SharePoint

Mhlongo Thando 🗸 🍄



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AdvertQuote

| KWAZULU-NATAL PROVIN | CE | |
|--|--|-------------|
| HEALTH REPUBLIC OF SOLITH AFRICA | Quotation Advert | |
| Opening Date: | 2021-07-23 | |
| Closing Date: | 2021-07-30 | 16 |
| Closing Time: | 11:00 | |
| INSTITUTION DETAILS | | |
| Institution Name: | Church of Scotland hospital | ∇ |
| Province: | KwaZulu-Natal | |
| Department or Entity: | Department of Health | |
| Division or section: | Central Supply Chain Management | |
| Place where goods / services is required | Church of Scotland Hospital | |
| Date Submitted | 2021-07-23 | n |
| ITEM CATEGORY AND DETAILS | | |
| Quotation Number: | ZNQ: COS129.21-22 | : |
| Item Category: | Goods | Y |
| Item Description: | SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE AND OUTSIDE DOOR BURGLAR(HEAVY DUTY) AT PHARMACY | : |
| | AS PER ATTACHED SPECIFICATION | |
| Quantity (if supplies) | 03 | |
| COMPULSORY BRIEFING SESSION | SITE VISIT | |
| Select Type: | Not Applicable | V |
| Date : | | 10 |
| Time: | | |
| Venue: | | : : : |
| QUOTES CAN BE COLLECTED FROM: | KZNHEALTH WEB SITE | |
| QUOTES SHOULD BE DELIVERED TO: | Tender Box or email to <u>Silindile. Ngubane@kznhealth.gov.za</u> | |
| ENQUIRIES REGARDING THE ADVE | RT MAY BE DIRECTED TO: | |
| Name: | Thando Mhlongo | |
| Email: | Thando. Mhlongo@kznheaith.gov.za | |
| Contact Number: | 0334931033 | 1 |
| | | |

| Finance Manager Nam | 6; |
|---------------------|----|
|---------------------|----|

MR S.J. PIENAAR

Finance Manager Signature:

No late quotes will be considered

Print this page

| STAND | ARD QUOTE | DOCL | JMEN | TATI | ON SI | UPPL' | Y CH | AIN | MAI | VAG | EMI | ENI | OVE | KK | יט ט | 00.00 | <u>!</u> | | | | |
|---|---|--------|---|---|--------------|---------|--------|------|--------------|--------------|------------|-------|----------|-------|---------|---|------------|-------------|------|------|-----------|
| YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: CHURCH OF SCOTLAND HOSPITAL | | | | | | | | | | | | | | | | | | | | | |
| DATE ADVERTISED: | | | | | | | | | | | | | | | | | | | | | |
| FACSIMILE NUMBER: E-MAIL ADDRESS: Silindile.Ngubane@kznhealth.gov.za | | | | | | | | | | | | | | | | | | | | | |
| PHYSICAL ADDRESS: Main Dundee Road, Church of Scotland Hospital , Tugela Ferry 3010 | | | | | | | | | | | | | | | | | | | | | |
| ZNQ NUMBER: COS129 | .21-22 | | | | | | | | | | | | | | | | | | | | |
| DESCRIPTION: SUPPLY M | 1ATERIAL | ANE |) INS | STAI | LL H | IARE |)WC | 00 | D D | OU | BL | E D | 00 | R A | ND | BU | IRG | BLA | R | JA1 | ES. |
| CONTRACT PERIOD ONCE OFF VALIDITY PERIOD 60 Days SARS PIN | | | | | | | | | | | | | | | | | | | | | |
| CENTRAL SUPPLIER DATABA | | | | | | | \Box | | | | | | | | | | | | | | |
| | | W(1101 | (00 | ٠, | •• | | | | | | | | | | | | | | | | |
| UNIQUE REGISTRATION REF | EKENCE | | | | | | | T | T | | T | | | | | | | | | | |
| | OV CITUATE | - L AT | (STD | EET / | מחמו | ESS) | 1 | 1. | | | | | | | | | | | | | |
| DEPOSITED IN THE QUOTE E | | | | | | | | | | | | | | | | | | | | | |
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| 101000000000000000000000000000000000000 | | | | | | | | | | | | | | | | | | | | | |
| Bidders should ensure that consideration. | quotes are | delive | red tii | meou | ısly te | o the | corre | ect | addı | ess. | . If t | the d | quote | e is | late | , it v | vill t | not i | be a | ccep | ted for |
| The quote box is open from 08 | :00 to 15:30. | | | | | | | | | | | | | | | | | | | | |
| ALL QUOTES MUST BE SUBM | VITTED ON T | HE OF | FICIA | AL FC | RMS | (NC | OT TO | BE | RE- | TYP | ED) | | | | | | | | | | |
| PROCUREMENT REGULATION | THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2011, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT. | | | | | | | | | | | | | | | | | | | | |
| | TI (FAILURE T | HE FO | LLOW SO W | ING ILL R | PART ESUL | T IN | ARS I | VIU: | ST B JOTI | E FU E BE | IRN ING | DIS | D QUA | LIFIE | ED) | | | | | | |
| NAME OF BIDDER | . 111 * 21 * 21 1 1 1 1 2 2 2 1 1 * 2 | | | ****** | ••••• | 1000010 | | , | | . • 1 • • • | | ••••• | | | | | | • • • • • • | | | |
| POSTAL ADDRESS | 1 - 77 1 5 - 4 1 1 1 1 1 1 7 1 7 1 | | | , | | 1+1+111 | | | | | 2 4 1 4 7 | | | | • • • • | | ** * * 1 1 | ***** | | , | |
| STREET ADDRESS | | | • | | | | | | | | | | | | | | , | | | ., | |
| TELEPHONE NUMBER CO | DENUI | MBER. | | • | | F | FACS | IMI | LE N | UMB | BER | C | ODE | | N | IUME | BER. | •••• | | | |
| CELLPHONE NUMBER | | | | | | | ••••• | ., | | | | | | | | • | ***** | | , | | ********* |
| | | | | | | | | | | | | | | | | ,.,,,, | | | •••• | | |
| VAT REGISTRATION NUMBE | ER (If VAT ver | ndor) | | , , | | | | | , | | | | ••••• | | | | ,, | | | | |
| HAS A B-BBEE STATUS LEV | EL VERIFICA | TION | CERT | TFIC/ | ATE B | EEN S | SUBN | 4IT | ΓED? | (SB | D 6. | .1) | | | | | | | YES | | NO |

[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMES& QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]

| OFFICIAL P | RICE PAGE I | FOR QUOTATIONS | ZNQ NUMBE | _{R:} COS129.21- | ·22 | ı |
|--------------|------------------------|--|--|---|---|-----------------|
| DESCRIPTION | ON: SUPF | LY MATERIAL AND INSTALL | DOUBLE DOOF | RAND BURGL | AR GATE | ES |
| SIGNATURE | OF BIDDER | I hereby agree to all terms and conditions] | | | | |
| CAPACITY (| JNDER WHIC | CH THIS QUOTE IS SIGNED | | *************************************** | .,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| Item No | Quantity | Description | Brand & model | Country of manufacture | Price R | С |
| | | SUPPLY MATERIAL AND INSTAL | | | | |
| | 01 UNIT | OUTSIDE HARD WOOD DOUBLE DO | DOR | | | $\dashv \dashv$ |
| | 02 UNITS | OUTSIDE DOUBLE DOOR BURGLAR | GATE | | | _ |
| | | AT PHARMACY | | | | |
| | | AS PER ATTACHED SPECIFICATION | NC | | | |
| ************ | | PLEASE ATTACH BEE CERTIFICATE/A | ECIDACIT | | | |
| | | | FFIDATI | | | _ |
| | | TAX CERTIFICATE | VEDED. | | | - |
| | | DOCUMENTS SHOULD BE HAND DELI | VERED | | | _ |
| | | TO THE TENDER BOX | | | | |
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| | | PHARMACY | | | | _ |
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| ; | | 9 15% (Only if VAT Vendor) | | | | |
| TOTAL Q | UOTATION F | PRICE (VALIDITY PERIOD 60 Days) | | | | |
| | | | A Cala Carefornia Ta Tha C | A N.C. /C A D.C. Cnool | fication? | , |
| | | | e Article Conform To The S livery Period E.G. <i>E.G. 1da</i> | | ilications | |
| Is The Pric | e Firm? | State De | ivery renou E.O. E.O. Tuc | ly, Iwoon | ! | |
| Contact F | erson: THA | ne <u>quote</u> may be directed to: NDO_MHL@Tel:0334931033. | Enquiries regarding ter | | | |
| E-Mail Ad | _{dress:} Thar | ndo.Mhlongo@kznhealth.go w | OURAGE FOISUR | 10k | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |

DECLARATION OF INTEREST

| 1. - - | Any legal person, including persons employed by the state¹, or persons having a kir blood relationship, may make an offer or offers in terms of this invitation to quote (inclimited quote or proposal). In view of possible allegations of favouritism, should the remployed by the state, or to persons connected with or related to them, it is required declare his/her position in relation to the evaluating/adjudicating authority wherethe bidder is employed by the state; and/or the legal person on whose behalf the bidding document is signed, has a relation evaluation and or adjudication of the quote(s), or where it is known that such a reon whose behalf the declarant acts and persons who are involved with the evaluation. | dudes a price quotation, advertised competitive quote, esulting quote, or part thereof, be awarded to persons at that the bidder or his/her authorised representative ship with persons/a person who are/is involved in the lationship exists between the person or persons for or |
|--------------|--|--|
| 2. | 2. In order to give effect to the above, the following questionnaire must be completed an | d submitted with the quote. |
| 2.2. | 2.1. Full Name of bidder/representative | ce Number: |
| 2.8. | 2.7. The names of all directors / trustees / shareholders / members, their individual ident employee / persal numbers must be indicated in paragraph 3 below. 2.8. Are you or any person connected with the bidder presently employed by the state? 2.8.1. If so, furnish the following particulars: Name of person / director / trustee / shareholder/ member: Name of state institution at which you or the person connected to the bidder is employed by the state institution. Any other cases in the person in the person connected to the bidder is employed. Any other cases in the person in the person connected to the bidder is employed. Any other cases in the person in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person connected to the bidder is employed. Any other cases in the person cases in the person connected to the bidder is employed. Any other cases in the person cases in the person connected to the bidder is employed. Any other cases in the person c | [TICK APPLICABLE] YES NO yed: |
| 2.8. | Position occupied in the state institution: | y to undertake remunerative work outside employment |
| 2.8. | in the public sector? 2.8.2.1. If yes, did you attach proof of such authority to the quote document? | YES NO |
| | tote: Failure to submit proof of such authority, where applicable, may result in the disqualific 2,8,2,2. If no, furnish reasons for non-submission of such proof: | eation of the quote.) |
| 2.9. | 2.9. Did you or your spouse, or any of the company's directors / trustees / shareholders state in the previous twelve months? | / members or their spouses conduct business with the YES NO |
| 2,10 | 2.9.1. If so, furnish particulars: 2.10. Do you, or any person connected with the bidder, have any relationship (family, friend may be involved with the evaluation and or adjudication of this quote? 2.10.1. If so, furnish particulars: | d, other) with a person employed by the state and who YES NO |
| 2.11 | 2.11. Are you, or any person connected with the bidder, aware of any relationship (family, employed by the state who may be involved with the evaluation and or adjudication 2.11.1. If so, furnish particulars: | riend, other) between any other bidder and any person of this quote? |
| 2.12 | 2.11.1 It so, furnish particulars. 2.12. Do you or any of the directors / trustees / shareholders / members of the company ha or not they are bidding for this contract? 2.12.1. If so, furnish particulars: | ve any interest in any other related companies whether YES NO |
| 3. | | shareholders on CSD. It is the suppliers' responsibility annot validate the information on CSD, the quote will |
| 4 | 4 DECLARATION | |
| | I, THE UNDERSIGNED (NAME) FURNISHED IN PARAGRAPHS 2. | CERTIFY THAT THE INFORMATION |
| | I ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAIN PROVE TO BE FALSE. | ST ME SHOULD THIS DECLARATION |
| | Name of bidder Signature Position | |
| "Sia a) | constitutional institution within the meaning of the Public Finance Management d) national Asser Act, 1999 (Act No. 1 of 1999); e) Parliament. | slature; nbly or the national Council of provinces; or |

^{**}Shareholder* means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

| 9. | DECLAR | ATION WITH REGARD TO COMPANY/FIRM | |
|-----|--------------|---|--|
| 9.1 | Name o | of company/firm: | |
| 9.2 | VAT re | gistration number: | |
| 9.3 | Compa | ny registration number: | |
| 9.4 | TYPE (| OF COMPANY/ FIRM [TICK APPLICABLE BOX] | l |
| | | Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited | |
| 9.5 | DESCF | RIBE PRINCIPAL BUSINESS ACTIVITIES | |
| | | | |
| 9.6 | COMP | ANY CLASSIFICATION [TICK APPLICABLE BO |)X] |
| | | Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc. | |
| 9,7 | Total n | umber of years the company/firm has been in bu | ısiness: |
| 9,8 | the B-E | | lo so on behalf of the company/firm, certify that the points claimed, based or graphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for |
| | i) Tł | ne information furnished is true and correct; | |
| | ii) Ti | ne preference points claimed are in accordance | with the General Conditions as indicated in paragraph 1 of this form; |
| | | | ult of points claimed as shown in paragraphs 1.4 and 6.1, the contractor ma atisfaction of the purchaser that the claims are correct; |
| | iv) If ha | the B-BBEE status level of contributor has been ave not been fulfilled, the purchaser may, in addi | claimed or obtained on a fraudulent basis or any of the conditions of contraction to any other remedy it may have – |
| | (a) | disqualify the person from the bidding process | s; |
| | (b) | recover costs, losses or damages it has incurr | red or suffered as a result of that person's conduct; |
| | (c) | cancel the contract and claim any damages varrangements due to such cancellation; | which it has suffered as a result of having to make less favourable |
| | (d) | who acted on a fraudulent basis, be restricted | shareholders and directors, or only the shareholders and directors I by the National Treasury from obtaining business from any organ after the audi alteram partem (hear the other side) rule has been |
| | (e) | forward the matter for criminal prosecution. | |
| | | |] |
| | WITN | ESSES | SIGNATURE(S) OF BIDDERS(S) |
| | 1 | | DATE: |
| | 2 | | ADDRESS |

1 FOR PHARMAY STORES



the resultant

DEPARTMENT OF HEALTH

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY

ZNO: /20-21

| Closing Date & Tim |
|--------------------|
|--------------------|

11:00Hrs

Contract Period

08 Weeks

Validity Period

60 Davs

Technical Contact Person

MR. WS MKHIZE

Contact Telephone Number

:

On Site Inspection

083-548 0021

DOCUMENTS DELIVERED BY HAND MUST BE DEPOSITED IN THE QUOTATION BOX SITUATED IN:

THE TENDER-BOX

CHURCH OF SCOTLAND HOSPITAL

R33 MAIN ROAD TUGELA FERRY 3010 THE QUOTATION BOX IS AVAILABLE ON THE FOLLOWING DAYS AND TIMES: MONDAYS TO FRIDAYS 07h30 - 16h00

DOCUMENTS POSTED SHALL BE ADDRESSED TO:

SUPPLY CHAIN MANAGEMENT: CHURCH OF SCOTLAND HOSPITAL PRIVATE BAG X502

TUGELA FERRY

3010

Name of Tenderer

PROVINCIAL SUPPLIERS DATABASE REGISTRATION NO.:

PROVINCIAL SUPPLIERS DATABASE REGISTRATION CLASSIFICATION: (Tick (✓) applicable block)

VALIDATED SUPPLIER

PROVISIONAL SUPPLIER:

NOTICE:

PROVISIONALLY REGISTERED COMPANIES:

LETTER TO BE ATTACHED FROM KWAZULU-NATAL PROVINCIAL TREASURY REFLECTING THE REASON(S) FOR NON ALLOCATION OF FULL REGISTRATION STATUS AND WHAT DOCUMENT(S) AND OR INFORMATION IS STILL OUTSTANDING.

OUTSTANDING DOCUMENTATION/ INFORMATION MUST ALSO ACCOMPANY THIS OFFER

QUALIFICATION FOR PREFERENCE POINTS:

NB: IN ORDER TO QUALIFY FOR PREFERENCE POINTS A TENDERER MUST SUBMIT TOGETHER WITH HIS/ HER/ ITS QUOTATION DOCUMENT, A FULLY COMPLETED ZNT 30 FORM (APPLICATION FOR PREFERENCE POINTS FORM) ON THE DUE DATE AND TIME OF QUOTATION, UNLESS A VALID ZNT 30 FORM IS ALREADY IN THE POSSESSION OF THE OFFICE INVITING THIS QUOTATION, WHICH ARE VALID FOR A PERIOD OF SIX MONTHS.

. CONSTRUCTION INDUSTRY DEVELOPMENT BOARD: PROOF OF REGISTRATION AND GRADING TO ACCOMPANY THIS TENDER DOCUMENT, FAILURE TO COMPLY WILL LEAD TO DISQUALIFICATION.

