**FORM G4**

**PENDING BILLS VERIFICATION COMMITTEE**

GENERAL PUBLIC

**CONSULTING SERVICES SUBMISSION FORM**

**PART 1: DETAILS OF THE PENDING BILL CLAIM**

**Name of Individual submitting/presenting the Pending Bill**; …………………………………………. and **ID No**. …………………………………………….

**Name of Consultant:** ……….................................................................................. ............................................................................................................................................................

Of **P.O. Box** .......................**Code**................................**City/Town**.................................................

**Name of Entity/Institution** where the pending bill was related to: ............................................................................................................................................................ ........................................................................................................................................................................................................................................................................................................................

**Description of Consultancy Services:** .........................……………………....…………. ........................................................................................................................................................................................................................................................................................................................

**Contract Sum:**..................................................................................................................................

**Amount Certified:** ………………………**Amount Paid to Date:** …………………………….

**Pending Bill/Claim Amount Kes:** ……………………………...................................................

**Financial Year/Date When Contracted:** ....................................................................................

**Name of the Office/ Officer you dealt with** when the Contract was Signed ...................................................................................................................................................................................................................................................................................................................................................................................................................................................................................

**PART 2: PENDING BILL SUBMISSIONS**

|  |  |  |
| --- | --- | --- |
| **S/No.** | | **REQUISITE DOCUMENTS AS AT THE TIME OF SUBMITTING TENDER** |
|
|  | | **BUSINESS COMPLIANCES** |
|  | | Certificate of Incorporation/Registration |
|  | | CR12 Certificate (where applicable) |
|  | | Professional Practicing License (where applicable) |
|  | | Valid Tax-Compliance Certificate or equivalent at the time of tender |
|  | | Confidential Business Questionnaire at the time of tender (where applicable) |
|  |  | |
| **B.** | **TENDERING DETAILS** | |
|  | Request for Expression of Interest (Tender Notice) – Advertisements, Procuring Entity website etc. (where applicable) | |
|  | Request for Proposal | |
|  | Notification to Award letter | |
|  | Acceptance of Award (Letter/Email) | |
|  | Professional Indemnity at the time of contract | |
|  | Signed Contract Documents | |
|  | Duly signed Payment Certificate(s) (where applicable) | |
|  | Fee Note number date and description | |
|  | Proof of accepted/approved Deliverables (where applicable) | |
|  | Addendum (if any) | |
|  | Any form of Commitment from the Procuring Entity (where applicable | |
|  | Any other information you may deem necessary | |
|  | Received and signed Consultancy Report | |