

**Case Hospital**  
**Bidding Document**  
**For the**  
**Prequalification of Suppliers and Providers of**  
**Goods and Services**

Subject of Procurement: Prequalification of Suppliers and Providers  
of Goods and Services FY 2017/19

Procurement Reference Number: CSH/SPLS//2017-2019

Procurement Method: Open Domestic Bidding

Date of Issue: 4<sup>th</sup> September 2017

PREFACE .....	3
PART I: GENERAL PART .....	4
PART II: INSTRUCTIONS TO PROVIDERS .....	6
PART III: PREPARATION OF APPLICATIONS .....	9
PART IV: SUBMISSION OF APPLICATIONS .....	10
PART V: OPENING AND EVALUATION OF APPLICATIONS .....	11
PART VI: SHORT LISTING .....	13
<b>ANNEX A</b>	
FORM A1: APPLICANT SUBMISSION SHEET .....	164
FORM A2: APPLICANT INFORMATION SHEET .....	16
FORM A3: FINANCIAL STATEMENT .....	18
FORM A: RESOURCES: PERSONNEL .....	19
FORM A5: RESOURCES: PROVIDERS EQUIPMENT AND FACILITIES .....	20
FORM A6: EXPERIENCE: RELEVANT PROJECTS COMPLETED .....	21
FORM A7: LEGAL STATUS .....	212
<b>ANNEX B</b>	
ANNEX B: STATEMENT OF REQUIREMENTS .....	24

## **Preface**

Short listing is a pre-tender process that provides for a shortlist of providers from which providers are obtained to bid. Short listing is used where works, services or supplies are of a routine nature or bidding is for a group of similar contracts. Short listing shall be open to all providers and providers shall be invited using a short list notice.

A short list notice shall be published in at least one publication of wide circulation to ensure effective competition.

The short listing document is divided into:

- Part I:           General Part
- Part II:          Instructions to Bidders
- Part III:         Preparation of Applications
- Part IV:         Submission of Applications
- Part V:          Opening and Evaluation of Applications
- Part VI:         Short listing

### **Appendices:**

A: Application Submission Sheet

B: Statement of Requirements

# **PART I: GENERAL PART**

## **1.1 Scope of Application**

**1.1.1** Case Hospital invites applications for the short list of works, services and supplies described in **Appendix B**.

**1.1.2** Throughout this document:

- (a) the “Applicant” means the bidder submitting an application; and
- (b) “Application” means a bid or submission to be short-listed.

## **1.2 Source of Funds**

**1.2.1** Case Hospital has an approved budget towards the cost of the procurements described in **Appendix B**. Case Hospital intends to use these funds for payments under the contract(s) resulting from the bidding for which this short list is conducted.

## **1.3 Corrupt Practices**

**1.3.1** It is Case Hospital’s policy to require that all Applicants; Works, Suppliers and Service Providers, observe the highest standards of ethics during procurement and the execution of contracts. In pursuit of this policy, Case Hospital represented by the management. (herein referred to as the evaluation committee):

- (a) Defines, for the purposes of this provision, the terms set forth below as follows:
  - (i) “corrupt practice” includes the offering, giving, receiving, or soliciting of anything of value to influence the action of a procuring entity’s official in the procurement process or in contract execution; and
  - (ii) “fraudulent practice” includes a misrepresentation of facts in order to influence a procurement process or the execution of a contract to the detriment of the Procuring and Disposing Entity, and includes collusive practices among Suppliers and Service Providers prior to or after bid submission designed to establish bid prices at artificial, non-competitive levels and to deprive the Procuring and Disposing Entity of the benefits of free and open competition;
- (b) will reject a recommendation for award if it determines that the Bidder recommended for award has engaged in corrupt or fraudulent practices in competing for the Contract; and

- (c) will suspend a Supplier or Service Provider from engaging in any Case Hospital procurement proceeding for a stated period of time, if at any time determines that the Supplier or Service Provider has engaged in corrupt or fraudulent practices in competing for, or in executing, the hospital's contract.

1.3.2 In pursuit of the policy, Case Hospital requires representatives of the Suppliers and Service Providers to adhere to the relevant codes of ethical conduct. The Code of Ethical Conduct for Suppliers and Service Providers is available from Case Hospital management team and Providers are required to indicate their acceptance of this code through the declarations in the **Application Submission Sheet**.

## **PART II: INSTRUCTIONS TO PROVIDERS**

### **2.1 Introduction**

Case Hospital will evaluate and short list all eligible companies for the provision of various works, services or supplies for the Financial Years 2017/2019. Once a firm has been short-listed, it will be invited, to submit a proposal/quotation for the provision of works, services or supplies for which they have been prequalified. Case Hospital reserves the right to add similar types of works, services or supplies to the list in **Appendix B**.

### **2.2 Objectives**

**Case Hospital invites sealed applications from reputable providers for the provision of works, services and supplies, for one Financial Year 2017/19.**

The list of items required during the above mentioned financial year is given in **Appendix B**.

### **2.3 Eligible Applicants**

2.3.1 An Applicant, and all parties constituting the Applicant, shall meet the following criteria to be eligible to participate.

- (a) the applicant has the legal capacity to enter into a contract;
- (b) the applicant is not:
  - (i) insolvent;
  - (ii) in receivership;
  - (iii) bankrupt; or
  - (iv) being wound up
- (c) the applicant's business activities have not been suspended;
- (d) the applicant is not the subject of legal proceedings for any of the circumstances in (b); and
- (e) The applicant has fulfilled his or her obligations to pay taxes.

2.3.2 An applicant shall be a natural person, private entity, subject to 2.3.9, or any combination of them with the formal intent to enter into an agreement or under an existing agreement in the form of a joint venture, consortium or association. In the case of a joint venture, consortium or association, unless otherwise specified in the **Application Submission Sheet**, all parties shall be jointly and severally liable.

2.3.3 An Applicant and all parties constituting the Applicant shall have the nationality of an eligible country. An Applicant shall be deemed to have the nationality of a country if the Applicant is a citizen, or is constituted, incorporated or registered and operates in conformity with the provisions of the laws of that country.

- 2.3.4 The criterion shall also apply to the determination of the nationality of proposed subcontractors or providers for any part of the Contract including related services.
- 2.3.5 Applicants shall not have a conflict of interest. All Applicants found to be in conflict of interest shall be disqualified. Applicants shall be considered to have a conflict of interest with one or more parties in this short listing process, if they:
- (a) have controlling shareholders in common; or
  - (b) receive or have received any direct or indirect subsidy from any of them; or
  - (c) have the same legal representative for purposes of this application; or
  - (d) have a relationship with each other, directly or through common third parties, that puts them in a position to have access to information about or influence on the application of another Applicant, or influence the decision of the Procuring and Disposing Entity regarding this short listing process; or
  - (e) Participated as a consultant in the preparation of the design or technical specifications of the works, services or supplies that are the subject of this short listing.
- 2.3.6 An applicant shall submit only one bid in the same bidding process, either individually as a Bidder or as a partner of a joint venture. No firm can be a subcontractor while submitting a bid individually or as a party of a joint venture in the same bidding process. An applicant, if acting in the capacity of Subcontractor in any bid, may participate in more than one bid, but only in that capacity. A Bidder who submits, or participates in, more than one bid will cause all the proposals in which the Bidder has participated to be disqualified.
- 2.3.7 An applicant that is under a declaration of suspension by Case Hospital management at the date of submission of the application or thereafter, shall be disqualified.

## **2.4 Cost of Applying**

The Applicant shall bear all costs associated with the preparation and submission of its application and Case Hospital will in no case be responsible or liable for those costs, regardless of the conduct or outcome of the short listing process.

## **2.5 Clarification of Short listing Documents**

A prospective Applicant requiring any clarification of the short listing documents may notify Case Hospital in writing at the client's address indicated below. Case Hospital will respond in writing to any request for clarification on the short listing documents, which it receives no later than seven (7) days prior to the deadline for the submission of Applications. Written copies of the Case Hospital response (including an explanation of the query but without identifying the source of inquiry) will be sent to all prospective applicants that have received the short listing documents.

For clarification purposes only, the Procuring and Disposing Entity's address is:

Attention: Procurement Unit  
Street Address: Plot 69/71, Buganda Road  
Town/City: Kampala  
Postal Code/ P.O. Box 4547  
Country: Uganda  
Telephone: 0414-250362/0312-250362  
Fax: 0414-345603  
Electronic mail address: [casemedcare@casemedcare.org](mailto:casemedcare@casemedcare.org)  
Website: [www.casemedcare.org](http://www.casemedcare.org)

## **2.6 Amendment of Short listing Document**

- 2.6.1 At any time prior to the deadline for submission of applications, Case Hospital may amend the Short listing Document by issuing addenda.
- 2.6.2 Any addendum issued shall be part of the Short listing Document and shall be communicated in writing to all who have obtained the short listing document from Case Hospital.
- 2.6.3 To give prospective applicants reasonable time to take an addendum into account in preparing their applications, Case Hospital may, at its discretion, extend the deadline for the submission of applications.

## **PART III: PREPARATION OF APPLICATIONS**

### **3.1 Language of Application**

The application prepared by the Applicant, as well as all correspondence and documents relating to the Application exchanged by the Applicant and Case Hospital shall be written in English. Supporting documents and printed literature provided by the Applicant may be in another language provided they are accompanied by an accurate translation of the relevant passages in English, in which case, for purposes of interpretation of the Application, the translation shall govern.

### **3.2 Documents Establishing Applicant's Eligibility and Qualifications**

The Applicant shall provide as part of its Application, the documentary evidence of the Applicant's legal status, financial, technical and production capability to provide the services if a contract is awarded in the format provided in the Application Submission Sheet (**Forms A1 – A7**). Failure to provide the required information shall result in disqualification.

### **3.3 Format and Signing of Applications**

3.3.1 The Applicant is requested to submit its Short listing Documents (included in Annex A) in one envelope marked: **“Short listing Documents for the provision of services or supplies to Case Hospital for the Financial Year 2017/19”** The envelope shall contain one (1) original and two (2) copies.

3.3.2 The original and the copies of the Application shall be typed or written in indelible ink, and shall be signed by the Applicant or a person or person(s) duly authorized to sign the short listing documents. All pages of the Application, except for un-mended printed literature, shall be initialed by the person or persons signing the Application and each page numbered.

3.3.3 Any interlineations, erasures, or overwriting shall be valid only if they are initialed by the person or persons signing the Application.

3.3.4 All Pages of the proposal **MUST** be numbered sequentially starting with page number one (1) being the cover page.

## **PART IV: SUBMISSION OF APPLICATIONS**

### **4.1 Sealing and Labeling of Applications**

4.1.1 The Short listing Application shall be composed of one envelope marked “Short listing Document for the provision of works, services or supplies”. It shall contain one (1) original (marked “Original”) and two (2) copies) marked “Copy”). Only hardcopies will be accepted.

4.1.2 For application submission purposes only, the Procuring and Disposing Entity’s address is:

Attention: PROCUREMENT UNIT  
Street Address: PLOT 69/71, BUGANDA ROAD  
Town/City: KAMPALA  
Postal Code: 4547  
Country: UGANDA  
Telephone: 0414-250362/0312-250362

4.1.3 The envelope shall also indicate the name and address of the Applicant to enable the Application to be returned unopened in case it is declared “late”.

4.1.4 If the envelope is not sealed and marked as required by clause 4.1, Case Hospital will assume no responsibility for the Applications misplacement or premature opening.

### **4.2 Deadline for Submission of Applications**

Date: 29<sup>th</sup> September 2017.  
Time (local time) 13:00 hours/ 3:00pm.

### **4.3 Late Applications**

Any Application received after the deadline for submission of Applications prescribed by Case Hospital will be rejected and returned unopened to the Applicant.