PROJECT SPECIFICATIONS

NOTES TO TENDERERS

1.1. SCOPE OF CONTRACT

This Contract is for the complete execution of the project indicated above.

1.2. CONTRACT DRAWINGS

Drawing No: Nil

1.3. CONDITIONS OF CONTRACT AND PRELIMINARIES

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT

PHARMACY

DATE: ZNQ NO:

/20-21

Briefing meeting: Closing date:

@11:00 @ 11:00

1

DEPARTMENT OF HEALTH

RDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGL SUPPLY MATERIAL AND INSTALL H

/20-21ZNQ

PERIOD OF CONTRACT 1.3.1

08 Weeks as the Contract Period for the completion of the Structural Work from date of Site handover.

All Tenderers to Note that the Electrical/Mechanical Work shall run concurrently with the Structural contract.

1.3.2 CONTRACT GUARANTEE:

The successful Tenderer will NOT be required to submit a contract guarantee.

GUARANTEE PERIOD 1.3.3

The guarantee period for the Structural Work and all materials must be for a minimum of TWELVE (12) months from the date of

The guarantee period for Electrical and Mechanical Installations shall be for a minimum of Twelve (12) Months from the date of first delivery.

1.3.4 SITE AND MODE OF PROCEDURE

The work contained in this contract will be carried out on the site of the existing Institution.

The Contractor is advised that the existing premises will be occupied throughout the period of the contract.

Damage to existing buildings - Tenderers to note that any damages done or occurring to any of the buildings will be repaired at the expense of the contractor/ Tenderer.

The repairs must be to the satisfaction of the KwaZulu-Natal Department of Health.

SATISFACTORY INSTALLATION 1.3.5

The whole of the installation shall be carried out in accordance with the South African Bureau of Standards Code of Practice for the application of National Building Regulations, the KZNPA Standard Preambles to all Trades, the KZNPA General Electrical Specification, the South African Bureau of Standards Code of Practice for the Wiring of Premises 0142-1 and the Occupational Health and Safety Act 85 of 1993 as amended.

Copies of the KZNPA Standard Preambles to all Trades and the KZNPA General Electrical Specification are available at the office of the Secretary for Health - KwaZulu-Natal and can be obtained on request.

CERTIFICATE OF COMPLIANCE: Certificate of Compliance 1.3.6

TECHNICAL SPECIFICATION 2.

GENERAL 2.1

This TECHNICAL SPECIFICATION shall be read in conjunction with all other sections of the SPECIFICATION and cognisance shall be taken of the clauses relevant to this particular installation, whether any specific clauses are referred to or not.

SCOPE OF WORK. 3.

The work to be carried out under this contract includes the supply of all materials, equipment and Labour to carry out to Supply and install hard wood double door and outside door burglar guard x2(heavy duty)

The work comprises of:

HARD WOOD DOUBLE DOOR

- Must be outside opening
- Plu-back hardwood door
- Hardwood framed and ledged in 2 leaves with rebated meeting stiles and rebate conversion
- Mortice lockset (union type lock) and flush bolt
- Door size =2.030 x 44mm

<u>SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT</u> PHARMACY

DATE: ZNQ NO:

/20-21

Briefing meeting:

@11:00

Closing date:

DEPARTMENT OF HEALTH

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY

ZNO: /20-21

OUTSIDE DOOR BURGLAR X2 (HEAVY DUTY)

- Must have in 2leaves and hinges
- Supply and fit 2padbolt on the top of the door
- Size of burglar H=2.030m X 1.675m
- Material must be a square tube and galvanized (KZN burglar guard)

NB: The pharmacy will be operational at all times and the Contractor is to ensure that accessibility by the staff and public is not obstructed in any way.

4. PERIOD OF CONTRACT

08 (Eight Weeks) as the Contract Period for the completion of the Work from date of Site handover

SCHEDULE OF RATES

3.1 ITEMS AND PRICING

The Department reserves the right to place an order for any quantities of items included in the Schedules. The Schedule of Rates must also not be assumed to include and describe every detail of the supply requirement, but must be taken and read in conjunction with the other parts of the document. Thus the supplier shall not have claim for further payment in respect of any order which may be described or implied in the contract, although apparently no corresponding items are given in the Schedule of Rates. The supplier shall be deemed to have satisfied himself before quoting as to the correctness and sufficiency of his quote for the contract and of the rates and prices stated in the Schedule of Rates.

