



**KENVERSITY COOPERATIVE
SAVINGS AND CREDIT SOCIETY LIMITED**

**P.O. BOX 10263 – 00100
NAIROBI.**

TELEPHONE: 020 8002371/2, 0715 114454

**EMAIL: info@kenversitysacco.co.ke
Website: www.kenversitysacco.co.ke**

TENDER DOCUMENT FOR INSURANCE SERVICES

STAFF MEDICAL SCHEME

KENV/TNDR/SMS/2025

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FORM OF TENDER

TENDER/INSURANCE 2025

RE: TENDER FOR PROVISION OF STAFF MEDICAL INSURANCE SERVICES 2025.

In accordance with Tender for provision of insurance services received from Kenversity Cooperative Savings and Credit Society Limited. I/Wehereby tender for this service in accordance with the attached tender forms/conditions of tender/ schedule of requirements at the price/fee/charge against each item and in conformity with the scheduled delivery arrangements stated. This applies to item category no: only in the schedule representing a total amount of (premium sum) Kshs.....tendered for.

I/We understand the Society reserves the right to accept or reject this tender in part or whole for any reason it considers justifiable and is not obligated to disclose such reason.

I/We agree that terms of this tender will remain valid for and will not be withdrawn for a period of 90 days from the final date for submission of tender.



CONDITIONS OF TENDERING

Serial No.

Miscellaneous Receipt No.

Date of Receipt

Amount in Kshs..

1. DEFINATIONS

The Tenderer is the person; agency of firm of contractor's who/which undertakes to supply the goods/services described in the tender documents.

The signatory must be a recognized official of the company and be authorized to sign on its behalf.

2. DOCUMENTS

2.1 The tender will receive a miscellaneous receipt of payment for tender documents. These include the following forms in duplicate:

- (i) **Form of tender**
- (ii) **Conditions of tendering**
- (iii) **Confidential business questionnaire,**

The Tenderer should retain one set for his records and return the other set in accordance with these conditions.

2.2.1 The Tenderer is required to check the number of pages of the document accompanying the **form of Tender**. Should any be missing or any figure indistinct, or should there be doubt about the precise meaning of any item or figure for any reason whatsoever he/she must inform the tender issuing officer at once and have the matter rectified as required before the final date for submission of tenders.

2.2.2 The Tenderer's signature to all documents shall indicate that he/she fully understands their contents and that he/she accepts all the conditions stated or applied therein.

3. SUBMISSION OF TENDERS

3.1.1 Attention is invited to the tender notice. The complete tender documents must be submitted to the address shown on the form of tender in a sealed plain envelope endorsed on the out cover

with **Tender for provision of insurance services with tender number as above** .
Indication of Tenderer's named/mark should not appear on the envelope.

- 3.1.2 The form of tender must be properly signed in ink, dated and must accompany any other documents concerned with the tender.
- 3.1.3 The tender will not be accepted unless correctly submitted on the approved forms. Tenders for which the appropriate fee has not been paid will not be considered valid. Tender to be deposited in the Tender box at the **Kenversity Office** not later than the appointed time and date.

4. COMMUNICATION

- 4.1.1 There shall be no verbal variations in regard to a tender once submitted. Should an error be made it may be corrected in writing before the closing date.
- 4.1.2 All correspondence with the Tenderers will be sent to the address shown on the form of tender by post.

5. LIABILITY

No liability will be admitted nor claim allowed for error in the tender owing to mistakes in those documents, which should have been rectified in the manner, described above.

6. ACCEPTANCE

The society reserves the right to accept or reject any tender either wholly or in part and is not bound to accept the lowest or any tender or to give reason for rejection.

7. SUCCESSFUL TENDERERS

A letter of acceptance will be sent to the successful Tenderer in respect of the whole or that part of tender, which has been accepted within a validity period of 90 days.

COMPLIANCE WITH GIVEN CONDITIONS

CURRENT TRADE LICENCE NO. _____ EXP. DATE: _____

V.A.T. REG. NO. _____

PIN NUMBER: _____

NAME OF YOUR AUDITORS: _____

OTHER GOVERNMENT STATUS: _____

COPY OF CURRENT LICENSE FROM COMMISSIONER OF INSURANCE.

BROKERS MUST ATTATCH COPY OF THE CURRENT MEMBERSHIP CERTIFICATE.

BID BOND 10% OF PREMIUM FROM REPUTABLE BANK

REFEREE:

NAME OF COMPANY:.....

ADDRESS:.....

CONTACT PERSON:.....

SIGNATURE:..... DATE:.....

COMPANY STAMP

If a Tenderer does not comply in anyway with these conditions where necessary, the tender shall be liable to rejection.

Tenderer's name ----- witness name -----

Address -----Address -----

Signature -----Signature -----

Date ----- Date -----

CONFIDENTIAL BUSINESS QUESTIONNAIRE

You are requested to give particulars indicated in Part I and either part 2 (a) 2 (b) 2 (c) whichever is applicable in your type of business. You are advised that false information/particulars will result in automatic disqualification and render the tender void.

Part 1 – General

Business Name -----

Location of business premises -----

Plots number -----Street/Road-----

Postal Address -----

Telephone number -----

Nature of business -----

Registration number -----

Trade license Number ----- Date of Expiry -----

Maximum value of Business you can handle Kshs -----

Name of your bankers -----

Branch/address -----

Part 2 (a) – Sole Proprietor:-

Your name in full ----- Age -----

Nationality ----- Country of origin -----

Citizenship details -----

Part 2 (b) Partnership:-

Give details of partners as follows:-

Name	Citizenship details	shares
1. -----	-----	-----
2. -----	-----	-----
3. -----	-----	-----
4. -----	-----	-----

Part 2 (c) Registered company

Private or Public -----

State the normal and issued capital of the company:

Normal Kshs.....

Issued Kshs.....

Details of the Directors:-

Name	Nationality/citizenship	Shares
1. -----	-----	-----
2. -----	-----	-----
3. -----	-----	-----

Date: ----- Signature of Tenderer -----

Official stamp -----

If Kenyan citizen, indicate under "citizenship Details " whether by birth, nationalization or registration.

In the event of this tender being accepted in part or in full within the stipulated 90 days, I/We agree to supply against an order signed by an authorized officer of the Society and failure to do so will constitute breach of contract.

Tenderer's Name ----- Witnessed by -----

Tenderer's Signature ----- Address -----

Designation ----- Signature -----

Full address ----- Date -----

Telephone Number -----

E/Mail -----

Fax -----

Date -----

Official stamp/seal.

Tenderer's name in full ----- Signature -----

Address -----

Telephone number -----

Proprietor (s) -----

Are you a Kenyan, if not, state your Nationality -----

State whether limited company or partnership -----

Name and address of your bankers -----

Bankers certificate on the Tenderer's Liquidity, suitability, and credit limitation -----

Bankers signatory – Manager/Accountant ----- Date -----

Banker's official stamp -----

Tenderer (s) Locality –..... Road/Street -----

Plot No. -----

Name of the Building ----- Door No. -----

Company Rubberstamp ----- Date -----

Complete all spaces as appropriate".



BID SECURITY

TENDER: PROVISION OF STAFF MEDICAL INSURANCE SERVICES FOR YEAR 2025

1. Security bond executed on -----
2. In the penal sum Kshs. -----amount in words ----- being 10% of the items bided.
3. Tenderer/bidder-----
4. Security for Tenderer/bidder -----
5. Date of closing of Tender -----
6. We the Tenderers and the surety above named are held firmly bound to pay Kenversity Cooperative Savings and Credit Society Limited the penal sum stated above and hereby bind ourselves, our heirs, executors, administrators, successors and assignees, jointly and severally there to.
7. WHEREAS the Tenderer has submitted the accompanying bid dated as shown above for provision of insurance services.
8. NOW THEREFORE, the condition of this obligation is such that, if the Tenderer shall not withdraw the bid within the period therein stipulated and, if the Bid within the period of 14 days after the prescribed forms are presented to him for signature, execute such further contractual documents as may be required by the terms of Bid and give bond with good and sufficient surety for the faithful performance and proper fulfillment of the resulting contract, then this obligation shall be void and of no effect, but otherwise, shall remain in full force and effect.
9. The Tenderer shall bring any claim against the surety not later than 14 days after the default.
10. Executed on the date indicated above, by the following representatives of the parties heretofore hereunto duly authorized:

FOR TENDERER

FOR SURETY

(Name & Title)

(Name & Title)

(Signature)

(Signature)

Witness:

1. ----- Sign ----- Date -----

TENDER FOR PROVISION OF STAFF MEDICAL INSURANCE FOR THE PERIOD 2025.

CLASS OF POLICY	COVER	<u>SCHEME BENEFITS.</u>	<u>ITEM INSURED</u>	PREMIUM QUOTED KSHS	REMARKS
Staff Medical Scheme	<ul style="list-style-type: none"> • 191 total population i.e Principal Members and dependents • List as attached for details of principal and dependents. 	<ul style="list-style-type: none"> • Accident hospitalization per person per year as specified limits. • Illness hospitalization per person per year as per specified limits (Stand-alone). • Maternity up to Ksh.150,000/- per year. (Stand-alone) • Dental Cover Kshs.40,000/- per family (stand-alone) • Optical cover up to Kshs.40,000/- Per family (stand-alone) • MCH/Family planning; Health Education/Counselling • Funeral expenses limited to Kshs.50,000/- per each person (both principal their dependents) • Chronic/Terminal disease and illness inclusive e.g Cancer and HIV Aids • Covid-19 Pandemic (Testing, Treatment and medications). 	In-Patient Out-Patient Dental Optical (as per attached list and limits).		

COMPANY NAME:

PHYSICAL ADDRESS:

TELEPHONE NO.

EMAIL ADDRESS:

CONTACT PERSON:

NO.	NAME	PRINCIPAL PLUS DEPENDENTS	MEDICAL GROUP	OUTPATIENT COVER LIMIT	IN-PATIENT COVER LIMIT FOR ACCIDENT AND ILLNESS HOSPITALIZATION PER FAMILY	MATERNITY COVER (STAND ALONE)	OPTICAL COVER PER FAMILY	DENTAL COVER PER FAMILY
1	PRINCIPAL MEMBER 1	1	A	230,000	1,100,000	150,000	40,000	40,000
2	PRINCIPAL MEMBER 2	1	A	230,000	1,100,000	150,000	40,000	40,000
3	PRINCIPAL MEMBER 3	1	A	230,000	1,100,000	150,000	40,000	40,000
4	PRINCIPAL MEMBER 4	1	A	230,000	1,100,000	150,000	40,000	40,000
5	PRINCIPAL MEMBER 5	1	A	230,000	1,100,000	150,000	40,000	40,000
6	PRINCIPAL MEMBER 6	1	A	230,000	1,100,000	150,000	40,000	40,000
7	PRINCIPAL MEMBER 7	1	A	230,000	1,100,000	150,000	40,000	40,000
8	PRINCIPAL MEMBER 8	1	A	230,000	1,100,000	150,000	40,000	40,000
9	PRINCIPAL MEMBER 9	1	A	230,000	1,100,000	150,000	40,000	40,000
10	PRINCIPAL MEMBER 10	1	A	230,000	1,100,000	150,000	40,000	40,000
11	PRINCIPAL MEMBER 11	1	A	230,000	1,100,000	150,000	40,000	40,000
12	PRINCIPAL MEMBER 12	1	A	230,000	1,100,000	150,000	40,000	40,000
13	PRINCIPAL MEMBER 13	5	A	230,000	1,100,000	150,000	40,000	40,000
14	PRINCIPAL MEMBER 14	6	A	230,000	1,100,000	150,000	40,000	40,000
15	PRINCIPAL MEMBER 15	2	A	230,000	1,100,000	150,000	40,000	40,000
16	PRINCIPAL MEMBER 16	2	A	230,000	1,100,000	150,000	40,000	40,000
17	PRINCIPAL MEMBER 17	4	B	220,000	800,000	150,000	40,000	40,000
18	PRINCIPAL MEMBER 18	2	B	220,000	800,000	150,000	40,000	40,000
19	PRINCIPAL MEMBER 19	5	B	220,000	800,000	150,000	40,000	40,000
20	PRINCIPAL MEMBER 20	3	B	220,000	800,000	150,000	40,000	40,000
21	PRINCIPAL MEMBER 21	2	B	220,000	800,000	150,000	40,000	40,000
22	PRINCIPAL MEMBER 22	5	B	220,000	800,000	150,000	40,000	40,000
23	PRINCIPAL MEMBER 23	6	B	220,000	800,000	150,000	40,000	40,000
24	PRINCIPAL MEMBER 24	3	B	220,000	800,000	150,000	40,000	40,000
25	PRINCIPAL MEMBER 25	6	B	220,000	800,000	150,000	40,000	40,000
26	PRINCIPAL MEMBER 26	6	C	160,000	650,000	150,000	40,000	40,000
27	PRINCIPAL MEMBER 27	3	C	160,000	650,000	150,000	40,000	40,000
28	PRINCIPAL MEMBER 28	6	C	160,000	650,000	150,000	40,000	40,000
29	PRINCIPAL MEMBER 29	6	C	160,000	650,000	150,000	40,000	40,000
30	PRINCIPAL MEMBER 30	3	C	160,000	650,000	150,000	40,000	40,000
31	PRINCIPAL MEMBER 31	5	C	160,000	650,000	150,000	40,000	40,000
32	PRINCIPAL MEMBER 32	4	C	160,000	650,000	150,000	40,000	40,000
33	PRINCIPAL MEMBER 33	1	C	160,000	650,000	150,000	40,000	40,000
34	PRINCIPAL MEMBER 34	4	C	160,000	650,000	150,000	40,000	40,000
35	PRINCIPAL MEMBER 35	5	C	160,000	650,000	150,000	40,000	40,000
36	PRINCIPAL MEMBER 36	6	C	160,000	650,000	150,000	40,000	40,000
37	PRINCIPAL MEMBER 37	5	C	160,000	650,000	150,000	40,000	40,000
38	PRINCIPAL MEMBER 38	7	C	160,000	650,000	150,000	40,000	40,000
39	PRINCIPAL MEMBER 39	4	C	160,000	650,000	150,000	40,000	40,000
40	PRINCIPAL MEMBER 40	3	C	160,000	650,000	150,000	40,000	40,000
41	PRINCIPAL MEMBER 41	5	D	150,000	600,000	150,000	40,000	40,000
42	PRINCIPAL MEMBER 42	5	D	150,000	600,000	150,000	40,000	40,000
43	PRINCIPAL MEMBER 43	1	D	150,000	600,000	150,000	40,000	40,000

44	PRINCIPAL MEMBER 44	3	D	150,000	600,000	150,000	40,000	40,000
45	PRINCIPAL MEMBER 45	3	D	150,000	600,000	150,000	40,000	40,000
46	PRINCIPAL MEMBER 46	6	D	150,000	600,000	150,000	40,000	40,000
47	PRINCIPAL MEMBER 47	5	D	150,000	600,000	150,000	40,000	40,000
48	PRINCIPAL MEMBER 48	2	D	150,000	600,000	150,000	40,000	40,000
49	PRINCIPAL MEMBER 49	2	D	150,000	600,000	150,000	40,000	40,000
50	PRINCIPAL MEMBER 50	2	D	150,000	600,000	150,000	40,000	40,000
51	PRINCIPAL MEMBER 51	2	D	150,000	600,000	150,000	40,000	40,000
52	PRINCIPAL MEMBER 52	2	D	150,000	600,000	150,000	40,000	40,000
53	PRINCIPAL MEMBER 53	3	D	150,000	600,000	150,000	40,000	40,000
54	PRINCIPAL MEMBER 54	1	D	150,000	600,000	150,000	40,000	40,000
55	PRINCIPAL MEMBER 55	5	D	150,000	600,000	150,000	40,000	40,000
56	PRINCIPAL MEMBER 56	1	D	150,000	600,000	150,000	40,000	40,000
57	PRINCIPAL MEMBER 57	2	D	150,000	600,000	150,000	40,000	40,000
58	PRINCIPAL MEMBER 58	1	D	150,000	600,000	150,000	40,000	40,000
59	PRINCIPAL MEMBER 59	1	D	150,000	600,000	150,000	40,000	40,000
60	PRINCIPAL MEMBER 60	4	D	150,000	600,000	150,000	40,000	40,000
61	PRINCIPAL MEMBER 61	1	D	150,000	600,000	150,000	40,000	40,000
62	PRINCIPAL MEMBER 62	1	D	150,000	600,000	150,000	40,000	40,000
63	PRINCIPAL MEMBER 63	2	D	150,000	600,000	150,000	40,000	40,000
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THE FOLLOWING IS A LIST OF ITEMS/ INFORMATION THAT THE TENDERER MUST PROVIDE AS ATTACHMENTS TO THE TENDER DOCUMENTS. THIS INFORMATION WILL FORM PART OF THE TENDER EVALUATION FOR THE TENDERERS.

1. Company profile (company history, contacts, services, affiliations, certified copies of original documents defining constitutional or legal status, principal place of doing business of the company/ firm including valid business licenses)
2. Certificate of incorporation.
3. A valid tax compliance certificate or equivalent.
4. Provide details of three similar projects/ works with contact persons, undertaken under the area of the tender's interest in the last five (5) years.
5. In each of the projects in 4 above, provide reference letters from the firms/ organizations confirming the items/ goods/ services supplied and the performance.
6. Demonstration of financial capability in carrying out the project by submitting audited account for the last three years.
7. Demonstration of a proposed methodology, plan and schedule of implementation of the activity of interest.

TENDER FOR SUPPLIES AND SERVICE PROVISION FOR YEAR 2025

Kenversity Savings and Credit Co-operative Society Limited invites interested and eligible suppliers for supply and service provision for the year 2025 as follows:-

NO	CATEGORY NO.	DESCRIPTION	BIDDER CATEGORY
TENDERS			
1	KENV/TNDR/PR/2025	PRINTING	ALL BIDDERS
2.	KENV/TNDR/SMS/2025	STAFF MEDICAL SCHEME	ALL BIDDERS
3	KENV/TNDR/FFE/2025	SUPPLY AND SERVICING OF FIRE FIGHTING EQUIPMENT (Must meet requirements of OSHA)	ALL BIDDERS
4	KENV/TNDR/PM/2025	PROFESSIONAL DESIGNERS OF ARTWORK, BRANDING AND SUPPLY OF PROMOTIONAL MATERIALS.	SPECIAL GROUPS
5	KENV/TNDR/SS/2025	SECURITY AND GUARDING SERVICES	ALL BIDDERS
6	KENV/TNDR/BFP/2025	FIRE, BURGLARY AND PERIL INSURANCE	ALL BIDDERS
7	KENV/TNDR/CIT/2025	CASH IN TRANSIT SERVICES	ALL BIDDERS
8	KENV/TNDR/LG/2025	GROUP CREDITORS INSURANCE	ALL BIDDERS
9	KENV/TNDR/GL/2025	GROUP LIFE INSURANCE	ALL BIDDERS
10	KENV/TNDR/MP/2025	MONEY POLICY	ALL BIDDERS
11	KENV/TNDR/FG/2025	FIDELITY GUARANTEE INSURANCE	ALL BIDDERS
12	KENV/TNDR/TCP/2025	INSURANCE FOR TERRORISM, NATURAL CALAMITIES AND POLITICAL VIOLENCE	ALL BIDDERS
13	KENV/TNDR/SNS/2025	SANITARY SERVICES	ALL BIDDERS
14	KENV/TNDR/CS/2025	CLEANING SERVICES (EXTERIOR GLASS WALLS)	ALL BIDDERS
15	KENV/TNDR/DCS/2025	DEBT COLLECTION SERVICES	ALL BIDDERS
16	KENV/TNDR/AUCT/2025	AUCTIONEERING SERVICES	ALL BIDDERS
17	KENV/TNDR/DW/2025	SUPPLY OF CLEAN DRINKING WATER	SPECIAL GROUPS
18	KENV/TNDR/EAS/2025	PROVISION FOR EXTERNAL AUDIT SERVICES	ALL BIDDERS
19	KENV/TNDR/TSD/2025	SUPPLY OF TISSUE PAPER	SPECIAL GROUPS
20	KENV/TNDR/WIBA/2025	WIBA INSURANCE SERVICES	ALL BIDDERS
21	KENV/TNDR/SCS/2025	SERVICING OF CCTV, ACCESS CONTROLS, VOIP,STRUCTURED CABLING SYSTEMS,STRONG ROOM AND SAFE	ALL BIDDERS
PRE-QUALIFICATION			
1	KENV/PREQ/ICT/2025	PRE-QUALIFICATION FOR SUPPLY OF HARDWARE/SOFTWARE AND ACCESSORIES	ALL BIDDERS
2	KENV/PREQ/MAC/2025	MAINTENANCE AND SERVICING OF AIR CONDITIONERS	ALL BIDDERS
3	KENV/PREQ/SRM/2025	REPAIRS & MAINTAINANCE (PLUMBING,WATER PUMP, SEWER, CARPENTLY, ELECTRICALS AND MASONRY)	ALL BIDDERS
4	KENV/PREQ/TCS2025	PROVISION OF TAX CONSULTANCY SERVICES	ALL BIDDERS
5	KENV/PREQ/DTM/2025	DATA PROTECTION MANAGEMENT SYSTEM	ALL BIDDERS
6	KENV/PREQ/FAS/2025	PROVISION OF FORENSIC AUDIT SERVICES	ALL BIDDERS
7	KENV/PREQ/TRA/2025	PROVISION OF STAFF TRAINING AND DEVELOPMENT SERVICES	ALL BIDDERS
8	KENV/PREQ/OSHA/2025	PROVISION FOR OCCUPATIONAL SAFETY AND HEALTH ADMINISTRATION SERVICES	ALL BIDDERS
9	KENV/PREQ/MVR/2025	PROVISION OF MOTOR VEHICLE REPAIRS AND SPARES	ALL BIDDERS

Tender documents may be obtained from www.kenversitysacco.co.ke and at the society offices at Kenversity Plaza, Kahawa Sukari, off Thika superhighway, Behind Quickmart Supermarket during working hours (8.30a.m. – 4.30p.m. Monday – Friday). Payment of a non-refundable fee Kshs.1,000/- for each category payable in cash or bankers cheque to the Society shall apply before closure of the tendering period.

Completed documents in plain sealed envelopes clearly marked "Tender for Supplies with Category code" be addressed as below and deposited in the tender box at the Society office latest **Wednesday, 27th NOVEMBER, 2024 12.00 noon** and thereafter, the same shall be opened after closure in the presence of those who may wish to witness.

**The Chief Executive Officer,
Kenversity SACCO Limited,
P.O. Box 10263 – 00100,
NAIROBI.
www.kenversitysacco.co.ke**

The Society reserves the RIGHT to accept or reject any application, either in whole or in part and is not bound to give reasons for its action.