## **PART V: OPENING AND EVALUATION OF APPLICATIONS**

### **5.1 Opening of Applications by Case Hospital**

- 5.1.1 Case Hospital will read out Applicants' names in the presence of Applicants' representatives who choose to attend, on the **6<sup>th</sup> October, 2017 at 1.00pm**. The Applicants' representatives who are present shall sign a register as evidence for their attendance.
- 5.1.2 Case Hospital will prepare minutes for the Application opening.

### **5.2 Evaluation of Applications:**

- (a) Case Hospital will carry out the evaluation of proposals on the basis of their responsiveness to:
- Legal Status
  - Tax Payment if applicable
  - Financial Position – Presentation of copies of Audited reports for the last two years.
  - Specific evaluation criteria for each category will be conducted in accordance with the Case Hospital requirements.
- (b) Any application that fails to meet the requirements in 5.2 (a) will be considered unresponsive and shall be rejected at this stage. Case Hospital shall notify the applicant of the rejection of their application.

### **5.3 Clarification of Applications**

- 5.3.1 During evaluation of the applications, Case Hospital may, at its discretion, ask the Applicant for clarification of its application. A request for clarification shall be signed and sent to a bidder by Procurement Officer.
- 5.3.2 A bidder shall be instructed to reply to clarifications in writing within a specified time, addressing their responses to the Procurement Officer.
- 5.3.3 Failure of a bidder to respond to a request for clarification may result in the rejection of its bid.

#### **5.4 Contacting the Procuring and Disposing Entity**

- 5.4.1 No Applicant shall contact Case Hospital on any matter relating to its application from the time of Application opening to short listing of Applicants.
- 5.4.2 Any effort by the Applicant to influence Case Hospital in its decisions on the application evaluation may result in the rejection of the application.

#### **5.5 Confidentiality**

- 5.5.1 Information relating to the evaluation of applications, and recommendation for short listing, shall not be disclosed to Applicants or any other persons not officially concerned with such process until the notification of short listing is made to all Applicants.
- 5.5.2 From the deadline for submission of applications to the time of notification of the results of the short listing, any Applicant that wishes to contact the Procuring and Disposing Entity on any matter related to the short listing process, may do so but only in writing.

## **PART VI: SHORT LISTING**

### **6.1 Notification to the Short listed Applicants**

Case Hospital will notify all Applicants in writing by registered letter or by cable, that they have been short listed to provide services or supplies for the Financial Year.

### **6.2 Inspection**

Case Hospital reserves the right to conduct a physical inspection of the premises of the Applicant at its own cost and discretion. If, after the inspection, it is deemed that the physical structure and quality of service equipment is unsatisfactory, then the application will be rejected. Case Hospital reserves the right to verify all information submitted.

### **6.3 Currency**

All monetary/financial information furnished, must be quoted in Uganda Shillings.

### **6.4 Changes in Qualifications of Applicants**

- 6.4.1 Applicants and those subsequently short listed or conditionally short listed, shall inform Case Hospital of any material change in information that might affect their qualification status. Providers shall be required to update key short listing information at the time of bidding.
- 6.4.2 Prior to award of contract, the best evaluated bidder will be required to confirm its continued qualified status in a post-qualification review process.

**ANNEX A: FORM A1: APPLICATION SUBMISSION SHEET**

Date:

To:

We, the undersigned declare that:

- (a) We have examined and have no reservations to the short listing document, including Addenda No:
- (b) We hereby apply to be short listed for the following works, services or supplies.

Reference Number	Description of Works, Services or Supplies

- (c) We, including any subcontractors or providers for any part of the contract or contracts resulting from this short listing process, are eligible to participate in public procurement;
- (d) We undertake to abide by the Code of Ethical Conduct for Providers and Providers during the procurement process and the execution of any resulting contract;
- (e) We, including any subcontractors or providers for any part of the contract or contracts resulting from this short listing process, have nationals from the following eligible countries;
- (f) We, including any subcontractors or providers for any part of the contract or contracts resulting from this short listing process do not have any conflict of interest, and are not associated, nor have been associated in the past, directly or indirectly, with the consultant or any other entity that has prepared the design or technical specifications of the Supplies;
- (g) We, our affiliates or subsidiaries, including any subcontractors for any part of the contract or contracts resulting from this short listing process, have not been suspended by Case Hospital and from participating in the procurement.

