

[OFFICE OF THE OMBUDSMAN]

[Private Bag 348, LILONGWE]

REQUEST FOR QUOTATIONS (FOR SERVICES)

PROCUREMENT NUMBER: OMB/S/M/P/25/5/HQ

To: **SUPPLIERS** 16th May 2025

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
 - -Repairing the Gazebo -1
 - -Repairing the Banner -1
- 2) Services are to commence by: **DAY** .[days/weeks/months] from the date of order.
- 3) Services are to be completed by: ... DAY. [days/weeks/months] from the date of order.
- 4) Quotations must be valid for [30Days] 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.
- 6) NOTE: SUPPLIERS ARE ADVISED TO COME AND INSPECT THE PRINTER AND SCANNERS.
- 7) Quotations must be received, in **SEALED ENVELOPES** no later than: [10:00AM] on [26/05/2025]. AT THE RECEPTION IN A TENDER BOX
- 8) Quotations must be returned to: [OFFICE OF THE OMBUDSMAN, P/BAG 348 LILONGWE ST MARTINS HOUSE,3RD Floor, CITY CENTRE]

For attention: **Procurement Officer**

- 9) ATTACH VALID CERTIFICATE: VAT; PPDA; COMPANY REGISTRATION AND TAX CLEARANCE CERTIFICATES. IF NOT ATTACHED THE BIDDER WILL BE REJECTED
- **10**) 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. And payment will be made within 45 days.

S	igned	Name: S.SERENJ I	ď

Title/Position: PROCUREMENT OFFICER

For and on behalf of the Purchaser

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

SECTION B: QUOTATION SUBMISSION SHEET

1) Culticity of Ouolation, Manager Ixwacing	1) Currency	of Ouotation:	Malawi Kwacha
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- 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:

Authorised By:

- (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) [Insert any other documentation required by the Procuring Entity]
- 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.

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.

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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	Total Price Kwacha
1	Repairing the Broken Gazebo	Each	1		
2	Repairing the Banner	Each	1		
	NOTE: Suppliers are advised to come and inspect the air conditioners before submissions				
			VAT		
			16.5% Total		
[PLI	following attachments are appended to EASE ATTACH OTHER DOCUMEN horised By:			on of Services:	
Sign	ature:	Nam	ne:		
Posi	tion:	Date	»:	(DD/M)	4/VV)
(DD/MM/YY Authorised for and on behalf of:					I/ I I)

Company: