



**JARAMOGI OGINGA ODINGA UNIVERSITY OF SCIENCE AND TECHNOLOGY
REQUEST FOR QUOTATION**

**To:
Supplier's Name & Address**

Tel: _____

**Quotation No: JOOUST/PQ/NT/VMR/3/2020/2021
Date issued 12/03/2021**

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

PRN 1818

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 **Provision of repairs (KAV 864E)**. To be addressed to reach the buyer or be placed in the Quotation box not later than **18/03/2021** at **10.00am** and your quotation should indicate the final unit price which includes all costs 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, Valid Business Permit, Valid PIN 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.	Repairs to KAV 864E ISUZU. Model: MV 123 Replace Worn out clutch plate	1							
2.	Replace Worn out clutch release bearing.	1							
3.	Replace clutch pressure plate.	1							
4.	Replace broken main leaf spring RRHS.	1							
5.	Supply and delivery of rebonded rear brake linings.	1							
6.	Supply and delivery of front shock absorbers	1							
7.	Supply of front rebonded brake linings.	1							
8.	Supply and delivery of rear shock absorbers.	1							

JOOUST IS ISO 9001:2008 CERTIFIED

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 originCitizenship 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