- (i) We declare that the following commissions, gratuities, or fees have been paid or are to be paid with respect to the short listing process, the corresponding bidding process or execution of the Contract; *[insert complete name of each Recipient, their full address, the reason for which each commission or gratuity was paid and the amount and currency of each such commission or gratuity. If none has been paid or is to be paid, indicate "none"]*
- (j) We understand that you may amend the scope and value of any contracts to be bid or cancel the short listing process at any time and that you are neither bound to accept any application that you may receive nor to invite the short listed applicants to bid for the contract or contracts, which are the subject of this short listing, without incurring any liability to the Applicants;
- (k) We understand that qualification information will be subject to verification through a post-qualification process prior to any award of contract;
- (l) We hereby authorize you and your authorized representatives, to conduct any enquiries or investigations to verify the statements, documents and information submitted in connection with this application and to seek clarification from our bankers and clients regarding any financial and technical aspects. This Application Submission Sheet will also serve as authorization to any individual or authorized representative of any institution referred to in the supporting information to provide such information deemed necessary and as requested by yourselves to verify statements and information provided in this application.

Signed:.....

In the capacity of.....

Duly authorized to sign the application for and on behalf of .....

Dated on ..... of..... , .....

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**STRUCTURE AND ORGANIZATION**

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1. Name of Company:

Physical Address:

Postal address:

Telephone number:

Telefax number:

Email:

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2. Description of the company's activities:

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3. Number of years of experience in the provision of works, service or supplies under reference:

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4. In case of a Joint Venture, the following documentation shall be required for each member of the joint venture.

- a. a copy of the Bidder's Trading license or equivalent;
- b. a copy of the Bidder's Certificate of Registration or equivalent;
- c. a copy of the Bidder's income tax clearance certificate or equivalent;
- d. a copy of the Bidders VAT registration or equivalent;
- e. Power of Attorney of the signatory (ies) of the bid authorizing signature of the bid on behalf of the joint venture;

- f. a certified copy of the Joint Venture Agreement, which is legally binding on all partners, showing that all partners shall be jointly and severally liable and one of the partners will be nominated as being in charge, authorized to incur liabilities, and receive instructions for and on behalf of any and all partners of the joint venture.

The Applicant's authorized representative for information is:

Name:

Address:

Telephone/Fax numbers:

E-mail address:

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5. Describe your company's access from other sources (name the source companies) to works, services or supplies it does not carry out or does not have in stock, and the delivery schedule in these cases:

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6. What is the time schedule of providing and completing the works, services or supplies being applied for?

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7. Please indicate here or attach an organization chart showing the company structure including key personnel:

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8. What are the specific types of Medical/laboratory equipment that the company is certified to supply and work on? (e.g. equipment spare parts, maintenance, etc)

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9. Please indicate the additional works, services or supplies that the company can provide e.g. medical/laboratory equipment repairs, services, etc.

## FORM A3: FINANCIAL STATEMENT

1. Share capital:

- Authorized share capital

2. Annual value of business undertaken in the last three years

Year			
Turn over			

3. Approximate value of current work related to this type of works, services or supplies

4. Please attach copies of the company's audited accounts for the previous two years (profit/loss, assets/liabilities) and any financial data, which you consider to be useful in the short listing. Please list all the attachments below:

5. Name and address of Bankers from which references can be obtained and authority to seek references.

**FORM A: RESOURCES: PERSONNEL**

1. Number of staff:

- Management staff:
- Technical staff:
- Support staff:

2. Please list the present key personnel and management staff

<b>Name</b>	<b>Qualification</b>	<b>Years of relevant experience</b>

## ***FORM A5: RESOURCES: PROVIDERS EQUIPMENT AND FACILITIES***

On the basis of the information provided in the short listing documents, please indicate supplies, equipment and facilities considered by your firm to be necessary for undertaking the contract and whether this is already in the company's ownership or will be purchased.

The following facilities and infrastructure are available at the Applicants workshop.

