

PREQUALIFICATION FORM

TAMBACH TEACHERS COLLEGE,

P.O PRIVATE BAG,

TAMBACH.

TEL.0727705244

CONTRACTORS/SUPPLIERS DETAILS :(All fields must be filled)

COMPANY'S FULL NAME (AS IT IS REGISTERED):

.....

COMPANY'S REGISTRATION NO;.....

COMPANY'S PIN NO:.....

AREA(S) OF SPECIALIZATION:.....

NCA CATEGORY (FOR CONSTRUCTION COMPANIES ONLY).....

OFFICE PHYSICAL LOCATION(S).....

STREET.....

COUNTY.....

SUB-COUNTY.....

PO.BOX ADDRESS.....

TEL. NO.

E-MAIL ADDRESS:.....

CONTACT PERSON NAME.....

SPECIAL GROUP CERTIFICATE NO. (IF APPLICABLE).....

CATEGORY: 1. YOUTH.....2. WOMEN.....3. PWD.....

BANK DETAILS:

BANK NAME:.....

BRANCH NAME:.....

A/C NO:.....

A/C NAME:.....

SIGN:.....**STAMP**.....

ATTACH: COPIES OF VALID TAX COMPLIANCE CERTIFICATE, KRA PIN CERTIFICATE, AGPO CERTIFICATE (if applicable), BUSINESS PERMIT AND ANY OTHER DOCUMENT RELEVANT TO YOUR AREA OF SPECIALIZATION.