

BUSINESS QUESTIONAIRE ON PROCUREMENT PREFERENCE FOR YOUTH, WOMEN AND PERSONS WITH DISABILITIES

You are requested to duly complete this form and submit it back to Pwani University, Kilifi Campus via the address provided on the brochure collected together with this form.

Please attach all the documents requested upon return of the completed questionnaire

(A)COMPANY PROFILE

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1. C	Company/Enterprise/Group Name:			
Co.	egal Status (state whether partners /Other) cify?		If Other, please	
	Registration Certificate Noistering body)		(Attach a copy from	
4. Current Trade License No(attach a copy)				
	/AT No m KRA	(Attach a Copy)If exemp	oted attach exemption letter	
	PIN No			
	Full Names	ID No.	Title/Position	
1				
2				
3				
1				

-							
5							
7							
Atta	Attach copies of Identification cards						
8. Contact Person: Name							
	Title/Position						
	Tel.No						
9. P	9. Postal Address (If available)						
E-mail Address							
Phy	Physical Location						
You are also requested to comply with the regulations as released by the National Treasury. Details on the same are available from the National Treasury website							
(B) ELIGIBILTY AND CAPABILITY TO DELIVER GOODS OR SERVICES							
(B)	ELIGIBILTY AND CAPABILITY TO DELIV	VER GOODS OR SERV	ICES				
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3. How many employees do you have?
4. What is your average response time to a request for quotation?
5. What is your average response to delivery of goods/services after issuance of LPO?
6. What is the maximum value of business, which you can handle at any one given time? Kshs
7. Have you at any one time been requested to quote for supply of goods and services and failed to return the quotation?YES/NOIf Yes what was the reason for non-response
8. Have you at any one time been issued with a Local Purchase Order and failed to deliver
goods or services without assigning any reason for your action?
DECLARATION
I/We hereby declare that all the information provided in this form has been provided by free will and is true and correct. I/We hereby also grant authority to Pwani University to undertake counter reference against the information provided and take remedial action if found to the contrary.
Information submitted by(Or behalf of the enterprise/group/company)
Title
Signature
Official Stamp