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**FORM A6: EXPERIENCE: RELEVANT PROJECTS COMPLETED**

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Please fill in information about the relevant contracts completed over the past three years

<b>Name Employer</b>	<b>Description of Contracts</b>	<b>Total Contract Price</b>	<b>Date of Completion</b>

The applicant **MUST** attach evidence of performance of the above contracts either in the form of reference letters from the clients. This is applicable for both completed and current similar assignments.

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**EXPERIENCE: CURRENT RELEVANT CONTRACTS**

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Please fill in information about the current relevant contracts being executed

<b>Name Employer</b>	<b>Description of Contract</b>	<b>Contract Price</b>	<b>Value completed and certified</b>

<b>FORM A7: LEGAL STATUS</b>	
1.	Enclose a copy of the Memorandum and Articles of Association or its equivalent. A separate list of Directors/Partners/Proprietors should be attached. A joint venture agreement should be attached where applicable.
2.	Enclose a copy of the Certificate of Incorporation or its equivalent
3.	Enclose a copy of the Power of Attorney to the signatory of the short listing document registered by the Registrar of Companies or written authorization to submit the application
4.	Enclose an INCOME Tax Clearance Certificate addressed to Case Hospital, for this particular purpose. Case Hospital shall only accept original income tax clearance certificates. <ul style="list-style-type: none"> <li>• Enclose an Annual Tax Clearance certificate for the previous year.</li> <li>• Attach a copy of VAT Registration Certificate for Ugandans.</li> </ul>
5.	Please enclose a copy of a Trading License for the current year <b><u>certified</u></b> by an issuing authority
6.	Enclose a copy of your firm's insurance policy coverage, if any.
7.	Please enclose a copy of your firm's ISO or other quality assurance certificate, if any.

## ANNEX B: STATEMENT OF REQUIREMENTS

List and codes of works, services or supplies to be provided include but are not restricted to the following:

### SUPPLIES:

<b>Code</b>	<b>Item</b>
Sup/1001	Assorted Stationery
Sup/1002	Computers, printers, photocopiers, LCD projectors with their consumables and accessories.
Sup/1003	Office furniture and fittings
Sup/1004	Printing (Manuals, Brochures, Biz cards, T-shirts)
Sup/1005	Photocopying large scale
Sup/1006	Hospital equipment (laboratory and medical equipment)
Sup/1007	Medicines & sundries
Sup/1008	Motor vehicle tyres and other accessories
Sup/1009	Fuel, oils and lubricants

**SERVICES:**

<b>Code</b>	<b>Item</b>
Svc/2001	Internet service provider
Svc/2002	Website hosting and management
Svc/2003	Garage services for motor vehicles
Svc/2004	Maintenance and repair of computers, printers and photocopier
Svc/2005	Maintenance and repair of telephone
Svc/2006	Servicing of fire extinguishers
Svc/2007	Security services
Svc/2008	Courier services
Svc/2009	Fabrics & tailoring (staff uniforms, men's & ladies')
Svc/2010	Engraving
Svc/2011	Janitorial Services (Hospital/Office cleaning)
Svc/2012	Waste Disposal Services (Recyclable & Non-Recyclable Waste)

**WORKS:**

<b>Code</b>	<b>Item</b>
Wrks/3001	Minor Electrical works
Wrks/3002	Carpentry works
Wrks/3003	Metal Fabrication
Wrks/3004	Minor civil works (plumbing, painting & renovations)

### 3.3 **Site Visits:**

3.3.1 The Case Hospital Procurement Committee will nominate a Site Inspection Team to make a physical check-up of the recommended firms by the Evaluation Team. The following will be the key issues to be considered;

- a) Accessibility of the Firm, by motor vehicles etc.
- b) Inventory levels of the items the firm intends to supply where feasible. Evidence of holding stocks in the last three months.
- c) Confirmation of availability and functioning of the communication facilities

3.3.2 Assessment will be based on Pass/Fail basis

3.3.3 In case of Medical Supplies, potential providers shall be subjected to inspection by Chief/Senior pharmacist.

3.3.4 Failure to satisfy the Site inspection requirements shall lead to the disqualification of the firm from the shortlist.