



Christian Health Association of Lesotho

P.O. Box 1632, Maseru 100, Lesotho

Telephone: +266 2231 2500, Fax: +266 2231 0314

E-mail: ed@chal.org.ls Website: www.chal.org.ls

TENDER FOR VEHICLE HIRE

The Christian Health Association of Lesotho (CHAL) wishes to invite bids from suppliers to provide 4x4 double cab vehicles for hire. A total of 5 vehicles (1 per district) in Botha Bothe, Mokhotlong, Thaba Tseka, Qacha's Nek and Quthing will be engaged for a period not exceeding 2 months. All vehicles should be registered in Lesotho and ready for use immediately when an award is made.

Vehicle Specifications:

1. 4*4 Double Cab vehicle with the following accessories;
 - ✓ Canopy
 - ✓ Roll bar
 - ✓ Tow bar
 - ✓ Side Steps
 - ✓ Active Service Plan
 - ✓ Radio

Requirements:

1. Vehicle model should be for the year 2020
2. A fully paid-up business insurance cover - valid certified copy of insurance cover for the vehicle (certified at source)
3. Mileage should NOT be more than 40 000km
4. Proof of ownership and/or vehicle registration certificate/blue card
5. A valid certified copy of owner's identification document
6. A valid copy of Tax Clearance Certificate (certified at source)
7. A valid copy of Trader's License (certified at source).
8. An accident free driver with at least five (5) years driving experience – Proof of driver's license.
9. The owner will be responsible for the fuel and lubricants and maintenance needs for such a vehicle.

Evaluation of Bids.

- (a) Evaluation of bids submitted pursuant to this IFB will be carried out by CHAL.
- (b) In evaluating bids, CHAL will seek the most advantageous bid.
- (c) The evaluation factors/requirements will include:
 - Competitive Pricing.
 - Financial Capabilities (3 months' bank statement and / or Past financial year audited statements.)
 - Business Experience (In Supply of Vehicles)
 - Proof of Business Physical Address (Not letter head of the bidder)
 - Valid Copy of Traders License Certified from Source
 - Valid Copy of Tax Clearance Certificate Certified from Source
 - Delivery time line



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- References of 3 or more companies that services have been offered to.
- For bidders coming from the five referenced project districts, it will be an added advantage.

Evaluation Method.

The evaluation will be done considering the criteria specified above and percentages will be allocated to each criterion.

- (i) The most preferred bid must be able to satisfy and meet 80% of all the evaluation factors/requirements above.
- (ii) The total score will be the result of adding the points earned in pricing plus the points earned in other specific criteria.
- (iii) The offer with the maximum score will be awarded with the contract.

Instructions for submission of bids

- ❖ A bid form (available @ www.chal.org.ls/jobs) should be duly filled.
- ❖ Bids with all supporting documents bearing no identification of the bidders should be submitted in a sealed envelope marked **Vehicle Hire**.
- ❖ Bids should be hand delivered to CHAL offices at Constitution Road, Opposite LNIG on or before 9th March 2020 at 16:00 hours
- ❖ Submissions should be addressed to:
HR and Administration Manager
Christian Health Association of Lesotho
P.O. Box 1632
Maseru

For enquiries:

All enquiries should be addressed to ed@chal.org.ls not later than 4th March 2020

Disclaimer

- CHAL is not bound to accept the lowest or any bid and reserves the right to accept any bid in whole or in part and to reject any or all bids without assigning any reason therefore and to Contract on any of the terms offered or on different terms.
- Circumstances in which rejection of all bids may occur include, without limitation, the following: (1) none of the bids is adequately responsive to the specifications, (2) there is evidence of insufficient competition, (3) the lowest bid exceeds the estimated value or funds available by a significant amount and cannot be reduced by negotiation, or (4) the specific donor funding designated for the award is not approved or received from the donor.
- CHAL may reject any bid that is not substantially responsive to the terms and conditions in this bid.



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VEHICLE HIRE BID FORM

NAMES:	
NATIONAL ID NUMBER:	
COMPANY REGISTRATION:	
PASSPORT NUMBER:	
NATIONALITY:	
POSTAL ADDRESS:	
PHYSICAL ADDRESS:	
CELL NUMBER:	
OTHER CONTACTS NUMBERS:	
DISTRICT:	
VEHICLE DETAILS	
ENGINE NUMBER:	
CHASSIS NUMBER:	
REGISTRATION NUMBER:	
MAKE, e.g Toyota twin cab,	



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MODEL	
MANUFACTURE YEAR:	
BODY TYPE:	
EXTERIOR COLOUR:	
KILOMETRES COVERED:	
ENGINE CAPACITY:	
TRANSMISSION:	
FUEL TYPE:	
NUMBER OF SEATS:	
DRIVER DETAILS	
NAMES:	
IDENTITY NUMBER:	
DRIVERS LICENSE NUMBER:	
BID PRICE	
STANDING CHARGE	
CHARGE PER KILOMETER	
ADDITIONAL COSTS	
TOTAL BID PRICE:	

DECLARATION:

I hereby confirm that information in the above form is true to the best of my knowledge and understand that I will be disqualified upon misinformation and misrepresentation.

FULL NAMES: _____

SIGNATURE: _____

DATE: _____