



JARAMOGI OGINGA ODINGA UNIVERSITY OF SCIENCE AND TECHNOLOGY
REQUEST FOR QUOTATION

To:
Supplier's Name & Address

Tel: _____

Quotation No: JOOUST/NT/Q305/2020/2021
Date issued 22/10/2020

From:
JOOUST
P O Box 210 – 40601
BONDO-KENYA
Tel: +254-2501804
Email:vc@jooust.ac.ke
Web: www.jooust.ac.ke

PRN NO. 8536

You are invited to submit quotation on materials listed below.

- Notes:
- THIS IS NOT AN ORDER. Read the conditions and instructions on reverse before quoting.
 - This quotation should be submitted in a plain wax sealed envelope "Quotation No as ABOVE for the Supply, Delivery, Installation, Fabrication and painting of 40ft Container. To be addressed to reach the buyer or be placed in the Quotation box not later than 29/10/2020 at 11:00am and your quotation should indicate final unit price which includes all cost for delivery, discount, duty and VAT and MUST remain valid for at least 30 days.
 - Return the original copy and retain the duplicate for your records.
 - You MUST indicate your terms of payment
 - Save for "For Official Use Only ", all spaces in this quotation MUST be filled
 - Suppliers must attach copies of Registration Certificate and a Valid Tax Compliance

S. No	Item Description	Qty Req	Unit Price	Total Price	Days to delivery	Brand	Country of Origin	Terms of payment	Remark
1.	<i>As per the attached specifications.</i>	1							

This part is for official use only
Supplier's Signature, stamp
and date here below:

Date_____

Opened by: 1_____ Designation _____ Signature_____ Date_____ Time_____

2_____ Designation _____ Signature_____ Date_____ Time_____

3_____ Designation _____ Signature_____ Date_____ Time_____

4_____ Designation _____ Signature_____ Date_____ Time_____

5_____ Designation _____ Signature_____ Date_____ Time_____

CONFIDENTIAL BUSINESS QUESTIONNAIRE

You are advised that it is a serious offence to give false information on this Form.

1. COMPANY DETAILS

a) Business Name

b) Location of business premises

Plot No. Street/Road

Postal Address Tel. No. Fax Email

Contact Person and Telephone No.....

(Please attach Company Profile)

c) Nature of business

d) Registration Certificate No.(Please attach copy)

e) Current Trade License No..... (Please attach copy)

f) PIN No..... (Please attach copy)

g) Tax Compliance Certificate No..... (Please attach copy)

h) VAT No.....

i) Year Established.....

j) Number of staff employed.....

k) Payment terms.....Days

l) Maximum value of business which you can handle at any one time Kshs.

m) Valid AGPO/YAGPO certificate if applicable.....(Please attach copy)

2(a). SOLE PROPRIETOR:

Your name in full
Age.....
Nationality
Country of origin
Citizenship details.....

2(b) – Partnership

Give details of partners as follows

Name	Nationality	Citizenship Details	Shares
.....
.....
.....
.....
.....

(If a Kenyan Citizen, indicate under Citizen Details whether by Birth, Naturalization or Registration)

2(c) – Registered Company:

Private or public
State the nominal and issued capital of the company –
 Nominal Kshs..
 Issued Kshs.....

Give details of all directors as follows

Name	Nationality	Citizenship Details	Shares
.....
.....
.....
.....
.....

Date..... Signature of Tenderer.....

If a citizen, indicate under "Citizenship Details" whether by Birth, Naturalization or Registration