

CHAK NATIONAL HCTS WORKSHOP

P.O.BOX 30690 GPO 00100

TEL 4441920, 4445160, FAX 4440306

MOBILE, 0722203617, 0733334419, 0718180967

EMAIL: hcts@chak.or.ke, secretariat@chak.or.ke

WEBSITE: www.chak.or.ke

3rd Sept. 2023

The Director,
Meditrina Hospital,
Homabay.

CONTRACT AGREEMENT FOR X RAY DOSE MONITORING SERVICE/PARTNERSHIP.

STANDARD CONDITIONS.

The 'company' means ----- of P.O Box-----Nairobi, Kenya having registered office on-----, KNRA registration No.-----

The 'Dosimetry service' means the Beosl dosimeters owned by Christian Health Association of Kenya, CHAK, any service thereof, which this terms and condition shall govern, unless otherwise agreed in writing.

Business hours;
Monday- Friday 8:00AM to 5:00PM

GENERAL SERVICE CONTRACT.

The service shall commence from date of signing this contract agreement and to be carried out on dates agreed and convenient to both parties.

WORK SCHEDULE

SCHEDULE	DATE	ACTIVITIES
	(Submitting dates)	
Monthly	1 st to 5th of every Month.	Reading, erasing/preparing the badge for the next use, submitting report to KNRA/user.

Contractual period: Service contract shall remain in force for the period covering the planned schedule. However, the Dosimetry Service contract shall be signed separately covering a period of one-year renewable.

Emergency contacts: Kenneth (0721562221), Joseph (0723948747), Julius (0722177493)
Emails; njeru@chak.or.ke, jrugut@chak.or.ke, nkandika@chak.or.ke

Addition Dosimeter/service to the specified work schedule will be charged at the cost negotiable between the two parties.

WORK DETAILS

- Receiving dosimeter badges
- Reading dosimeter badges
- Erasing/preparing Dosimeter badges for the next use
- Submitting report to KNRA and sharing a copy with the 'Health facility/company.'
- Dispatching Dosimeter badges through the 'courier company'.
- Filing reports.

DOSIMETRY SERVICE COST

The cost shall be as follow: -

	Details	Invoice	No. of Months	Quantities	Unit cost per month	Total costs
Hiring (leasing) of dosimeter	Paid once.		1	2	Ksh.2,000	Ksh.4,000
Monthly reading of dosimeter(s)	Reading with monthly reports issuance.		12	2	700	Kshs.16,800
Courier charges			12	1 pack	Ksh.800	Ksh.9,600
TOTAL						Ksh.30,400

(TO BE ATTACHED)

Radiation Source	Personnel Name	KNRA Registration No. (ADM)	Dept./designation	Assigned dosimeter(S/N)

PAYMENT TERMS

70% payment on signing the contract and presentation of our invoice. Balance payable after.....

VALIDITY

Prices shall remain firm but subject to review in case of economic inflation.

DURATION

This contract agreement will remain valid for the period covering ----- to ----- 2024, but renewable.

GENERAL

All additional service required plus any extra Dosimeter used in the course of the contract period will be charged EXTRA FEE as per the prevailing market price.
Any damaged Dosimeter/ Dosimeter holder shall be charged ETRA FEE as per the prevailing market price.

CONTRACT GENERAL CONDITIONS

1. The scheduled dosimetry Service will be carried out during normal working hours. Payments should be paid within the credit period of 30 days from date of invoice.
2. The terms of this contract automatically become Null and Void if the client has defaulted on any payment due to CHRISTIAN HEALTH ASSOCIATION OF KENYA, NATIONAL HCTS PROJECT.
3. This service contract will remain in force for a period covering 24Months of the work schedule or the same is terminated by either party after giving a notice of 6 Months.

CONTRACT RENEWAL

The service contract becomes invalid after the last month of the contractual year, The service contract can be renewed for the following year but this may be subject to changes in contractual terms. However, these terms are to be agreed upon by both the customer and the service provider before signing of the contract.

This contract commences on the date hereon..... day of2023 as an agreement between: -

SERVICE PROVIDER: - CHAK, NATIONAL HCTS WORKSHOP

OFFICIAL STAMP.....

SIGNED.....

DATE.....

NAME.....

DESIGNATION:

AND

CLIENT: - Meditrina Hospital

OFFICIAL STAMP.....

SIGNED.....

DATE.....

NAME.....

DESIGNATION.....