High Commission of the Republic of Zambia

7, POORVI MARG, VASANT VIHAR
NEW DELHI - 110057.

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Fax : 91-11-26150276
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ZHC/ND/8/1/5

September 17, 2021

Rajiv Podar
President
IMC Chamber of Commerce and Industry
NEW DELHI

RE: INVITATION FOR QUOTATION FOR SUPPLY AND DELIVERY METAL KRAFT CIRCULAR SAW QTY 505 K

The above subject matter refers.

The Ministry of Works and Supply, Government of the Republic of Zambia, is requesting for stakeholders in India to participate in bidding for a quotation to supply and delivery Metal Kraft Circular Saw QTY 505 K to Zambia.

Closing date is September 22, 2021 at 11:00 hours Zambian time and those that will not receive an official Purchase Order from the Ministry of Works within 14 days from date of closing should consider the Request for Quotation unsuccessful.

Please take note that quotations must be sent ONLY to the Ministry of Works and Supply Administration official at the following address: alex.ministryofworks@gmail.com

Relevant documents have been attached for ease of reference and further expedition.

Assurances of my highest consideration.

[Signature]

Judith K.K. Kan'goma Kapijimpanga (Mrs.)
HIGH COMMISSIONER
Att'd/.....

cc: Alex Daka
Head - Procurement and Supply Chain
Ministry of Works and Supply
Block 28, Independence Ave
LUSAKA
Bidders are hereby invited for the following RFQ. Further details are available from MINISTRY OF WORKS AND SUPPLY, Tender Advice Centre, Block 28, Independence Ave Telephone +260779278026, Fax +260 114 907590

REQUEST FOR QUOTATION: SUPPLY & DELIVERY OF METAL KRAFT CIRCULAR SAW QTY 505 K

REQUEST FOR QUOTATION: 464221120
RFQ CLOSING DATE: 22 September 2021
RFQ CLOSING TIME: 11h00
CONTACT PERSON: Alex Daka

Should you not receive an official Purchase Order from Ministry of Works within a period of fourteen (14) days from date of closing, consider your Request for Quotation unsuccessful

SUBMISSIONS:
QUOTATION MUST BE SUBMITTED ONLY TO THE MINISTRY OF WORKS AND SUPPLY ADMINISTRATION OFFICIAL AT THE FOLLOWING EMAIL ADDRESS.
alex.ministryofworks@gmail.com
CP Reference Number:
Contact Person: Alex Daka
Tel: +260779278026
Email: alex.ministryofworks@gmail.com

Company: ........................................
Attention: ......................................
Tel: ................................................
Fax: ............................................... 
Email: .............................................

You are hereby invited to submit a quotation for the items listed below. Please provide a written quotation to the above named contact person on or before the closing date indicated below. Only quotations which contain the information listed below will be accepted. Prices should be shown inclusive of VAT and fixed and firm. Delivery will be direct to the relevant Ministry of Works and Supply store.

<table>
<thead>
<tr>
<th>Item No.</th>
<th>Description</th>
<th>Estimated Qty</th>
<th>Unit Price</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>METAL KRAFT CIRCULAR SAW QTY 505 K</td>
<td>15</td>
<td></td>
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</tr>
<tr>
<td></td>
<td>SUB TOTAL</td>
<td></td>
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<td></td>
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<td></td>
<td>VAT</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>TOTAL</td>
<td></td>
<td></td>
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</tbody>
</table>

Closing date and time for submission of quotation: 22/09/2021 @ 11h00

Vendors must supply written quotations that reflect the following information on the quotation:
- Quotation Validity Period: ________________________________
- Delivery period: ________________________________
- Company Name: ________________________________
- Company Registration Number: ________________________________
- VAT Registration Number: ________________________________
- Physical Address: ________________________________
- Contact Person: ________________________________
- Telephone Number: ________________________________
- Fax Number/Email Address: ________________________________
- Signed disclaimer (Attached to this RFQ): ________________
DECLARATION OF INTEREST

1. No bid will be accepted from persons in the service of the state.*

2. Any person, having a kinship with persons in the service of the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid. In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons connected with or related to persons in service of the state, it is required that the bidder or their authorised representative declare their position in relation to the evaluating/adjudicating authority and/or take an oath declaring his/her interest.

3. In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

3.1 Full Name: ........................................................................................................

3.2 Identity Number: ..............................................................................................

3.3 Company Registration Number: ........................................................................

3.4 Tax Reference Number: ....................................................................................

3.5 VAT Registration Number: ...................................................................................

3.6 Are you presently in the service of the state* ...................................................... YES / NO

3.6.1 If so, furnish particulars.
..............................................................................................................
..............................................................................................................
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3.7 Have you been in the service of the state for the past twelve months? .......................... YES / NO

..............................................................................................................
3.8 Do you, have any relationship (family, friend, other) with persons in the service of the state and who may be involved with the evaluation and or adjudication of this bid?

3.8.1 If so, furnish particulars.

.................................................................

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3.9 Are you, aware of any relationship (family, friend, other) between a bidder and any persons in the service of the state who may be involved with the evaluation and or adjudication of this bid?

3.9.1 If so, furnish particulars

.................................................................

.................................................................

3.10 Are any of the company’s directors, managers, principal shareholders or stakeholders in service of the state?

3.10.1 If so, furnish particulars.

.................................................................

.................................................................

3.11 Are any spouse, child or parent of the company’s directors, managers, principal shareholders or stakeholders in service of the state?

3.11.1 If so, furnish particulars.

.................................................................

.................................................................

3.12 Are any of the company’s directors, trustees, managers, principle shareholders or stakeholders in service of the state?

3.12.1 If yes, furnish particulars.

.................................................................

.................................................................
3.13 Are any spouse, child or parent of the company's directors, trustees, managers, principal shareholders or stakeholders in service of the state? YES / NO

3.13.1 If yes, furnish particulars.
.................................................................................................................................

3.14 Do you or any of the directors, trustees, managers, principal shareholders, or stakeholders of this company have any interest in any other related companies or business whether or not they are bidding for this contract. YES / NO

3.14.1 If yes, furnish particulars:
.................................................................................................................................
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<table>
<thead>
<tr>
<th>Full Name</th>
<th>Identity Number</th>
<th>State Employee Number</th>
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<tbody>
<tr>
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Signature.................................................................................................................................

Date...........................................................................................................................................

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Capacity....................................................................................................................................

Name of Bidder...........................................................................................................................
<table>
<thead>
<tr>
<th>Item</th>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.2.1</td>
<td>If so, furnish particulars:</td>
<td>-----</td>
<td>-----</td>
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<td>4.3</td>
<td>Was the bidder or any of its directors convicted by a court of law (including a court of law outside the Republic of Zambia) for fraud or corruption during the past five years?</td>
<td>Yes</td>
<td>No</td>
</tr>
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<td>4.3.1</td>
<td>If so, furnish particulars:</td>
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<tr>
<td>4.4</td>
<td>Does the bidder or any of its directors owe any municipal rates and taxes or municipal charges to the municipality / municipal entity, or to any other municipality / municipal entity, that is in arrears for more than three months?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4.4.1</td>
<td>If so, furnish particulars:</td>
<td>-----</td>
<td>-----</td>
</tr>
<tr>
<td>4.5</td>
<td>Was any contract between the bidder and the municipality / municipal entity or any other organ of state terminated during the past five years on account of failure to perform on or comply with the contract?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>4.7.1</td>
<td>If so, furnish particulars:</td>
<td>-----</td>
<td>-----</td>
</tr>
</tbody>
</table>

CERTIFICATION

I, THE UNDERSIGNED (FULL NAME) ................................................................. CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM TRUE AND CORRECT.

I ACCEPT THAT, IN ADDITION TO CANCELLATION OF A CONTRACT, ACTION MAY BE TAKEN AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

.................................................................
Signature

.................................................................
Date

.................................................................
Position

.................................................................
Name of Bidder
CERTIFICATION

I, THE UNDERSIGNED (NAME) .........................................................................................................................

CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS CORRECT.
I ACCEPT THAT THE STATE MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

......................................................... .........................................................
Signature                                                                                        Date

......................................................... .........................................................
Position                                                                                         Name of Bidder

PLEASE NOTE ALL REPLIES AND SUBMISSIONS MUST BE SENT TO THE EMAIL ADDRESS BELOW.
alex.ministryofworks@gmail.com!!