LEGAL NOTICE NO. 210

THE PUBLIC PROCUREMENT AND DISPOSAL ACT

(No. 3 of 2005)

IN EXERCISE of the powers conferred by section 140 of the Public Procurement and Disposal Act, 2005, the Cabinet Secretary to the National Treasury makes the following Regulations-

THE PUBLIC PROCUREMENT AND DISPOSAL (PREFERENCE AND RESERVATIONS) (AMENDMENT) REGULATIONS, 2013

1. These Regulations may be cited as the Public Procurement and Disposal (Preference and Reservations) (Amendment No. 2) Regulations, 2013.

2. Regulation 31 of the Public Procurement and Disposal (Preference and Reservations) Regulations, 2011, in these Regulations referred to as "the principal Regulations", is amended by deleting paragraph(1) and substituting therefor the following new paragraph-

(1) A procuring entity shall allocate at least thirty percent of its procurement spend for purposes of procuring goods, works or services from enterprises owned by youth, women or persons with disability.

3. The principal Regulations are amended by deleting the First Schedule and substituting therefor the following new Schedule-

FIRST SCHEDULE (r.6)

APPLICATION FORM FOR ENTERPRISES OWNED BY YOUTH, WOMEN, OR PERSONS WITH DISABILITY AND SMALL, MICRO ENTERPRISES TO SUPPLY GOODS, WORKS OR SERVICES TO PROCURING ENTITIES

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 the Applicant: ........................................................................................................................................
2. Physical Address/Business Location: ......................................................................................................................
3. Postal Address: ........................................................................................................................................................
4. Postal Code: ............................................................................................................................................................
5. County ......................................................................................................................................................................
6. Constituency..............................................................................................................................................................
7. E-mail: .......................................................................................................................................................................

8. Mobile Phone No.: .................................................................
9. Landline No.: .................................................................
10. Fax No: ...........................................................................
11. Name of Contact Person: ..................................................
12. Type of Ownership Details: ..............................................

<table>
<thead>
<tr>
<th>Part 12(1) (Compulsory)</th>
<th>Overview of the Enterprise</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(Please tick one as appropriate)</td>
</tr>
<tr>
<td>Type of ownership</td>
<td>Sole Proprietor</td>
</tr>
<tr>
<td></td>
<td>Partnership</td>
</tr>
<tr>
<td></td>
<td>Limited Company</td>
</tr>
<tr>
<td></td>
<td>Co-operative Society</td>
</tr>
<tr>
<td></td>
<td>Others (Specify)</td>
</tr>
</tbody>
</table>

(Fill only one table relevant to your ownership details (i.e. a, b, c or d). Cancel inapplicable table)

Part 12 (2)(a) – Sole Proprietor

<table>
<thead>
<tr>
<th>Name in Full</th>
<th>Identity/Passport No.</th>
<th>Age</th>
<th>Sex</th>
</tr>
</thead>
</table>

Date of incorporation/registration.................................................................
Certificate of Incorporation/Registration No.

Part 12(2) (b) – Partnership Details

<table>
<thead>
<tr>
<th>No.</th>
<th>Name</th>
<th>Gender</th>
<th>Nationality</th>
<th>ID/Passport No.</th>
<th>% Shares</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>
13. Target Groups

(Fill only one table relevant to your target group i.e. (1) or (2). Cancel inapplicable table)

### Part 13(1) – Small and Micro Enterprises (SMEs)

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Range</th>
<th>Target Group (Please tick one as appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of employees</td>
<td>0 – 10</td>
<td>(Micro)</td>
</tr>
<tr>
<td></td>
<td>11-50</td>
<td>(Small)</td>
</tr>
<tr>
<td>Initial Investments/ Total Annual Sales (Turnover) (KES)</td>
<td>0-500,000</td>
<td>(Micro)</td>
</tr>
<tr>
<td></td>
<td>500,000–5,000,000</td>
<td>(Small)</td>
</tr>
</tbody>
</table>

