PRE-QUALIFICATION FOR SUPPLIERS AND SERVICE PROVIDERS

Introduction

IsraAID is a non-profit Organization, Register in South Sudan (NGO Reg.No.35 Relief and Rehabilitation Commission) non-governmental working in 23 countries worldwide to provide assistance to populations affected by the conflicts, natural disasters, massive displacements and acute poverty.

IsraAID South Sudan is calling for applications for pre-qualification from competent and qualified suppliers and service providers for the provision of various categories of goods and services for the year 2020-2021. The pre-qualification will be followed by a Request for Quotations (RFQ), Invitation to Bid (ITB) and/or Request for Proposal (RFP) which may result in Long Term Agreements with the successful bidders.

Companies that wish to participate in the process are required to complete the application forms indicating the categories for which the applications are being submit. In addition to requirements in the pre-qualification application form, the interested applicants must provide the following documents/information:

1) Mandatory document to required:

- 1. Certificate of registration of business (Within the Country of Operations)
- 2. Revenue Authority Tax Registration Certificate (Indicating TIN)
- 3. Tax Clearance Certificate (Must be Valid for the period ending 30th September 2020 or later).
- 4. Certificate of registration with South Sudanese Chamber of Commerce (for South Sudan registered companies)
- 5. Valid Operation and/or Trading Licence (whichever is applicable)
- 6. Articles and Memorandum of Association (it is mandatory that you submit the entire document)
- 7. Audited Accounts for at least the last two years indicating the annual turnover (in case of a Joint Venture or Partnership, Audited Accounts of one of two principle partners will suffice)
- 8. Official Business physical, postal, telephone and email addresses
- Twelve Months Certified Bank Statement for the period ended 31st December, 2019.
- 10. Reference and recommendations from at least 3 present and 3 past clients with whom your firm has done business for the category being bided for.
- 11. Proof of substantial contracts/orders completed in the last **12 months** for the specific category you are bidding for.
- 12. Fully and satisfactorily completed Prequalification Form specifying the category your firm is bidding for.

Tel: (+972) 54 6785033 Fax: (+972) 9 862 0042 Email: info@israaid.org Web: www.israaid.org.il
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Note: Any submission made through any other address or means respectively, shall not be honored and IsraAID South Sudan shall not accept any responsibility whatsoever.

2) Labeling and marking of submissions:

Submissions MUST be contained in a Single large Envelope clearly labeled "Application for pre-qualification as a Supplier/Service provider (whichever is applicable)" and MUST indicate the category for which you are applying, you are legible to apply for only two with proper labeling code on the envelop.

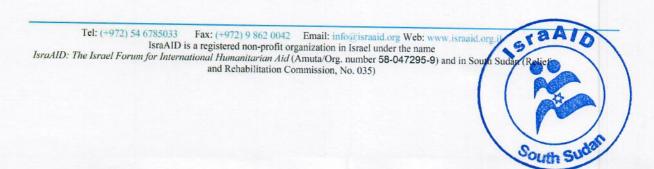
- I. FOOD ITEMS/ BEVERAGES Labeling code- Isra/SSD/FDI/20/PQ1
- II. NON-FOOD Labeling code- Isra/SSD/NFI/20/PQ2
- III. PRINTING SERVICE Labeling code-Isra/SSD/PS/20/PQ3
- IV. CONSTRUCTION SERVICE Labeling code- Isra/SSD/CS/20/PQ4
- V. TRANSPORTATION SERVICE Labeling code- Isra/SSD/TS/20/PQ5
- VI. INTERNET SERVICE Labeling code- Isra/SSD/IS/20/PQ6
- VII. STATIONERY SUPPLIERS Labeling code-Isra/SSD/SS/20/PQ7
- VIII. ELECTRONICS/EQUIPMENTS Labeling code- Isra/SSD/EE/20/PQ8
- IX. FURNITURE SUPPLIERS Labeling code- Isra/SSD/FS/20/PQ9
- X. TENTS PROVIDER Labeling code- Isra/SSD/TP/20/PQ10

Any requests for clarification and submission of documentation: Any requests for clarifications should be made in writing only and addressed to the Procurement Committee at the following address: southsudanprocurement@issraaid.org or you can reach us here; Hai Neem, UAP Building Equatoria Tower, 6th Floor Wing A, and MUST be received before or not later than Monday 10th August, 2020, 4:00pm on opening date.

The closing date for submitting a complete pre-qualification application is **Friday 28** th **August 2020**, **4:00pm**, **East Africa Time**.

4) Selection criteria:

The companies that fully and satisfactorily meet the requirements listed in section above with the (*Mandatory information and documentation*), the Vendor Prequalification Form and any other criteria which the Procurement Review Committee shall deem necessary for this purpose, shall be pre-qualified and shall be invited to participate in the subsequent bidding process.





Specifically, bidder submissions will be evaluated and scored on the following criteria (to be determined from requirements listed in Section 2 above):

i-	Satisfactory proof of legality of company existence marks	25
ii-	Satisfactory proof of tax compliance marks	25
iii-	Satisfactory proof of adequate financial capacity	40 marks
iv-	Satisfactory proof of bidder's business worthiness	10

NB: Only bidders whose submissions score a minimum of 80 marks from the evaluation will be pre-qualified.

5) Feedback to successful/unsuccessful applicants:

The list of successful suppliers applicants will be informed by Procurement committee via email by focal point of IsraAID South Sudan within (2) weeks from date of closure of receipt of applications. In case you submit an application form for pre-qualification but don't hear from us 3 weeks after the closing date, please consider your application unsuccessful

Disclaimer:

- (a) This is only an invitation for prequalification and IsraAID South Sudan may cancel the process at any time without notice. Submission of application does not result in any contractual relationship between the bidder and IsraAID South Sudan.
- (b) IsraAID South Sudan is under no obligation whatsoever to prequalify any bidder but the decision of the evaluation committee guided by the advised criteria shall be final.







PRE-QUALIFICATION FORM

Company Name:
Contact Person:
Address:
City: Zip:
Telephone: Fax:
Registration No#
Email Address:
Web Site:
Type of work qualified to perform: (Supplier, Service Provider, Construction, etc.)
Specific Geographical Area You Work In: (Example: CES-Juba SSD)
4) to testing the same
Year Business Started:Number of Employees:
Has Company or any of its Owners Declared Bankruptcy in last 2 years? [] Yes [] No
Is Company Bondable? []YES []NO – Single Project Limit Total \$



Have you ever failed to complete a NO	project: [] YES (explain details below) []
Details:	
P S BURLLOWS S	Action Control of the
The state of the s	
the built manager to the con-	Elita Caraca de la composição de la comp
marks	
Declining to the	Skilling Book and a second
	project on time? [] YES (explain detail below)
Details:	
Springer in	
100 billion of the second	
Details:	
What is your current Worker's Com EMR)	pensation Experience Modification Rating
Jobs Run @ Time:	Annual Volume
argest Job \$	Average Joh S
mallest Job \$	Average Job \$
Current Contract Backlog:	
Do you have a Service supplier/cons	struction etc Department? [] YES [] NO



sheet.

IsraAID South Sudan

Do you have full time coverage? [] YES [] NO

State:	No:	
State:	No:	
State:	No:	
State:	No:	
Estimating Contac	ct:	
Union / Signatory	: Yes [] No [] Subcontractor: [] Vendor/Supplier
Business Type: [] Sole Proprietor [] Corporation [] Partn] Other (specify)	ership [] Limited Liability Company [
Business Type: [] Sole Proprietor [] Corporation [] Partn] Other (specify)	ership [] Limited Liability Company [Years with Company
] Sole Proprietor [] Corporation [] Partn] Other (specify)	



Is your company a certified: [Local] [National] [Regional] [International] [Native South Sudanese] N/A						
[] Office Personnel [] Field Supervisors [] Avg. Field Labor [] Avg. Shop Labor						
I. Legal Information						
Are there any judgments, claims, arbitration proceedings, or suits pending/out- standing against your firm or its officer or principals? [] YES [] NO If yes, please provide a complete explanation on a separate sheet.						
Has your company filed any lawsuits or requested arbitration or mediation with regard to supplier service, delivery and construction? Contracts within the last two (2) years? [] YES [] NO If yes, please provide a complete explanation on a separate sheet.						
II. References						
Banking (If more please feel free to add)						
Name & Branch						
Since?						
City, State, Zip						
Contact Person						
Name & Branch						
Bonding						
Bonding CompanySince?						
Surety Broker/AgentSince?						



Contact Person	Teleph	none
Bonding Capacity – Per Project \$		Aggregate \$
Last Bond Issued – Date	Amount \$	Rate %
Please attach a formal	letter from your boi	nding company.
Insurance		
General Liability Carrier	Since	?
Insurance Broker/Age	Since	?
Contact Person	Telepho	one
What is your limit to Liability insura	nce?	
Supplier		
Supplier Name &Location		
Contact Person	Tel	ephone
Supplier Name & Location		
Contact Person		
Supplier Name & Location		
Contact Person		
5 References (NGO's, Suppliers/Se Services work within the last 2 year	ervices, and at least rs):	2 General Contracts for
Project:	Company:	
Address:		

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Telephone:	F	ax:		Your Contract \$
Project:	Section 1 to 11		Company: _	
Telephone:	F	ax:		Your Contract \$
Project:			Company: _	
Address:				
				Your Contract \$
Project:	Company:			Address:
Telephone:	Fax:		You	ur Contract \$
Project:			Company: _	
Address:	ļ.			
Telephone:	Fax	: _	<u>Dain</u>	Your Contract \$

III. Financial Information

Financial Reference:

Please attach a copy of the following: Financial statement may be requested at IsraAID requests.

Has your company or any other organization with which your officers were involved during the past two (2) years, ever been in bankruptcy or a voluntary reorganization? [] YES [] NO If yes, please provide a complete explanation on a separate sheet.

IV. Revenue



	\$	_ \$	\$	<u> </u>		
v.	Experience					(Forecast Volume)
Has you	ır company	had experie	nce with supplier	/service for proje	cts [] YES []	
VI.	Safety					
Does yo	ur firm hav	e a written s	safety plan?	[] YES [] NO	
[] YE	s, fines, or jo S [] NO If yes, pleas	obsite fatalit e describe i	tional Safety & lities within the mo	est recent two (2)	years?	
what sto	eps were ta	ken by the	company to prev	vent from happe	ning in the future	•
OSHA I three (2)	ncident Rat	e: Please lis	st your firms OSI	IA incident rate f	for the most recent	
YR. / Ra Rate	ate		YR. / Rate		YR. /	
		,				
VII.	Additio	nal Infor	mation			
	st any addit	ional inform	nation you feel w		ine your company	's

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Completed By:		
	(Name)	
	(Title)	
	(Signature)	
	(Date)	