

Telephone: +265 111 624 344

Email: zombamental@gmail.com

Communications should be addressed to:



Zomba Mental Hospital

P.O. Box 38

Zomba

Malawi.

REQUEST FOR QUOTATIONS (FOR SERVICES)

Procurement Number: ZMH/RFQ/DRUGS/24/06

Date: 21ST JUNE, 2024

To

.....

The Procuring Entity named above invites you to submit your quotation for described herein. Partial Quotations may be rejected, and the Purchaser reserves the right to award a contract for selected items only. 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. **20% of Margin of preference will be given to indigenous black Malawians. And Provide Coloured Identity Photo**

SECTION A: QUOTATION REQUIREMENTS:

- 1) **Description of Goods:** Procurement of Drugs for the month of June
- 2) Quotation prices should be based on: **Malawi Kwacha**
For goods supplied from within Malawi: **DDP/ DAP (Delivery at Place) - Insured and delivered at Zomba Mental Hospital**
- 3) The Delivery period required is **7** days from date of order.
- 4) Quotations must be valid for **30 days** from the date for receipt given below.
- 5) The warranty/guarantee offered shall be:
- 6) Quotations and supporting documents as specified in Section B must be marked with the Procurement Number given above, and indicate your acceptance of the terms and conditions.
- 7) Quotations must be received, in sealed envelopes, no later than: **Wednesday, 26th June, 2024 at 2:00 Pm and deposited in the Tender Box in the Procurement and Disposal Unit, Zomba Mental Hospital.**
- 8) Quotations must be returned to: **The Chairman, Internal Procurement and Disposal Committee, Zomba Mental Hospital, P.O. Box 38, ZOMBA**

The attached Schedule of Requirements at Section C, details the items to be purchased. You are requested to quote your delivered price for these items by completing and returning Sections B and C.

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 item** through the issue of a Local Purchase Order.

Signed:

Date: 21st June, 2024

Name: **Ishmael Jangia** Title/Position: Procurement and Disposal Officer. (0996 314 629)

For and on behalf of the Purchaser

Zomba Mental Hospital

Procurement Number: ZMH/RFQ/DRUGS/24/06

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.

SECTION B: QUOTATION SUBMISSION SHEET

- 1) Currency of Quotation: Malawi Kwacha
- 2) Service period offered: days/weeks/months from date of Purchase Order.
- 3) The validity period of this Quotation is: days from the date for receipt of Quotations.
- 4) Warranty period (where applicable):.....months.
- 5) We attach 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 three similar Government contracts performed for the past three years.
 - v. A copy of a Coloured Identity Photo
 - vi. A valid Copy of PMRA Certificate
 - vii. A copy of PPDA Certificate
 - viii. A Copy of VAT certificate if applicable
 - ix. A copy of Company registration certificate
- 6) We confirm that our quotation is based on 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: _____

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.

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Procurement Number: ZMH/RFQ/DRUGS/24/06

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

Item No.	Description of goods (Attach detailed specifications if required)	Unit of measure	Qty.	Unit Price	Total Price Kwacha
1.	Amitriptyline 25mb	100	100		
2.	Clozapine 100mg	100	100		
3.	Clopixol decanoate 50mg/ml	Each	1500		
4.	Haloperidol decanoate 50mg/ml	Each	1500		
5.	EEG Electrode pads	Each	1000		
6.	Promethazine 25mg	1000	50		
7.	Carbamazepine 200mg	1000	200		
8.	Chlorpromazine 100mg	1000	100		
9.	Olanzapine 10mg	100	1000		
10	Risperidone 2mg	100	1000		
11	Clopixol Acuphase 50mg/ml	Each	1000		
12	Fluphenazine 25mg/ml	Each	2000		
13	Sodium Valproate 200mg	100	2000		
14	Lolazepam	100	300		
				SUB TOTAL	
				16.5% VAT	
				GRAND TOTAL	

Authorised By:

Signature: _____

Name: _____

Position: _____

Date: _____

(DD/MM/YY)

Authorised for and on behalf of:

Company: _____