



PARLIAMENT OF MALAWI



Parliament Buildings, Presidential Way, Private Bag B362, Capital City, Lilongwe 3

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REQUEST FOR QUOTATION

Procurement Reference Number: **POM/RFQ/PDU/2/ELECT/2024/25/G/044**

To:

.....

.....

Date: **15th August, 2024**

The Procuring Entity named above invites you to submit your quotation for the goods 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 where modified by this Request for Quotations.

SECTION A: QUOTATION REQUIREMENTS:

- 1) Description of Supply and Delivery: *Supply and Delivery of Electrical Materials at Parliament of Malawi.*
- 2) Quotation prices should be based on:
 - for goods supplied from within Malawi; EXW – insured and delivered to Parliament Building
 - or** for goods supplied from outside of Malawi; CIP to Parliament Building.
- 3) The delivery period required is **7 days** from date of order.
- 4) Quotations must be valid for **45 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: **14:00 hrs on 21st August, 2024**. Quotations must be returned to:
The Chairperson, Internal Procurement and Disposal Committee, National Assembly, Parliament Building, Private Bag B362, Lilongwe 3. Attention: The Ag. Chief Procurement Officer
- 8) 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.
- 9) [*List any other requirements e.g. the provision of samples – Not Applicable*]

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: **Annastanzia Chirwa**

Title/Position: **The Ag. Chief 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.

SECTION B: QUOTATION SUBMISSION SHEET

- 1) Currency of Quotation: Malawi Kwacha
- 2) Delivery 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 Government contracts performed,
- 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.

8) Authorised By:

Signature _____ Name: _____
:

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

Authorised for and on behalf of:

Company: _____

9) Address:
.....

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

Item No		UOM	QTY	Delivered Unit Price <i>Kwacha</i>	Delivered Total Price <i>Kwacha</i>
1	30 metres of 6 mm/3 core cable	Each	1		
2	32 Amp Isolator/3 phase	Each	1		
3	1x50x25 PVC Trunking	Each	1		
				Sub-Total	
				16.5% VAT	
				Grand total	
				PPDA Levy 1%	

Authorised By:

Signature: _____ Name: _____

Position: _____ Date: _____

(DD/MM/YY)

Authorised for and on behalf of:

Company: _____