



REQUEST FOR QUOTATION

DATE:

M/S: _____

QUOTATION NO: RFQ/LSL/D/2020/2021

Dear Sir/Madam,

We invite you to quote for the following listed item(s)/services/Works. Your quote should be received on or before close of business on **25th August 2020**.

ITEM	DESCRIPTION	QTY	UNIT COST	TOTAL COST	DELIVERY PERIOD	REMARKS
	TOTAL					

SUPPLIER'S SIGNATURE & STAMP _____

All the firms quoting must provide copies of the following:-

- 1. Dully filled Confidential Business Questionnaire**
- 2. Copy of recent CR 12**
- 3. Copies of Identity Cards (IDs) for Directors**
- 4. Certificate of Registration**
- 5. Personal Identification Number(PIN)**
- 6. Current Tax Compliance Certificate**
- 7. Current Single Business Permit**
- 8. Proof of Physical Location(Such as Office Lease Agreement/Title deed and utility bills)**

CONDITIONS:

1. This QUOTATION is not an order. Read the Conditions and instructions before quoting.
2. Delivery period and validity period of your quotation **MUST** be indicated
3. The quotation should be enclosed in plain sealed envelope and the quotation reference number **MUST** be indicated on the envelope
4. Prices quoted **MUST** be net inclusive of VAT and all other costs where applicable.
5. The quotation **MUST** be stamped and signed.
6. The quotation **MUST** be delivered to Lavington Security Limited, Dennis Pritt Road, addressed to Chairman Procurement Committee. The supplier shall be ready to supply the above items immediately on receipt of the LPO.
7. The supplier shall return the original copy of the quotation on the quotation submission date, **12th August 2020.**
8. Failure to observe the above conditions shall lead to **automatic** disqualification of the bidder
9. LSL reserves the right to accept or reject any quotation wholly or in part and does not bind itself to accept any bid.

Chairman, Procurement Committee
For: MANAGING DIRECTOR OFFICER

FOR OFFICIAL USE ONLY

OPENED IN THE PRESENCE OF (NAME &SIGN)

1. _____
2. _____
3. _____
4. _____

CONFIDENTIAL BUSINESS QUESTIONNAIRE

You are requested to give the particulars indicated in Part 1 and either Part 2(a), 2(b) or 2(c) whichever applies to your type of business.

NB. Attach Company Registration Certificate or Certificate of Incorporation, Valid Single Business Permit from County Government, PIN Certificate with this form.

Part 1 - General:

Business Name
(Attach Copy of Registration Certificate/Certificate Incorporation)

Location of Business Premises

Plot No. Street/Road

Postal Address.....Tel. No(Landline).....

Mobile Phone(s):.....

Website:..... E-mail:.....

Nature of Business

Current Trade License (Single Business Permit from a Local Company)

No. Expiring Date
(Attach Copy of Valid Trade license)

PIN No.....
(Attach Copy of PIN Certificate)

Maximum value of business which you can handle at any one time:
K£.....

Name of your bankers Branch

Part 2 (a) Sole Proprietor:

Your name in full Age.....

NationalityCountry of origin

Citizenship details

Part 2 (b) Partnership

Give details of partners as follows:

	Name	Nationality	Citizenship Details	Shares
1.				
2.				
3.				
4.				
5.				
6.				

Part 2 (c) Registered Company:

Private or Public

State the nominal and issued capital of the company: -

Nominal K£

Issued K£

Give details of all Directors as follows: -

	Name	Nationality	Citizenship Details	Shares
1.				
2.				
3.				
4.				
5.				

I certify that the above information is correct.

Authorized Signature..... Date:

Affix Company Rubber Stamp