



Bureau of Public Procurement (BPP)
PRE-REQUISITE FORM FOR CERTIFICATE OF NO OBJECTION

Section A

Ministry/ Agency:

Project Title:

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Contract Package No:

Type of Tendering: Open Selective Restricted

Procurement/ Selection Method:

A. Goods & Works Contracts

B. Consultancy Services

ICB

QCBS/ QBS

NCB

LCS

DIRECT LABOUR

SSS

DIRECT CONTRACTING

CQS/ IC

SELECTIVE TENDERING/ NATIONAL SHOPPING

Reason(s) for Selective/ Limited/ Restricted Tendering:

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Section B

Tender Documentation: (if 'Yes', please attach evidences)

- | | | |
|---|------------------------------|-----------------------------|
| 1. Letter of Request/ Transmittal Letter: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 2. HE's Approval for Procurement: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 3. Evidence of Applicable Sign-offs from relevant MDAs | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 4. Soil Test (where applicable) | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 5. Evidence of No-Objection for Advertisement and Bidding Documents | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 6. Tender / Pre-Qualification Documents: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 7. Pre-Bid/Proposal Conference: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 8. Site Visit(s): | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 9. Records of Tender Opening: | Yes <input type="checkbox"/> | No <input type="checkbox"/> |
| 10. Pre-Qualification/ Evaluation Report(s): | Yes <input type="checkbox"/> | No <input type="checkbox"/> |

Section C

Budgetary Provision:

a. Vote of Charge

Recurrent Capital Special Expenditure/ A.I.E

A.I.E No./ Date.....

Below the Line/ Dedicated

Provide details of below the line
A/C.....

b. Balance in Vote of Charge:

c. Estimated Project Cost:

Section D: Project Endorsement

Accounting Officer

Name:		Signature:	
Position:		Date:	

Project Director/ Manager

Name:		Signature:	
Position:		Date:	

Head, Procurement Office

Name:		Signature:	
Position:		Date:	