

African Court on Human and Peoples' Rights

Request for Quotations

MEDICINES

African Court on Human and Peoples' Rights

P.O Box 6274 Arusha, Tanzania Web site: www.african-court.org; Email registrar@african-court.org

Procurement Number: AFCHPR/PTS/2019/334
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To: ALL SUPPLIERS

Date: 13/11/2019

The African Court on Human and Peoples' Rights invites you to submit your quotation for the goods described herein. Partial Quotations may be rejected, and the Purchaser reserves the right to award a contract for selected items only. Any resulting order shall be subject to the General Conditions of Contract for Purchase Orders (attached) except where modified by this Request for Quotations (RFQ).

SECTION A: REQUEST FOR QUOTATIONS:

- 1) Description of the Goods: Medicines
- 2) Currency of Quotation: Tanzanian shilling (The United Nations operational exchange rate for the month of December 2019 will be used to convert the quotations received in foreign currency).
- 3) Quotations should be based on:
For companies supplying from within the United Republic of Tanzania; Ex Works – insured and delivered to African Court on Human and Peoples' Rights; **or** for companies supplying from outside of the Country specified for delivery; CIP to African Court on Human and Peoples' Rights.
- 4) The delivery period required is Fifteen (15) days from date of order.
- 5) Quotations must be valid for Sixty (60) days.
- 6) The warranty/guarantee offered shall be a minimum of 12 months after final acceptance of the Goods.
- 7) Quotations and supporting documents as specified in Section B must be marked with the Procurement Number above and indicate your acceptance of the terms and conditions.
- 8) Quotations must be received, in sealed envelopes, no later than: 17:00hrs on 10 December 2019 (Arusha, Tanzania local time).
- 9) Quotations must be returned to:
Email: tender@african-court.org
(The maximum size of attachments is 10 MB. If the size of your attachment exceeds 10 MB, please send it over several emails.)

Or,

Postal address:

**The Registrar,
African Court on Human and Peoples' Rights
P.O. BOX 6274
Arusha, Tanzania**

Or,

Physical address:

The Headquarters of the African Court on Human and Peoples' Rights, situated at TANAPA, Mwalimu Julius Nyerere Conservancy Centre, Phase II, Dodoma Road.

African Court on Human and Peoples' Rights

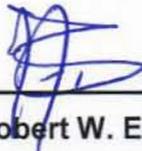
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Request for clarification;

Bidders requesting clarification of the items, technical requirements or conditions stipulated in this RFQ shall communicate in writing with African Court office through the email address: procurement@african-court.org

- 10) The attached Schedule of Requirements at Section C detail the items to be purchased. You are requested to quote your delivered price for these items by completing and returning Sections B and C in a sealed envelope marked with your name and the Procurement Number.
- 11) Quotations that are responsive, qualified and technically compliant will be ranked according to price. Award of Contract will be made to the lowest priced quotation by the issue of a Purchase Order.
- 12) Payments will be made in accordance with any resulting order within thirty (30) days of receipt of an invoice supported by a delivery receipt or dispatch documentation, and subject to issue of a satisfactory inspection report.


Dr. Robert W. Eno
Registrar of the Court



AFRICAN COURT ON HUMAN AND PEOPLES' RIGHTS

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Your quotation is to be returned on this Form by completing and returning Sections B and C including any other information/certification required within this RFQ.

SECTION B: QUOTATION DETAILS

- 1) Currency of Quotation: Tanzanian shilling. (The United Nations operational exchange rate for the month of December 2019 will be used to convert the quotation received in foreign currency).
- 2) Delivery period offered: Fifteen (15) days from date of Purchase Order.
- 3) The validity period of this Quotation is Sixty (60) days.
- 4) Warranty period: 12 months after final acceptance of the Goods.
- 5) We enclose the following document(s) as required by the Purchaser:
 - Company Profile detailing the company and its services;
 - Valid registration documents;
 - Latest Tax Clearance Certificate.
- 6) We confirm that our quotation is subject to the African Union General Conditions of Contract for Purchase Orders, and is based on the terms and conditions stated in your Request for Quotations referenced above.
- 7) We confirm that the prices quoted are fixed for the duration of the validity period and will not be subject to revision or variation.

Authorised By:

Signature: _____ Name: _____

Position: _____ Date: _____

Authorised for and on behalf of:

Company: _____

Phone number: _____ Email: _____

Registered Address:

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If any additional documentation is attached, a signature and authorisation at Sections B, C and D is still required as confirmation that the terms and conditions of this RFQ prevail over any attachments. If the Quotation is not authorised in Sections B and C the quotation may be rejected.

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Item No	Description of Goods (In accordance with Section D)	Unit of Measure	Quantity Box of 28'/30'	Unit Price	Total Price
1	CO-LOSARTAN DENK 50: 12.5 mg	EA	15		
2	REPACE H 50MG	EA	30		
3	METFOMIN 850MG(denk)	EA	20		
4	METFOMIN 500MG (Denk)	EA	20		
5	GLUCOSTRIPS (box)	EA	20		
6	GLUCOMETER MACHINES	EA	15		
7	CONCOR 5MG	EA	30		
8	AMLODIPINE 10MG	EA	20		
9	SPRINOLACTONE 25MG	EA	20		
10	MELOXICAM 15 MG	EA	15		
11	ATACAND 16MG	EA	15		
12	LEVOTHYROXINE 50MCG	EA	20		
13	GEMMER 2	EA	20		
14	GEMER 1	EA	20		
15	CALPOL SYRUP 100MLS	EA	20		
16	PENFIL INSULIN MIXTARD (NOVEPEN) boxes	EA	30		
17	PENIFIL DISPOSABLE NEEDLES	EA	1000		
18	METFOMIN 500MG	EA	5		
19	ARTOLIP 20MG	EA	20		
20	ATOVASTATIN 80MG	EA	20		
21	LOSARTAN 50	EA	15		
22	AMLODIPINE 5MG	EA	30		
23	FASTUM GEL	EA	30		
24	FEBUDAY 40MG	EA	15		
25	ZYORIC 100MG	EA	15		
26	ALLUPURINOL 300	EA	15		
27	NEXITO 20MG	EA	15		
28	SINEMET 275MG	EA	30		
29	PEXOLA 10MG	EA	15		
30	AMANTADINE 100MG	EA	15		
31	INDERAL (PROPANOLOL)40MG	EA	40		
32	QUITIPIN 50MG	EA	15		
33	ZESTRIL 20MG	EA	20		
34	XYZAL 10MG	EA	20		
35	ASCARD 75MG	EA	20		
36	IROVEL 300MG	EA	20		
37	AVAMYS SPRAY	EA	30		
38	NEXIUM 40MG	EA	30		
39	TEL H 80/12.5	EA	30		

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40	FUROSEMIDE 40MG	EA	20		
41	CARDIVAS 6.25MG	EA	20		
42	METOPROLOL 50MG	EA	10		
43	Ascard with clopedigrel 75mg/75mg	EA	20		
44	ROSOVASTATIN 10MG	EA	20		
45	ROSOVASTATIN 10MG 20mg (20)	EA	20		
46	DESLORATADINE	EA	30		
47	KOMBIGLYZE(SAXAGLIPTIN AND METFOMIN HCL EXTENDED RELEASE) 5MG/1000MG	EA	15		
48	TENOFOVIR 300MG	EA	15		
49	AERIUS 5MG	EA	20		
50	VASOGRain TABS	EA	30		
51	PASCALIUM 1.5mg	EA	20		
52	KETOGESIC 50mg	EA	30		
53	WARFARIN 5MG	EA	20		
54	AMITRIPTYLINE 25MG	EA	15		
55	BISOPROLOL 2.5MG	EA	20		
56	SINEMET	EA	30		
57	ISOSORBIDE MONONITRATE 20MG	EA	20		
58	ISOSORBIDE DINITRATE 20MG	EA	20		
59	RABELOL 20MG	EA	20		
60	RIVAROXABAN 15MG	EA	20		
61	GLUCOVENCE 500/2.5	EA	20		
62	ASCARD 75MG	EA	30		
63	MUVERA 150MG	EA	30		
64	COAPROVEL 300/12.5MG	EA	20		
65	ZIAK CONCOR AND HCT 5: 12.5MG	EA	20		
66	MENOPACE	EA	30		
67	AMLODIPINE 5MG	EA	30		
68	OSTEOCARE (CA, VITAM D, MAGNESSIUM)	EA	30		
69	SALBUTAMOL SPRAY	EA	15		
70	SALMETEROL AND FLUTICASONE (SEROFLO 250)	EA	15		
71	ATENOLOL 50MG	EA	20		
72	BIOFAR (12 VITAMINS AND 12 MINERALS)	EA	30		
73	PREDNISOLONE EYE DROPS	EA	15		
74	SODIUM CROMOGLYCATE EYE DROPS	EA	15		
75	AVAMYS NASAL PRAY	EA	30		
76	BETASERC 8MG	EA	3		
77	EXFORGE 10/100MG	EA	15		
78	NOVASC 5MG	EA	15		
79	VIT C 1000MG (dispensable)	EA	20		
80	CLOPRIDROGEL 75 MG	EA	20		
81	PANTOCID 40MG	EA	40		
82	DESLORATADINE 10MG	EA	20		
83	OPTIVE EYE DROPS	EA	20		

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84	ARTIFICIAL TEARS	EA	20		
85	OSTEOCARE PLUS GLUCOSAMINE AND CHONDROITIN	EA	40		
86	FASTUM GEL	EA	30		
87	OSTEOCARE CHEWABLE	EA	30		
88	STREPSILS LOZENGEZES	EA	30		
89	ASOMEX 2.5MG	EA	30		
90	ASOMEX 5MG	EA	20		
91	GANFORT – EYE DROPS	EA	8		
92	AZOPT – EYE DROPS	EA	8		
93	COMBIGAN – EYE DROPS	EA	8		
94	LOSARTAN 25MG	EA	15		
95	VISION CARE VITABIOTICS	EA	20		
96	CARDIOCARE	EA	20		
97	ZOLPIDEM	EA	15		
VACCINES					
98	VAXIGRIP PAED AND ADULT	EA	20		
99	VAXIGRIP PAED AND ADULT	EA	20		
100	HEPATITIS A	EA	10		
101	HEPATITIS B	EA	50		
102	CHICKEN POX	EA	10		
103	MMR	EA	10		
104	MENINGOCOCCAL	EA	10		
105	CERVARIX	EA	20		
106	TETANUS	EA	10		
107	ANTI RABIES	EA	10		
108	PNEUMOCOCCAL	EA	20		
109	ROTARIX	EA	10		
110	POLIO	EA	10		
111	CHOLERA	EA	15		
112	DPT/DTAP	EA	10		
113	TYPHOID	EA	10		
				Total	

Authorised By:

Signature: _____

Name: _____

Position: _____

Date: _____

(DD/MM/YY)

Authorised for and on behalf of:

Company: _____