid]²

Title of the person signing the Bid: [insert complete title of the person signing the Bid]

Signature of the person named above: _____

Date signed [insert ordinal number] day of [insert month], [insert year]

¹ In the case of the Bid submitted by a Joint Venture specify the name of the Joint Venture as Bidder. In the event that the Bidder is a joint venture, each reference to "Bidder" in the Beneficial Ownership Disclosure Form (including this Introduction thereto) shall be read to refer to the joint venture member.

² Person signing the Bid shall have the power of attorney given by the Bidder. The power of attorney shall be attached with the Bid Schedules.

Bidding Document for Request for Quotation for Non-Consultancy Services
SECTION E: EVALUATION OF QUOTATIONS

1. Quotations that are responsive, qualified and technically compliant will be ranked according to price.
2. Award of contract will be made to the lowest evaluated quotation by the issue of a Local Purchase Order.

Signed:

Name.....

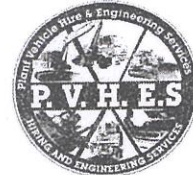
Title/Position:

.....
.....

For and on behalf of the Procuring and Disposing Entity



TECHNICAL INSPECTION REPORT-TD/01



Gn # 437 4129
MVR # 010 3716

0007373

MVRS No.

Station: 11 Date: 10-07-26

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA: PARLIAMEN
Reg. No: NLT 329AP Type: IDYDTA Model: BASTON
VIN No: JTB728906403619 Engine No: 1112
KM/HRS: 130149 Fuel Type: DIESEL

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1. ENGINE DUE FOR SERVICE
2. WORN OUT CLUTCH KUP
3. WORN OUT BRAKE PADS
4. WORN OUT SUSPENSION ARM BUSHES
5. RUSTY HAND BRAKE
6. WORN OUT AIR CO FILTER
7. REPAIRED BOTH REAR AND FRONT SHOCKS
- 8.

PVHES INSPECTOR W. M. K. P. Signature: [Signature]
PVHES SUPERVISOR: L. CAMOU Signature: [Signature]

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

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

Name: Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

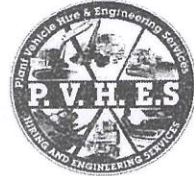
COMMENTS:

PVHES INSPECTOR Signature:

PVHES SUPERVISOR Signature:



TECHNICAL INSPECTION REPORT-TD/01



GR # 4374129
1000 # 0103716

MVRS No.

0007374

Station:

LL

Date:

10-07-26

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA:

PARLIAMENT

Reg. No:

MT 385 AP

Type:

TOYOTA

Model:

COROLLA

VIN No:

AHTBFWJED00017494

Engine No:

22R

KM/HRS:

94 084

Fuel Type:

PETROL

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1. ENGINE OIL FOR SERVICE
2. WORN OUT AIR CON FILTER
3. WORN OUT WIPER BLADES
4. WORN OUT AIR CON FILTER
- 5.
- 6.
- 7.
- 8.

PVHES INSPECTOR

W. MATUPI

Signature:

PVHES SUPERVISOR

L. KAMOTO

Signature:



C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

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

Name

Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

COMMENTS:

PVHES INSPECTOR

Signature:

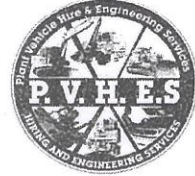
PVHES SUPERVISOR

Signature:



Gn # 437 4129
 Inv # 010 3716

TECHNICAL INSPECTION REPORT-TD/01



MVRS No.

0007375

Station:

11

Date:

10-07-26

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA:

PARLIAMENT

Reg. No:

MG 308AP

Type:

TOYOTA

Model:

Corolla

VIN No.:

AHTBFWJE801015397

Engine No:

27R

KM/HRS:

64060

Fuel Type:

PETROL

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1. Engine over for service
2. Worn out front shock absorbers
3. Worn out front brake pads
4. Worn out rear brake pads
5. Worn out Air Cond filter

PVHES INSPECTOR

W. M. M. M. P. 1
L. CAMOTO

Signature:

[Signature]

PVHES SUPERVISOR:

Signature:

[Signature]

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

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

Name

Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

COMMENTS:

PVHES INSPECTOR

Signature:

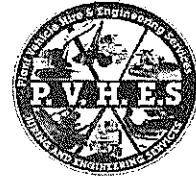
PVHES SUPERVISOR:

Signature:



Cor # 4374129
1004 # 010376

TECHNICAL INSPECTION REPORT-TD/01



MVRS No. 0007376

Station: LL Date: 10-07-26

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA: PARLIAMENT
Reg. No: MK-307 AP Type: TOYOTA Model: Corolla
VIN No: AAIBFWJEG61015247 Engine No: 22R
KM/HRS: 75958 Fuel Type: PETROL

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1. ENGINE BUS FOR SERVICE
2. WORN BUT AIR COND FILTER
3. BATTERY CHARGING SYSTEM
- 4.
- 5.
- 6.
- 7.
- 8.

PVHES INSPECTOR W. MATHEI

Signature: [Signature]

PVHES SUPERVISOR: I. KAMOTO

Signature: [Signature]

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

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

Name: Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE:

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

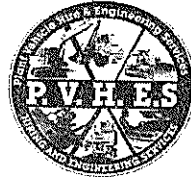
COMMENTS:

PVHES INSPECTOR: Signature:

PVHES SUPERVISOR: Signature:



NR # 4374129
INV # 0103716



TECHNICAL INSPECTION REPORT-TD/01

MW PARLIAMENT

MVRS No. 0006548

Station: LILONGWE

Date: 18/06/2026

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA: MW PARLIAMENT

Reg. No: PAR 41 Type: MITSUBISHI

Model: ROSA

VIN No.:

Engine No: 4432

KM/HRS: 205428

Fuel Type:

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

GREASE PROP. SHAFT AND KINK PINS

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1. ENGINE DUE FOR SERVICE
2. FAULTY RHS PARKING LIGHT FRONT
3. FAULTY RHS BRAKE LIGHT
4. FAULTY RHS INDICATOR
5. W/OUT WIPER BLADES
6. W/OUT REAR SPRING BUSHES END TO END
7. W/OUT BRAKE CALIPER BUSHES AND CALIPERS
8. W/OUT STABILIZER BAR BUSHES

PVHES INSPECTOR

B. MWAUSA

Signature:

PVHES SUPERVISOR:

J. NYONDO

Signature:

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

1. ATT TO EXHAUST BRAKE SYSTEM
2. TRIM SEATS
- 3.
- 4.
- 5.

Name

Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

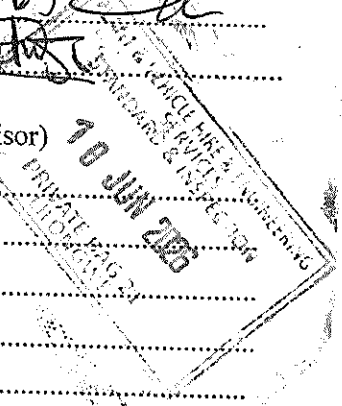
COMMENTS:

PVHES INSPECTOR

Signature:

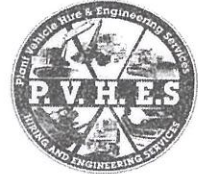
PVHES SUPERVISOR:

Signature:





TECHNICAL INSPECTION REPORT-TD/01



GR # 437 4129

Inv # D103716

MG 512 AN

MVRS No.

0005379

1 L

Station:

Date: 24-04-26

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA: PARLIAMENT
Reg. No: MG 512 AN Type: NISSAN Model: URVAN NV350
VIN No: JN1UCHE26Z0D25892 Engine No: 71525
KM/HRS: 184519 Fuel Type: DIESEL

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1. ENGINE DUE FOR SERVICE
2. Worn out fan belt
3. Worn out Shock Absorbers x 4
4. Worn out BRAKE PADS & BRAKE LINERS
5. Worn out LEAF SPRINGS BUSHES
6. Worn out SUSPENSION ARM BALL JOINTS
7. Worn out STABILIZER LINKS & BALL BUSHES
8. Worn out TIE ROD ENDS & RACK ENDS

PVHES INSPECTOR: W. MATHUPI

Signature: [Signature]

PVHES SUPERVISOR: L. CAMOTE

Signature: [Signature]

WHEEL ALIGNMENT

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

1.
2.
3.
4.
5.

Name: Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE:

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

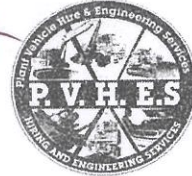
COMMENTS:

PVHES INSPECTOR: Signature:

PVHES SUPERVISOR: Signature:



TECHNICAL INSPECTION REPORT-TD/01



Invoice no: 437 4019

Ga no: D106387

MVRS No.

0006065

Station:

Lilongwe

Date:

26-03-25

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA:

PARLIAMENT

Reg. No:

MG 948 AM

Type:

NISSAN

Model:

HARD BODY

VIN No:

ADNCP4D22Z0083326

Engine No:

XD 2S

KM/HRS:

Fuel Type:

Diesel

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

MISSING LHS FENDER INDICATOR

DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

- ENGINE DUE FOR SERVICE
- WORN OUT: WIPER BLADES, SUSPENSION ARM BUSHES
- FRONT SPRING BUSHES, LOWER PADS, BRAKE
- LINERS, SHOCK ABSORBERS & C, TIE-ROD ENDS,
- RAIL ENDS, SUSPENSION ARM BALL JOINTS
- INNER ARM BUSHES, FAN BELTS
- TRIM SEATS, LOOSE DOOR STOPS, DIFFERENTIAL
- LEAKAGE, DIFFERENTIAL NOISE

PVHES INSPECTOR

W. MATUPU

Signature:

PVHES SUPERVISOR:

BAW

Signature:

PRIVATE BAG 21

BROKEN (MUSKETEER) LHS REAR WHEEL ARC (MUD ARRESTOR)

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

-
-
-
-
-

Name

Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

COMMENTS:

PVHES INSPECTOR

Signature:

PVHES SUPERVISOR:

Signature:



TECHNICAL INSPECTION REPORT-TD/01



Gr # 437 4019
Inv # 010 6337

MVRS No.

0006066

Station:

Lilabur WE

Date:

26-03-26

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA:

PARLIAMENT

Reg. No:

MG 949 AM

Type:

NISSAN

Model:

HARD BODY

VIN No:

ADNCP4D22Z0083321

Engine No:

TD 25

KM/HRS:

Fuel Type:

DIESEL

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1.

MISSING REAR BUMPER PLASTIC COVER, ENGINE DUE FOR SERVICE

2.

WORN D/I BRAKE PADS BRAKE LINDERS

3.

SHOCK ABSORBERS X4 LOWER BLADES

4.

CLUTCH KIT, SUSPENSION ARM BUSHES

5.

SUSPENSION ARM BALL JOINTS, LEAF

6.

SPRING BUSHES, LOWER ARM BUSHES

7.

LOOSE SIDE FOOT STEPS X2, LEAKING REAR

8.

DIFFERENTIAL, IRON SEALS

PVHES INSPECTOR

W. MATHEW

Signature:

[Signature]

PVHES SUPERVISOR:

GAU

Signature:

[Signature]

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

1.

2.

3.

4.

5.

Name

Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

COMMENTS:

PVHES INSPECTOR

Signature:

PVHES SUPERVISOR:

Signature:

Gen# ~~347~~ ~~1100~~ 69

Lic# 0106337

TECHNICAL INSPECTION REPORT-TD/01

Gen# 4374019



MVRS No.

0006067

Station:

LILONGWE

Date:

26-03-26

A. MOTOR VEHICLE/PLANT/MOTOR CYCLE DETAILS

MDA:

PARLIAMENT

Reg. No:

MR 958AM

Type:

NISSAN

Model:

HARD BODY

VIN No.:

ADNCPWD 2220078684

Engine No:

7D 25

KM/HRS:

169 298

Fuel Type:

DIESEL

We have carried out the inspection of motor vehicle/motor cycles, plant and request you to do the following repairs/service works.

B. DEFECTS/DIAGNOSIS (To be filled by the PVHES Inspector)

1.

ENGINE OIL FOR SERVICES

2.

BROKEN RHS TORSIONAL BAR

3.

WORN TWIN FAIR BOLTS, CLUTCH SLAVE

4.

CYLINDER, PORTAGE PADS, PORTAGE LINDERS

5.

LEAFSPRING BUSHES, INNER ARM BUSHES

6.

SHOCK ABSORBERS & SUSPENSION ARM BUSHES

7.

SUSPENSION ARM BALL JOINTS

8.

BROKEN TAIL GATE LOCK

PVHES INSPECTOR

W. MATHIPI

Signature:

[Signature]

PVHES SUPERVISOR:

PRIN SEATS

Signature:

[Signature]

C. WORK DONE (To be filled by the Garage/Dealer Workshop Manager/Supervisor)

1.

2.

3.

4.

5.

Name

Signature:

GARAGE/DEALER/WORKSHOP MANAGER/SUPERVISOR

NAME OF THE GARAGE

D. CERTIFICATION OF WORK DONE (To be filled by the PVHES Vehicle Inspector after inspecting the vehicle/plant/motorcycle when repairs/service work is done)

COMMENTS:

PVHES INSPECTOR

Signature:

PVHES SUPERVISOR:

Signature: