

REQUEST FOR QUOTATIONS (FOR GOODS)

Title/Position: PROCUREMENT OFFICER

Procurement Number:MPS/OR1/RFQ/25/20/50
To:
Date: 28/07/2025
The Procuring Entity named above invites you to submit your quotation for the Goods/Services described Here in. 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 were modified by this Request for Quotations.
SECTION A: QUOTATION REQUIREMENTS: 1) Description of Supply and Delivery: STATIONERY ITEMS (MEDICAL SECTION)
2) Quotation prices should be based on: for goods supplied from within Malawi; EXW – insured and delivered to HEADQUARTERS] or for goods supplied from outside of Malawi; CIP to [PRISONS]
 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: 12 months. 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: 2 PM ON 01/08/2025
 8) Quotations must be returned to: THE IPC CHAIRMAN, PRISON HEADQUARTERS, P/BAG 28, LILONGWE 9) The attached Schedule of Requirements at Section C, details the Services to be purchased. <u>You are Requested to quote your delivered price in lots for the goods by completing and returning Sections B and</u>
 C. 10) [List any other requirements e.g. the provision of samples] 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 or by total through the issue of a Local Purchase Order.
Signed: Name.

Name of Procuring Entity: Prison Headquarters

Procurement Number: MPS/ORT/RFQ/25/26/50

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) Delivery period offered: 7 days from date of Purchase Order.
- 3) The validity period of this Quotation is: 30 Days from the date for receipt of Quotations.
- 4) Warranty period (where applicable): 12 months.
- 5) We attach the following documents:
- i. Section C of the Request for Quotations completed and signed;
- ii. A copy of our Business Registration Certificate, PPDA
- iii. A copy of our valid MRA Certificate of Registration for VAT,
- iv. A copy of our valid MRA Withholding Tax Exemption Certificate,
- v A copy of our valid Tax Clear Certificate
- v. A list of recent Government contracts performed,
- vi. [Insert any other documentation required by the Procuring Entity].
- 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:
Authorised for and on behalf of	f:
Company:	

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 REQUIREMENTS (TO BE PRICED BY BIDDER)

DELIVERY POINT: [PRISON HEADQUARTERS

No Item	DESCRIPTION GOODS	UNIT OF MEASURE	QTY	DELIVERED UNIT PRICE KWACHA	DELIVERED TOTAL PRICE KWACHA
1	ARC FILES	EACH	4		
2	A5 TONER	EACH	1		
3	STAPLER MACHINE	EACH	1		
4	STAPLE WIRES	BOX	1		
				SUB TOTAL	
				VAT 16.5%	
				PPDA 1% LEVY	

GRAND TOTAL

Authorised By:	
Signature:	Name:
Position:	Date:(DD/MM/YY)
Authorised for and behalf of:	
Company:	

The following attachments are appended to clarify the Description of Goods/Service: [List any attachments providing additional specification of the goods required]