



# **Machakos University**

## **REGISTRATION OF SUPPLIERS**

**TENDER NO: MksU/REG/5/2021/2023**

**SUPPLY AND DELIVERY OF EXAMINATION BOOKLETS,  
PRINTED STATIONERY, ACCOUNTABLE DOCUMENTS  
AND PRINTING SERVICES FOR PROMOTION MATERIALS  
(T-SHIRTS, UMBRELLAS, BUSINESS CARDS ETC)  
FOR THE PERIOD 2021-2023**

**CLOSING/OPENING DATE: FRIDAY, 9<sup>TH</sup> JULY 2021  
10:00 AM.**

## **TENDER/REGISTRATION**

**Tender No. MksU/REG/5/2021/2023**

**Tender Title: Supply and Delivery of Examination Booklets, Printed Stationery, Accountable Documents and Printing Services for Promotion Materials (T-Shirts, Umbrellas, Business Cards Etc)**

### **REGISTRATION OF SUPPLIERS FOR SUPPLY/PROVISION OF GOODS AND SERVICES FOR THE FINANCIAL YEAR 2021-2023**

Machakos University invites applications for **registration** of suppliers for the Supply and Delivery of Examination Booklets, Printed Stationery, Accountable Documents and Printing Services for Promotion Materials (T-Shirts, Umbrellas, Business Cards Etc) from interested eligible bidders for the period **2021 - 2023**.

Interested and eligible candidates may download documents from [www.mksu.ac.ke](http://www.mksu.ac.ke) or [www.tenders.go.ke](http://www.tenders.go.ke) at no cost.

Youth, Women and persons with disability are encouraged to apply pursuant to the Public Procurement and Asset Disposal Act 2015.

To be eligible, the candidates **MUST** prove that they qualify to participate in Public Procurement by providing copies of **MANDATORY** documents as stated in the registration documents.

The applicants **MUST** comply with all instructions, terms and conditions and particularly ensure that forms required are properly completed sealed in a plain envelope and clearly marked "CATEGORY NO. ...FOR SUPPLY/PROVISION OF....." addressed to:

**Vice-Chancellor, Machakos University,  
P. O. Box 136,  
MACHAKOS,**

and deposited in the Tender Box situated at the entrance to the Administration Block, Main Campus **so as to reach on or before Friday, 9<sup>th</sup> July, 2021 at 10.00 a.m.** Late applications will not be accepted.

Registration applications will be opened immediately thereafter in the presence of the candidates or their representatives who choose to attend the opening session at Conference Room 11, Main Campus.

**PROF. LUCY W. IRUNGU  
VICE-CHANCELLOR  
&  
PROFESSOR OF ENTOMOLOGY**

## REGISTRATION OF SUPPLIERS

### REGISTRATION FORM FOR ENTERPRISES OWNED BY WOMEN, YOUTH AND PERSONS WITH DISABILITY TO SUPPLY GOODS, WORKS AND SERVICES TO PROCURING ENTITIES

#### ACCESS TO GOVERNMENT PROCUREMENT OPPORTUNITIES (AGPO)

The registration of suppliers is aimed at building a profile for each supplier regarding information on general particulars of the company. You are advised that it is a serious offence to give false information on this form.

#### PART I: DETAILS OF THE APPLICANT

1. Name of Applicant .....
2. Physical Address.....
3. Postal Address: ..... 4. Postal Code: .....
5. E-mail: ..... 6. Mobile Phone No. ....
7. Are you applying for youth, women or persons with disabilities? .....
8. Contact Person .....
9. Overview of the Enterprise

Type of ownership (please tick one)	<input type="checkbox"/> [Sole Proprietor] <input type="checkbox"/> [Partnership] <input type="checkbox"/> [Limited Company] <input type="checkbox"/> [Others Specify]
Number of employees	<input type="checkbox"/> [0-5] <input type="checkbox"/> [6-25] <input type="checkbox"/> [26-49] <input type="checkbox"/> [50-59] <input type="checkbox"/> [100-250]
Initial Investments (KES)	
Total Annual Sales for the previous year (Turnover KES)	
Experience in the sector in years	

### Type of Ownership Details

<b>Part 9 (a) - Sole Proprietor or name of registered business, where applicable</b>			
Name in Full		Age	
Identity/Passport No.			
<b>Part 9 (b) - Partnership Details</b>			
NAME	NATIONALITY	ID/PASSPORT NO.	% SHARES
<b>Part 9 (C) – Registered Company</b>			
State the nominal and issued capital of company			
Nominal KShs ..... Issued KShs .....			
<b>Directors' Details</b>			
Name	Nationality	ID/Passport No.	% Shares

10. Bank Account Name: .....
11. Branch of the Bank: .....
12. Bank Account Number.....
13. VAT Registration Number: .....
14. IFMIS Number, where applicable.....
- 15 Type of business:       SECTOR (TICK ONE)

AGRIBUSINESS	TRADE	HOSPITALITY& ENTERTAINMENT
MANUFACTURING	SERVICES	ICT
CONSTRUCTION	OTHERS	SPECIFY

Title: .....

Signature: .....Date .....

## **PART II: LIST OF ATTACHMENTS**

The following attachments are essential for appraisal and you are required to ensure that they are all attached, failure to which your application may be rejected:

1. Copy of certificate of incorporation/registration;
2. PIN Certificate;
3. Valid Tax Compliance/ Exemption Certificate;
4. Business/Company profile;
5. Certificate of Registration in a target group issued by the National Treasury;