3.2 TAX AND DUTIES

Prices, quoted and paid, must include all customs, excise and import duties, and any other tariffs or taxes levied by the government or statutory body having jurisdiction on the goods provided under this contract, including Value Added Tax (applicable to the current rate).

3.3 RATES

Except where provision is made in the Schedule of Rates, the rates and prices inserted shall be the full rates and prices for the service delivered described under the respective items and shall cover all labor, transport, overhead charges and profit, etc. as well as the general liabilities, obligations and risks arising out of the Conditions of Contract, the overhead charges and profit being spread proportionately over the rates of the relative items in the Schedule of Rates.

SCHEDULE OF RATES

WORK TO BE DONE AND SCHEDULE OF PRICES:

| Item | DESCRIPTION | UNIT | QTY | RATE/ U | INIT | TOTAL | | |
|------|--|------|-----|--|------|-------|---|--|
| | | | | R | С | R | С | |
| | NOTE: All rates for items contained in this Schedule of Prices must be computed excluding the applicable Sales Tax. The Administration reserves the right to Negotiate prices in the Bill of Quantities. | | | The state of the s | | | | |

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT

PHARMACY

DATE: ZNQ NO:

/20-21

Briefing meeting: Closing date: @11:00 @ 11:00

3

DEPARTMENT OF HEALTH

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT <u>PHARMACY</u>

/20-21 ZNQ:

| | | | | | · |
|---|------|----------|-----|---|------------------|
| SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR A | ND | | | | |
| OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY | | | | | |
| ZNQ: /20-21 | | | | | [|
| | | | | 1 | |
| All rates quoted shall be inclusive of transport, labour and profit. | | | | | |
| The Tenderer is advised that the buildings are Occupied. | | | | | |
| LEBORDICTARY ARTICLES: | | | 1 | | |
| All equipment and material used in this contract shall be that which is | 1 | | [[| 1 | |
| specified or other approved. | | | 1 | | |
| HARD WOOD DOUBLE DOOR | İ | | | | |
| Plu-back hardwood door | | | | | |
| | _ | | | | |
| Hardwood framed and ledged in 2 leaves with rebated meeting | 9 | |] | | |
| stiles and rebate conversion | unit | 02 | | | |
| Mortice lockset (union type lock) and flush bolt | unit | 02 | | | <u> </u> |
| Door size =2.030 x 0,44m | m | 02 | | | ļ |
| OUTSIDE DOOR BURGLAR X2 (HEAVY DUTY) | | | | ļ | |
| Must have in 2leaves and hinges | Unit | 02 | | | |
| Supply and fit 2padbolt on the top of the door | unit | 02 | | | |
| | unit | 02 | | | |
| Size of burglar H=2.030m X 1.675m Material must be a square tube and galvanized (KZN | | | | | 1 |
| Material must be a square tube and galvanized (1/2) | | | | | |
| burglar guard) | | | | | |
| NOTE: | | | | | |
| Contractor is to ensure that all work is carried out in accordance | | | | | |
| with the pre-ambles to all trades. The contractor to use District Health office parking as part of their | | | | | |
| | | | | | |
| sample as is. A provision of EPWP staff must be made available and Contractor | to | | 1 | Ì | |
| allow for the provision of Personal Protective Equipment (PPE) for | his | | | | |
| or her employees on the site. Safety plan to be submitted to the | | | 1 | | |
| 00. District Engineer for approval before commencing the work. | | | | | |
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COLLECTION SUMMARY

| PROJECT DESCRIPTION SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBL | E DOOR AND | D OUTSIDE DOOR I | BURGLAR (HEAVY DUTY) AT PHARMACY |
|--|------------|------------------|----------------------------------|
| SUFFET MATERIALISM. | ZNQ: | /20- <u>21</u> | |

NOTE:

THIS COLLECTION SUMMARY MUST BE COMPLETED IN FULL BY THE CONTRACTOR AND RETURNED TOGETHER WITH THE QUOTATION FORM.

| Collection Summary PS 1 | R | |
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| SUB-TOTAL: CARRIED TO QUOTATION FORM | R | |

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY

DATE:

/20-21 ZNQ NO:

Briefing meeting: @11:00 Closing date:

DEPARTMENT OF HEALTH <u>SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT</u> <u>PHARMACY</u>

ZNO: /20-2

SECTION K

SCHEDULE OF VARIATIONS FROM GOODS OR SERVICES INFORMATION

Should the Tenderer wish to make any departure from or modifications in the Special Conditions of Contract, Specifications, Schedule list of Prices/ Quantities/ Drawings or to qualify the quotation in any way, he/she shall indicate the proposals clearly hereunder or alternatively make photocopies of the original quotation documentation.

| SECTION | PAGE | VARIATION: CLAUSE OR ITEM |
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<u>SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY</u>

DATE:

ZNQ NO:

/20-21

Briefing meeting: Closing date: @11:00 @ 11:00

DEPARTMENT OF HEALTH DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT

ZNO:

SCHEDULE OF ALTERNATIVE QUOTATIONS

Consideration will be given to alternative offers, which the Tenderer may wish to submit. Such offers shall be described, measured and priced in sufficient detail to enable the Province to evaluate the alternative. He/she shall set out his/her proposal clearly hereunder or alternatively make photocopies of the original quotation documentation.

| SECTION | PAGE | ITEM |
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SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT

PHARMACY DATE: ZNQ NO:

/20-21

Briefing meeting: Closing date:

@11:00

DEPARTMENT OF HEALTH SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY

ZNQ: /20-21

SCHEDULE OF REFERENCES

References of previous work completed for the department of health or other to be listed below.

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IMPORTANT

THIS FORM IS ONLY TO BE INCLUDED AND COMPLETED WHEN APPLICABLE TO THE QUOTATION.

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY

DATE:

ZNQ NO:

/20-21

Briefing meeting: Closing date:

: @11:00

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PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT

/20-21

QUESTIONNAIRE

| | | REPLIES |
|-------------|--|--|
| 1. | Are the prices/rates quoted firm? | |
| 2. | Is the delivery period stated firm? | |
| 3. | How will delivery be affected? | |
| 4. | Is the equipment guaranteed for a minimum period of six months? | |
| 5. | Are you the accredited agents in the RSA for the Manufacture/ supply of the goods offered by you? | |
| 6. | What is the address in the RSA (preferably in the Province of KwaZulu-Natal) where a machine/ goods as offered by you can be inspected under working conditions? | |
| 7. | What is the approximate value of spares carried in stock in the RSA for this particular make and model of machine? | |
| 8. | Where are stock held? | |
| 9. | What facilities exist for the servicing of the Machine/goods offered? | |
| 10. | Where are these facilities available? | |
| 11. | What are the names and addresses of the factories where the goods will be manufactured and, if required, inspected? | |
| 12. | Is a special import permit required? | |
| | SIGNATURE OF TENDERER | DATE |
| <u>SUPI</u> | SUMMARY FOR QUOTATION OPENING PU (To be completed by Tenderer PLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE | |
| REFEF | RENCE POINTS CLAIMED IN TERMS OF THE KWAZULU-NATAL PROCUR MED AS INDICATED IN THE GENERAL CONDITIONS AND PROCEDURES - | EMENT REGULATION, 2001 (PREFERENCES ARE T - ZNT6) |
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| CLA | QUOTATION PRICE INCLUDING V.A.T. R | |

SUPPLY MATERIAL AND INSTANCE
PHARMACY
DATE:
ZNQ NO: /20-21
Briefing meeting: @11:00
Closing date: @ 11:00

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PROVINCE OF KWAZULU-NATAL

DEPARTMENT OF HEALTH

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT

| | TIME FOR COMPLETION/ DELIVERY: | 08 (Eight weeks) | | |
|----|---|---|-----|----|
| | Mari | IMPORTANT k appropriate block with "X" | | |
| 1. | HAVE ANY ALTERATIONS BEEN MADE? | | YES | NO |
| 5. | HAS AN ALTERNATIVE QUOTATION BEEN SUBMITTED? | | YES | NO |
| i. | IF APPLICABLE: DID THE TENDERER ATT COMPULSORY SITE INSPECTION? | END THE OFFICIAL BRIEFING SESSION/ | YES | NO |

SUPPLY MATERIAL AND INSTALL HARDWOOD DOUBLE DOOR AND OUTSIDE DOOR BURGLAR (HEAVY DUTY) AT PHARMACY DATE: ZNQ NO:

/20-21

Briefing meeting: @11:00

Closing date: