**INITIAL VETTING QUESTIONS**

**Business Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business Location/ Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Business Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Are all of your legal documents up-to-date? (i.e. Certificate of incorporation, Tax compliance certificate)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | No |  | Yes |  |

Year of registration: **\_\_\_\_\_\_\_\_\_**

Total number of employees: **\_\_\_\_\_\_\_\_\_**

What category of supplies do you specialize in? List your top 3 categories in order of annual sales: (Please include a copy of your largest purchase order in your category(s) of specialization to demonstrate reliability & capacity).

1. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
2. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
3. **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

What is the approximate estimated value of all of your current stock on hand? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

What is your average reported annual turnover of sales? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Are you a third-party supplier (Your business does not maintain stock but locates items when requested)?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | No |  | Yes |  |

Do you outsource for certain goods or services? (If yes, please explain – i.e. “for all transportation services”)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | No |  | Yes |  |

|  |
| --- |
|  |

How long does it typically take to deliver in-stock items? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

What is your estimated lead time to deliver back-to-back orders? **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Have you ever done business with Samaritan’s Purse International Relief? (If yes, please detail how many years and what category(s) of supplies you have provided)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | No |  | Yes |  |

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**TENDER RESPONSE FORM**

(Please provide information against each requirement, additional rows can be inserted for all questions as necessary)

**Section 1 - Bidder’s general business details**

1. **General information**

|  |  |  |  |
| --- | --- | --- | --- |
| Organisation Name: | | | |
| Contact Name: | | | |
| Phone : | | Email : | |
| Parent company (if applicable): | | | |
| Principle Address: | Registered Address: | | Payment Address: |
| Registration number: | | Tax number: | |
| Legal status (Sole Proprietor /Partnership /Company) : | | | |
| Year of registration: | | Number of Staff employed: | |
| Full Name of CEO /Director /Owner: | | Full Name of Manager: | |
| Owner’s Mobile #: | | Manager’s Mobile #: | |
| Owner’s Email: | | Manager’s Email: | |

1. Please provide details of the type of your organisation (manufacturer, distributor, etc):
2. Please provide the Primary email to receive Purchase Orders from Samaritan’s Purse?
3. Please provide details of the primary products/services that your organisation stocks for sale: (*Tick all that apply*)

|  |  |  |  |
| --- | --- | --- | --- |
|  | Construction Material |  | Computers & Electronics |
|  | Food – Fresh / Veg / Processed |  | Services (*please describe*) |
|  | Food – Cereals / Dry |  | Printing |
|  | Generator Parts |  | Stationaries |
|  | Air Transport / Charter |  | Embroidery |
|  | Road Transport |  | Vehicle – NEW |
|  | Land Cruiser Parts |  | WASH |
|  | Motorbike Parts |  | Medical |
|  | Quadbike Parts |  | Solar |
|  | Tractor Parts |  | Printing |
|  | Fuel/Lubricants |  | Electrical |
|  | Tires |  | Furniture |
|  | Household Supplies |  | Other – *Please specify* |

1. Are you a general supplier as opposed to specializing in certain items?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | No |  |  | Yes |  |

1. What category of supplies do you specialize in? (List your top 3 categories in order of sales per year)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you have a business under another name? If Yes, please provide the names below:

Business name #2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Business name #3 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Are you a third-party supplier or do you outsource goods/services (Your business does not maintain stock but locates items when requested)?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | No |  | Yes |  | (If Yes, please explain) |

|  |
| --- |
|  |

1. Do you have other location(s) from where you sell goods or services?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | No |  | Yes |  | (If Yes, please list) |

**Physical shop/store (not including warehouse)**

Location/ address #2 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location/ address #3 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location/ address #4 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Do you have a private Warehouse belonging only to your Business entity?

|  |  |  |  |
| --- | --- | --- | --- |
|  | No |  | Yes |

1. How many days does it typically take to deliver in-stock items? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Will you accept Purchase Orders from Samaritan’s Purse?

|  |  |  |  |
| --- | --- | --- | --- |
|  | No |  | Yes |

1. Are you willing to accept a penalty for late delivery? After an initial 7 days grace period, a penalty of 0.5% of the amount of goods/services that have been delayed will be deducted daily from the invoice up to a maximum 20% penalty.

|  |  |  |  |
| --- | --- | --- | --- |
|  | No |  | Yes |

1. Please provide the Names of your top 3 Clients **within the last year**:

|  |
| --- |
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1. Please list your employees who would be involved with Samaritan’s Purse South Sudan. One employee should be the key point of contact (POC) for Samaritan’s Purse South Sudan.

**\*POC:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Job title** | **Role for Samaritan’s Purse account** | **Direct telephone number** | **Email address** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**Section 2: Bidder capacity**

1. List the product categories you intend to supply for this Framework Agreement:

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| --- |
| **Product Category** |
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1. List any other product categories you would normally supply as part of your business if different from the categories on this ITT.

|  |
| --- |
| **Other Product Categories** |
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1. Please detail the location and average volumes of product stocks you currently hold (both at production facilities and at additional warehousing facilities).

|  |  |  |
| --- | --- | --- |
| **Product Category** | **Stock location(s)** | **Quantity** |
|  |  |  |
|  |  |  |
|  |  |  |
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1. Number of years of relevant experience to provide similar goods or services?

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| --- |
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1. Detail any benefits or additional services your organisation can offer Samaritan’s Purse as part of the Agreement:
2. What quality standards does your organisation adhere to? (e.g. ISO)
3. Please provide details ofat least3client **references** whichSamaritan’s Purse may contact with whom you have done business within the past 5 years (preferably NGOs):

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Client Organisation** | | | **Contact** | | | **Phone no.** | | | | **E-mail address** | | | |
|  | | |  | | |  | | | |  | | | |
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| 1. What are your standard payment terms? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. Are you willing to accept payment upon receipt of goods/services rendered?  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | |  |  | Yes |  | No |  |  1. What forms of payment will you accept (check all that apply)  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  | Cash |  | Wire Transfer |  | Check |  |  | | | | | | | | | | | | | | |

**Section 3: Commercial proposal (Pricing & Taxation)**

1. Please indicate the prices you are offering Samaritan’s Purse as part of this contract, including the currency making reference to the attached Price list and specifications.

Please include the following information in your response **(you can attach separately)**

* 1. Price per unit of each item
  2. Delivery lead time for each item
  3. Quote validity period
  4. Payment terms offered
  5. Delivery terms (i.e. ex-works or Duty Delivered Paid (DDP) Juba)

1. Can you fix these prices for the duration of the contract - one year?

Yes  No

If not, please provide details of how long these prices will remain fixed?

|  |
| --- |
|  |

1. What percentage discount are you willing to offer Samaritan’s Purse as part of this FWA?

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1. All the supplies in related to this Frameworks agreement will be delivered to South Sudan. If you deliver Ex-works for every subsequent purchase order, will you still charge Value Added Tax (VAT)? Please provide sufficient information regarding your plan to handle VAT?

|  |
| --- |
|  |

1. If you deliver Free on Board (FOB) to a designated transporter for onward shipment to Juba, South Sudan, will you still charge VAT? Please provide sufficient information regarding your plan to handle VAT?

|  |
| --- |
|  |

1. Do you have the capacity to store the supplies for Samaritan’s Purse until we are able to secure Tax Exemption? If so, for how long? (This can take a period of up to 3 months)

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1. Are you able to process an import licenses to facilitate movement of goods into South Sudan? (if applicable)

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**Section 4: Confirmation of Bidder’s compliance**

We, the bidder, hereby confirm compliance with Samaritan’s Purse Terms and Conditions of the Frame work agreement.

We confirm that Samaritan’s Purse South Sudan may in its consideration of our offer, rely on the statements made herein and therefore the information provided in response to this tender is true to the best of our knowledge. That any mis-representation of information will lead to automatic disqualification.

|  |
| --- |
| **Acceptance by the Bidder:**  ………………………………………………………………  Signature  ………………………………………………………………  Name  ………………………………………………………………  Job Title  ………………………………………………………………  Company  ………………………………………………………………  Date & Stamp |