### Part 13(2) – Disadvantaged Group such as enterprises owned by Youth, Women or Persons With Disability (NB: the thresholds for SMEs on Number of employees, Initial Investments or Total Annual Sales (Turnover) are not applicable to these disadvantaged groups)

<table>
<thead>
<tr>
<th>Category of Disadvantaged Group</th>
<th>Target Group</th>
<th>(Please tick one as appropriate)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Women</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Persons with disability</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

14. Bank Account Name: ...........................................................................................................
15. Branch of the Bank: .................................................................
16. Bank Account Number: ..........................................................
17. Bank SWIFT Code ................................................................
18. VAT Registration Number: .....................................................
19. PIN Number ........................................................................
20. Type of business: (tick as appropriate)

<table>
<thead>
<tr>
<th>CATEGORY OF BUSINESS</th>
<th>DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>GOODS</td>
<td>Stationery, Computer Accessories, Furniture, Agricultural commodities, foods stuffs, Supply of medicines, etc.</td>
</tr>
<tr>
<td>SERVICES</td>
<td>Conference and accommodation, Transport, Consulting, Web design, cleaning services, software development, etc.</td>
</tr>
<tr>
<td>WORKS</td>
<td>County roads, Building markets, Construction of dams/shallow wells, Water supply and sanitation, etc.</td>
</tr>
</tbody>
</table>

21. Prepared by (full name in capital letters): .................................................................
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 will be rejected:

1. Copy of certificate of incorporation/registration;
2. Tax PIN Certificate;
3. Valid Tax Compliance Certificate;
4. Original Bank Statement/Bank reference of not more than six months old from date of applying;
5. Copy of certificate of registration with relevant regulatory bodies;
6. Business/Company profile;
7. Evidence of having paid the non-refundable fee for the Application Form;
8. Copies of Annual Return Forms, filed by Limited Companies, the Business Names for business names (sole trader and partnerships), and a stamped receipt which bears the Accounts Stamp from the Registrar of Companies/Societies; and
9. Annual Return Status Report from Registration Office

4. The principal Regulations are amended by deleting the Second Schedule and substituting therefor the following new Schedule-
SECOND SCHEDULE  (r.22)
Tender-Securing Declaration Form
[The Bidder shall fill in this Form in accordance with the instructions indicated.]

Date: [insert date (as day, month and year) of Tender Submission]
Tender No.: [insert number of tendering process]
To: [insert complete name of Tenderer]

We, the undersigned, declare that:

1. We understand that, according to your conditions, tenders must be supported by a Tender-Securing Declaration.

2. We accept that we will automatically be suspended from being eligible for tendering in any public procurement proceeding for the period of time of not less than five years, if we are in breach of our obligation(s) under the tender conditions, because we:-

(a) have withdrawn our Tender during the period of tender validity specified by us in the Tender Data Sheet; or

(b) having been notified of the acceptance of our Tender by the Procuring Entity during the period of tender validity,

(i) fail or refuse to execute the resultant Contract, if required, or

(ii) fail or refuse to furnish the Performance Security, in accordance with the Instructions To Tenderers.

3. We understand this Tender Securing Declaration shall expire if we are not the successful Tenderer, upon thirty days after the expiration of our Tender validity period.

4. We understand that if we are a Joint Venture, the Tender Securing Declaration must be in the name of the Joint Venture that submits the bid. If the Joint Venture has not been legally constituted at the time of bidding, the Tender Securing Declaration shall be in the names of all future partners as named in the letter of intent.

Signed: [insert signature of person whose name and capacity are shown] In the capacity of [insert legal capacity of person signing the Tender Securing Declaration]

Name: [insert complete name of person signing the Tender Securing Declaration]

Duly authorized to sign the tender for and on behalf of: [insert complete name of Tenderer]

Dated on the _________ day of ______________, ______ [insert date of signing]

Dated on the 4th November, 2013.

HENRY ROTICH,
Cabinet Secretary for
the National Treasury.