| HFACTH  FEETING OF SOUTH ANNOX                        | KZN Health Intranet  | Search this site                        |      |
|---|--|---|------|
|   |  | TRICT OFFICES HEALTH FACIL              | IIIE |
| alth > Components > Supply Chain Managemeni<br>:Quote |  |   |      |
| KWAZULU-NATAL PROVIN                                  | ce<br>Quotation Advert   |   |      |
| Opening Date:   | 2021-05-19   |   |      |
| Closing Date:   | 2021-05-26   |   |      |
| Closing Time:   | 11:00  | · · · · · · · · · · · · · · · · · · ·   |      |
| INSTITUTION DETAILS                                   |  |   |      |
| Institution Name:                                     | eThekwini Metro district office                                  | V                                       |      |
| Province:   | KwaZulu-Natal  |   |      |
| Department or Entity:                                 | Department of Health   |   |      |
| Division or section:                                  | Central Supply Chain Management                                  |   |      |
| Place where goods / services is required              | Cato Manor Community Health Centre                               |   |      |
| Date Submitted  | 2021-05-19   |   |      |
| ITEM CATEGORY AND DETAILS                             |  |   |      |
| Quotation Number:                                     | ZNQ:<br>CAT/49/05/21-22  |   |      |
| Item Category:  | Goods  | $\mathbf{\nabla}$                       |      |
| Item Description:                                     | Disposable Surgical Isolation Wrap Gown (Large)                  |   |      |
| Quantity (if supplies)                                | 990 boxes  |   |      |
| COMPULSORY BRIEFING SESSION                           |  | }                                       |      |
| Select Type:  | Not Applicable   |   |      |
| Date:   |  |   |      |
| Time:   |  |   |      |
| Venue:  |  | 1 100 100 100 100 100 100 100 100 100 1 |      |
| QUOTES CAN BE COLLECTED FROM:                         | 83 KING CETSHWAYO HIGHWAY, HIGHWAY HOUSE, MAYVILLE, DUR          | RBAN                                    |      |
| QUOTES SHOULD BE DELIVERED TO:                        | 83 KING CETSHWAYO HIGHWAY, HIGHWAY HOUSE, MAYVILLE, DUR          | RBAN                                    |      |
| ENQUIRIES REGARDING THE ADVE                          | RT MAY BE DIRECTED TO:   |   |      |
| Name:   | Lizelle Derby / Nontsikelelo Hlophe                              | 7,5,111                                 |      |
| Email:  | Lizelle.derby@kznhealth.gov.za / Nontsikelelo.hlophe@kznhealth.g | gov.za                                  |      |
| Contact Number:                                       | 031 240 5338 / 5517  |   |      |
| Finance Manager Name:                                 | Valerie Marais   |   |      |
|   | Modes  |   |      |

| STA   | ANDARD QUOTE DO                         | CUMENTATION                             | SUPPLY                                  | CHAI           | NAN.          | AGE         | MENT            | OVE      | R R30   | 000.    | .00    |      |           |      |                 |
|---|---|---|---|----------------|---------------|-------------|-----------------|----------|---------|---------|--------|------|-----------|------|-----------------|
| YOU ARE HEREBY INVITI   | ED TO QUOTE FOR                         | REQUIREMENT                             | S AT:.ET                                | HEKV           | VINI D        | ISTF        | RICT            | OFFI     | CE      |         |        |      |           |      |                 |
| DATE ADVERTISED:  | /05/2021                                | CLOS                                    | ING DAT                                 | E: 26/         | 05/2          | 021         |                 |          |         | CLO     | SING   | TIME | E; 11     | :00  |                 |
| FACSIMILE NUMBER:   | 86 730 0091                             | E-MA                                    | IL ADDR                                 | ESS:           | /aleri        | e.m         | narai           | s@       | KZNI    | ieal    | ın.g   | OV.2 | za<br>    |      |                 |
| PHYSICAL ADDRESS: .83   | 3 KING CETSH                            | WAYO HIGI                               | HWAY                                    | , MA`          | /VILL         | .E, I       | DUR             | BAN      | 1,40    |         |        |      |           |      |                 |
| CATIA   | 0/05/21_22                              |   |   |                |               |             |                 |          | <u></u> |         |        |      |           |      |                 |
| ZNQ NUMBER: CAT/49  |   | <br>CICAL 187                           |   | ION            | WD.           | ۸ D         | GO              | ۱۸/۸     | 1717    | ΔR      | 3E,    | ١    |           |      |                 |
| DESCRIPTION: DISPO  |   |   |   |                | V V I \/      |             |                 |          |         |         |        |      |           |      |                 |
| CONTRACT PERIOD   | (if applicable)                         | VALIDITY PEF                            | RIOD 60 (                               | Days           |               | :           | SARS            | PIN      |         |         |        |      |           |      |                 |
| CENTRAL SUPPLIER DATA   | ABASE REGISTRATIO                       | ON (CSD) NO.                            |   |                |               |             |                 |          |         |         |        |      |           |      |                 |
| UNIQUE REGISTRATION F   | REFERENCE                               | 1 T-1 T                                 | <del></del>                             |                |               | T7          |                 |          |         |         | т т    |      |           |      | T T             |
|   |   |   |   |                |               |             | <u> </u>        |          |         |         |        |      |           |      |                 |
| DEPOSITED IN THE QUOT   |   |   |   |                |               |             |                 |          |         |         |        |      |           |      |                 |
| 83 KING CETSH   | IWAYO HIGH                              | IWAY, MA                                | YVILI                                   | _E, [          | DUR           | BA          | N,4(            | 000      |         |         |        |      | · · · · · |      |                 |
|   |   |   |   | .,,,,,,,,,,,   |               |             |                 |          |         |         |        |      |           |      |                 |
| Bidders should ensure the consideration.  | hat quotes are deliv                    | rered timeously                         | to the c                                | correct        | addre         | ss. I       | f the           | quot     | e is la | ite, it | : will | not  | be a      | acce | pted fo         |
| The quote box is open from  | o 08:00 to 15:30.                       |   |   |                |               |             |                 |          |         |         |        |      |           |      |                 |
| ALL QUOTES MUST BE SU   | UBMITTED ON THE (                       | OFFICIAL FORM                           | IS – (NOT                               | г то в         | E RE-T        | YPE         | D)              |          |         |         |        |      |           |      |                 |
| 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. |   |   |   |                |               |             |                 |          |         |         |        |      |           |      |                 |
|   | THE F<br>(FAILURE TO DO                 | OLLOWING PAR<br>O SO WILL RESI          | RTICULA<br>ULT IN Y                     | RS MU<br>OUR Q | ST BE<br>UOTE | FUR<br>BEIN | NISHE<br>IG DIS | D<br>QUA | LIFIE   | D)      |        |      |           |      |                 |
| NAME OF BIDDER .  |   |   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                |               |             |                 |          |         |         |        |      |           |      |                 |
| POSTAL ADDRESS .  | *************************************** | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |   | ,,,,,,,,,,     |               |             |                 | ,,,,,,,, |         |         |        | •••• |           |      |                 |
| STREET ADDRESS .  | *************************************** | *****************                       |   |                |               |             |                 |          |         |         |        |      |           |      |                 |
| TELEPHONE NUMBER  | CODENUMBER                              | R                                       | F <i>i</i>                              | ACSIM          | LE NU         | MBE         | R C             | ODE      |         | .NUN    | /BER   | l    |           |      |                 |
| CELLPHONE NUMBER .  | «»···                                   | *******************                     |   |                | •••••         |             |                 |          |         |         |        |      | ••••      |      |                 |
| E-MAIL ADDRESS  |   |   |   |                |               | •••••       |                 |          |         |         |        |      |           | •••• |                 |
| VAT REGISTRATION NUM  | vIBER (If VAT vendor)                   | (                                       |   |                |               |             |                 |          |         |         |        |      |           | . •  | , (, , , 4 + 1) |
| HAS A B-BBEE STATUS L   | _EVEL VERIFICATION                      | N CERTIFICATE                           | BEEN S                                  | UBMIT          | TED? (        | SBD         | 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                     | <sub>R:</sub> ETK/49/05/2               | 1-22                                    |        |
|----------------------------|--|---|-------------------------------|---|---|--------|
| DESCRIPTION                | ON: DISP   | OSABLE SURGICAL ISOLATION                   | ON WRAP GC                    | WN (LARGE)                              | *************************************** |        |
| SIGNATURE<br>(By signing t | OF BIDDER  | I hereby agree to all terms and conditions] | DATE                          |   | ,                                       |        |
|                            |  | CH THIS QUOTE IS SIGNED                     |                               | *************************************** |   |        |
| Item No                    | Quantity   | Description                                 | Brand & model                 | Country of manufacture                  | Price<br>R                              | c      |
| 1                          | 990 BOXES  | DISPOSABLE SURGICAL ISOLATION WRAP GOWN (   | LARGE)                        |   |   |        |
|                            |  | AS PER SPECIFICATION ATTACHED               |                               |   |   |        |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   | -      |
|                            |  |   |                               |   |   | _      |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   | -      |
|                            |  |   |                               |   |   | _      |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   |        |
|                            | <del>                                     </del> | DELIVERY ADDRESS:                           |                               |   |   |        |
|                            |  | CATO MANOR COMMUNITY HEALTH CEN             | TRE                           |   |   |        |
|                            |  | 25 KALANDEN ROAD                            |                               |   |   |        |
|                            |  | DURBAN                                      |                               |   |   | _      |
|                            |  |   |                               |   |   | _      |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   |        |
|                            |  |   |                               |   |   | -      |
|                            |  |   |                               |   |   | _      |
|                            |  |   |                               |   |   | +      |
| VALUE A                    | DDED TAX @                                       | <br>⊋ 15% (Only if VAT Vendor)              |                               |   |   | $\top$ |
| 1                          |  | PRICE (VALIDITY PERIOD 60 Days)             |                               |   |   |        |
|                            |  |   | L. L. O from To The C         | ANC/CARC Coop                           | ification?                              |        |
| Does This                  |  | That the opening                            | y Period E.G. <i>E.G. 1da</i> | .A.N.S. / S.A.B.S. Spec<br>v. 1week     | IIICaliOiT                              |        |
| is the Filo                | C I Half   | page bollier                                |                               |   |   |        |
| Contact F                  | erson: Lize                                      | IIa /Nteiki +4:031 2405338 i                |                               | chnical information ma                  |   |        |

# **DECLARATION OF INTEREST**

| blood relationship, may r limited quote or proposal employed by the state, of declare his/her position in the bidder is employed the legal person on w evaluation and or adju on whose behalf the of   | nake an offer or offers in terms of<br>). In view of possible allegations<br>or to persons connected with or<br>n relation to the evaluating/adjud<br>d by the state; and/or<br>those behalf the bidding document<br>idication of the quote(s), or whe<br>eclarant acts and persons who a | of this invitation to quote (includes as of favouritism, should the resulting related to them, it is required that icating authority where-  ent is signed, has a relationship were it is known that such a relations are involved with the evaluation and |  |
|--|---|--|--|
| 2. In order to give effect to  | the above, the following question   | naire must be completed and subr   | nitted with the quote.   |
| 2.2. Identity Number:  | resentative   | 2.5. Tax Reference Nu reholder <sup>2</sup> ):2.6. VAT Registration N  | ation Number:mber:   |
| 2.7. The names of all direct employee / persal number 2.8. Are you or any person of 2.8.1. If so, furnish the following of person / directors and person / direc | ors / trustees / shareholders / mo<br>pers must be indicated in paragra<br>connected with the bidder preser<br>ng particulars:  | embers, their individual identity nur<br>aph 3 below.<br>htly employed by the state?   | nbers, tax reference numbers and, if applicable, [TICK APPLICABLE]  YES NO                           |
| Name of state institution Position occupied in the 2.8.2. If you are presently e in the public sector? 2.8.2.1. If yes, did you attac  | at which you or the person conr<br>state institution:   | nected to the bidder is employed: Any other particular the appropriate authority to un quote document? The may result in the disqualification  | culars:  Indertake remunerative work outside employment  YES NO  Of the quote.)                      |
| 2.8.2.2. If no, furni<br>2.9. Did you or your spouse<br>state in the previous tw   | sh reasons for non-submission on<br>the company's direct<br>elve months?  | if such proof:ors / trustees / shareholders / merr   | bers or their spouses conduct business with the  |
| 2.10. Do you, or any person may be involved with the   | connected with the bidder, have<br>ne evaluation and or adjudication  | any relationship (family, friend, oth<br>of this quote?  | er) with a person employed by the state and who  |
| 2.11. Are you, or any person employed by the state   | connected with the bidder, awar<br>who may be involved with the ev  | e of any relationship (family, friend,<br>raluation and or adjudication of this  | other) between any other bloder and any person quote?  YES NO  |
| 2.12. Do you or any of the di  | ectors / trustees / shareholders /<br>for this contract?  | members of the company have an   | y interest in any other related companies whether YES NO   |
| 3. Full details of director NB: The Department Of He   | s / trustees / members / share<br>alth will validate details of directails are un-to-date and verified  | holders.<br>tors / trustees / members / share  | cholders on CSD. It is the suppliers' responsibility validate the information on CSD, the quote will |
| 4 DECLARATION  |   |  |  |
| I, THE UNDERSIGNED<br>FURNISHED IN PARAC   | (NAME)<br>3RAPHS 2.   |  | CERTIFY THAT THE INFORMATION   |
|  |   | QUOTE OR ACT AGAINST N   | THE SHOULD THIS DECLARATION  |
| Name of bidder   | <br>Signature   | Position   | Date   |

- "State" means —
  a) any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999);
  b) any municipality or municipal entity;
- c) provincial legislature;
  d) national Assembly or the national Council of provinces; or
  e) Parliament.

<sup>&</sup>quot;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.

#### SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

#### 1. AMENDMENT OF CONTRACT

1.1. Any amendment to or renunciation of the provisions of the contract shall at all times be done in writing and shall be signed by both parties.

#### 2. CHANGE OF ADDRESS

2.1. Bidders must advise the Department of Health (institution where the offer was submitted) should their address (domicilium citandi et executandi) details change from the time of bidding to the expiry of the contract.

## 3. GENERAL CONDITIONS ATTACHED TO THIS QUOTATION

- 3.1. The institution is under no obligation to accept the lowest or any quote.
- 3.2. The price quoted must include VAT (if VAT vendor). However, it must be noted that the department reserves the right to evaluate all quotations excluding VAT as some bidders may not be VAT vendors.
- 3.3. The bidder must ensure the correctness & validity of quote:
  - (i) that the price(s), rate(s) & preference quoted cover all for the work/item (s) & accept that any mistakes regarding the price (s) & calculations will be at the bidder's risk
- 3.4. The bidder must accept full responsibility for the proper execution & fulfilment of all obligations conditions devolving on under this agreement, as the Principal (s) liable for the due fulfilment of this contract.
- 3.5. This quotation will be evaluated based on the 80/20 points system, specification & correctness of information. All required documentation must be completed in full and submitted.
- 3.6. Offers must comply strictly with the specification.
- 3.7. Only offers that meet or are greater than the specification will be considered.
- 3.8. Late quotes will not be considered.
- 3.9. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six months.
- 3.10. A bidder not registered on the Central Suppliers Database or verification has failed will not be considered.
- 3.11. All delivery costs must be included in the quote price, for delivery at the prescribed destination.
- 3.12. Only firm prices will be accepted. Such prices must remain firm for the contract period. Non-firm prices (including rates of exchange variations) will not be considered.
- 3.13. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 3.14. In the event of a bidder having multiple quotes, only the cheapest according to specification will be considered. Furthermore a verification will be done to identify if bidders have multiple companies and are quoting (cover-quoting) for this bid. In such instances only the cheapest bid according to specification will be considered.

# 4. SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS QUOTATION.

- 4.1. Unless inconsistent with or expressly indicated otherwise by the context, the singular shall include the plural and vice versa and with words importing the masculine gender shall include the feminine and the neuter.
- 4.2. Under no circumstances whatsoever may the quotation/bid forms be retyped or redrafted. Photocopies of the original bid documentation may be used, but an original signature must appear on such photocopies.
- 4.3. The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated.
- 4.4. Quotation submitted must be complete in all respects.
- 4.5. Any alteration made by the bidder must be initialled.
- 4.6. Use of correcting fluid is prohibited
- 4.7. Quotation will be opened in public as soon as practicable after the closing time of quotation.
- 4.8. Where practical, prices are made public at the time of opening quotations.
- 4.9. If it is desired to make more than one offer against any individual item, such offers should be given on a photocopy of the page in question. Clear indication thereof must be stated on the schedules attached.

# 5. SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

- 5.1. Quotation shall be lodged at the address indicated not later than the closing time specified for their receipt, and in accordance with the directives in the quotation documents.
- 5.2. Each quotation shall be addressed in accordance with the directives in the quotation documents and shall be lodged in a separate sealed envelope, with the name and address of the bidder, the quotation number and closing date indicated on the envelope. The envelope shall not contain documents relating to any quotation other than that shown on the envelope. If this provision is not complied with, such quotations/bids may be rejected as being invalid.
- 5.3. All quotations received in sealed envelopes with the relevant quotation numbers on the envelopes are kept unopened in safe custody until the closing time of the quotation/bids. Where, however, a quotation is received open, it shall be sealed. If it is received without a quotation/bid number on the envelope, it shall be opened, the quotation number ascertained, the envelope sealed and the quotation number written on the envelope.
- 5.4. A specific box is provided for the receipt of quotations, and no quotation found in any other box or elsewhere subsequent to the closing date and time of quotation will be considered.

- 5.5. No quotation/bid sent through the post will be considered if it is received after the closing date and time stipulated in the quotation documentation, and proof of posting will not be accepted as proof of delivery.
- 5.6. Quotation documents must not be included in packages containing samples. Such quotations may be rejected as being invalid.

## 6. SAMPLES

- 6.1. In the case of the quote document stipulating that samples are required, the supplier will be informed in due course when samples should be provided to the institution. (This decreases the time of safety and storage risk that may be incurred by the respective institution). The bidders sample will be retained if such bidder wins the contract.
- (i) If a company/s who has not won the quote requires their samples, they must advise the institution in writing of such.
- (ii) If samples are not collected within three months of close of quote the institution reserves the right to dispose of them at their discretion.
- 6.2. Samples must be made available when requested in writing or if stipulated on the document.
- (i) If a Bidder fails to provide a sample of their product on offer for scrutiny against the set specification when requested, their offer will be rejected. All testing will be for the account of the bidder.

# 7. COMPULSORY SITE INSPECTION / BRIEFING SESSION

| 7.1. Bidders who fail to attend the compulsory meeting will be disqu                     | Bidders who fail to attend the compulsory meeting will be disqualified from the evaluation process. |  |  |  |  |
|--|---|--|--|--|--|
| (i) The institution has determined that a compulsory site meeting (ii) Date/ Time: Place | take place  |  |  |  |  |
| Institution Stamp:   | Institution Site Inspection / briefing session Official   |  |  |  |  |
|  | Full Name:  |  |  |  |  |
|  | Signature:  |  |  |  |  |
|  | Date:   |  |  |  |  |

## 8. STATEMENT OF SUPPLIES AND SERVICES

8.1. The contractor shall, when requested to do so, furnish particulars of supplies delivered or services executed. If he/she fails to do so, the Department may, without prejudice to any other rights which it may have, institute inquiries at the expense of the contractor to obtain the required particulars.

#### 9. SUBMISSION AND COMPLETION OF SBD 6.1

9.1. Should a bidder wish to qualify for preference points they must complete a SBD 6.1 document. Failure by a bidder to provide all relevant information required, will result in such a bidder not being considered for preference point's allocation. The preferences applicable on the closing date will be utilized. Any changes after the closing date will not be considered for that particular quote.

## 10. TAX COMPLIANCE REQUIREMENTS

- 10.1. In the event that the tax compliance status has failed on CSD, it is the suppliers' responsibility to provide a SARS pin in order for the institution to validate the tax compliance status of the supplier.
- 10.2. In the event that the institution cannot validate the suppliers' tax clearance on SARS as well as the Central Suppliers Database, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17.

## 11. TAX INVOICE

- 11.1. A tax invoice shall be in the currency of the Republic of South Africa and shall contain the following particulars:
- (i) the name, address and registration number of the supplier;
- (ii) the name and address of the recipient;
- (iii) an individual serialized number and the date upon which the tax invoice is issued:
- (iv) a description and quantity or volume of the goods or services supplied;
- (v) the official department order number issued to the supplier;
- (vi) the value of the supply, the amount of tax charged;
- (vii) the words tax invoice in a prominent place.

## 12. PATENT RIGHTS

The supplier shall indemnify the KZN Department of Health (hear after known as the purchaser) against all third-party claims of infringement of patent, trademark, or industrial design rights arising from use of the goods or any part thereof by the purchaser.

#### 13. PENALTIES

- 13.1. If at any time during the contract period, the service provider is unable to perform in a timely manner, the service provider must notify the institution in writing/email of the cause of and the duration of the delay. Upon receipt of the notification, the institution should evaluate the circumstances and, if deemed necessary, the institution may extend the service provider's time for performance.
- In the event of delayed performance that extends beyond the delivery period, the institution is entitled to purchase commodities of a similar quantity and quality as a substitution for the outstanding commodities, without terminating the contract, as well as return commodities delivered at a later stage at the service provider's expense.
- Alternatively, the institution may elect to terminate the contract and procure the necessary commodities in order to complete the contract. In the event that the contract is terminated the institution may claim damages from the service provider in the form of a penalty. The service provider's performance should be captured on the service provider database in order to determine whether or not the service provider should be awarded any contracts in the future.
- 13.4. If the supplier fails to deliver any or all of the goods or to perform the services within the period(s) specified in the contract, the purchaser shall, without prejudice to its other remedies under the contract, deduct from the contract price, as a penalty, a sum calculated on the delivered price of the delayed goods or unperformed services using the current prime interest rate calculated for each day of the delay until actual delivery or performance.

# 14. TERMINATION FOR DEFAULT

- 14.1. The purchaser, without prejudice to any other remedy for breach of contract, by written notice of default sent to the supplier, may terminate this contract in whole or in part:
- if the supplier fails to deliver any or all of the goods within the period(s) specified in the contract,
- if the supplier fails to perform any other obligation(s) under the contract; or
- if the supplier, in the judgment of the purchaser, has engaged in corrupt or fraudulent practices in competing for or in executing the (iii) contract.
- In the event the purchaser terminates the contract in whole or in part, the purchaser may procure, upon such terms and in such manner as it deems appropriate, goods, works or services similar to those undelivered, and the supplier shall be liable to the purchaser for any excess costs for such similar goods, works or services.
- Where the purchaser terminates the contract in whole or in part, the purchaser may decide to impose a restriction penalty on the supplier by prohibiting such supplier from doing business with the public sector for a period not exceeding 10 years.
- 15. FAILURE TO COMPLY WITH ABOVE WILL RESULT IN YOUR QUOTE BEING PASSED OVER.

# PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2017

This preference form must form part of all quotes invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (B-BBEE) Status Level of Contribution

NB: BEFORE COMPLETING THIS FORM, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF B-BBEE, AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.

#### GENERAL CONDITIONS

- 1.1 The following preference point systems are applicable to all quotes:
  - the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- 1.2 The value of this quote is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the 80/20 preference point system shall be applicable.
- 1.3 Points for this quote shall be awarded for:
  - (a) Price; and
  - (b) B-BBEE Status Level of Contributor.
- 1.4 The maximum points for this quote is allocated as follows:

|   | POINTS |
|---|--------|
| PRICE   | 80     |
| B-BBEE STATUS LEVEL OF CONTRIBUTOR                | 20     |
| Total points for Price and B-BBEE must not exceed | 100    |

- Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the quote, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.
- 1.6 The purchaser reserves the right to require of a bidder, either before a quote is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

#### 2. DEFINITIONS

- (a) "B-BBEE" means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic Empowerment Act;
- (b) "B-BBEE status level of contributor" means the B-BBEE status of an entity in terms of a code of good practice on black economic empowerment, issued in terms of section 9(1) of the Broad-Based Black Economic Empowerment Act;
- (c) "bid" means a written offer in a prescribed or stipulated form in response to an invitation by an organ of state for the provision of goods or services, through price quotations, advertised competitive bidding processes or proposals;
- (d) "Broad-Based Black Economic Empowerment Act" means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003);
- (e) "EME" means an Exempted Micro Enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (f) "functionality" means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- (g) "prices" includes all applicable taxes less all unconditional discounts;
- (h) "proof of B-BBEE status level of contributor" means:
  - 1) B-BBEE Status level certificate issued by an authorized body or person;
  - 2) A sworn affidavit as prescribed by the B-BBEE Codes of Good Practice;
  - Any other requirement prescribed in terms of the B-BBEE Act;
- (i) "QSE" means a qualifying small business enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (j) "rand value" means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

## 3. POINTS AWARDED FOR PRICE

# 3.1 THE 80/20 PREFERENCE POINT SYSTEMS

A maximum of 80 points is allocated for price on the following basis:

$$Ps = 80 \left(1 - \frac{Pt - P\min}{P\min}\right)$$
 Where

Ps = Points scored for price of bid under consideration

Pt = Price of bid under consideration
Pmin = Price of lowest acceptable bid

# 4. POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR

4.1 In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for attaining the B-BBEE status level of contribution in accordance with the table below:

| B-BBEE Status Level of Contributo | Number of points (80/20 system) |
|-----------------------------------|---------------------------------|
| 1                                 | 20                              |
| 2                                 | 18                              |
| 3                                 | 14                              |
| 4                                 | 12                              |
| 5                                 | 8                               |
| 6                                 | 6                               |
| 7                                 | 4                               |
| 8                                 | 2                               |
| Non-compliant contributor         | 0                               |

| 5.  | RIN | DECL | ARAT | ION  |
|-----|-----|------|------|------|
| iJ. | טוט |      | へいへい | 1011 |

- 5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:
- 6. B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1
- 6.1 8-BBEE Status Level of Contributor: = .......(maximum of 20 points)

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.

| proof of | B-BBEE status level of contributor.   |                       |
|----------|---|-----------------------|
| 7.       | SUB-CONTRACTING   | (Tick applicable box) |
| 7.1      | Will any portion of the contract be sub-contracted?                                   | YES NO                |
| 7.1.1    | If yes, indicate:   |                       |
| 8.       | i) What percentage of the contract will be subcontracted                              | (Tick applicable box) |
|          | in Consider by ticking the appropriate box if subcontracting with an enterprise in te | erms of VES NO        |

iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations,2017:

Designated Group: An EME or QSE which is at last 51% owned by:

Black people
Black people who are youth
Black people who are women
Black people with disabilities
Black people living in rural or underdeveloped areas or townships
Cooperative owned by black people
Black people who are military veterans

OR

Any EME
Any QSE

| 9.  | DECLAR  | ATION WITH REGARD TO COMPANY/FIRM  |   |
|-----|---------|--|---|
| 9.1 | Name    | of company/firm:   |   |
| 9.2 | VAT re  | gistration number:   |   |
| 9.3 | Compa   | ny registration number:  |   |
| 9.4 | TYPE (  | OF COMPANY/ FIRM (TICK APPLICABLE BOX  |   |
|     |         | Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited  |   |
| 9,5 |         | RIBE PRINCIPAL BUSINESS ACTIVITIES   |   |
| 9.6 |         |  |   |
|     |         | Supplier   |   |
|     |         | Professional service provider Other service providers, e.g. transporter, etc.  |   |
|     |         |  |   |
| 9.7 |         | umber of years the company/firm has been in bu   |   |
| 9.8 | the B-B | ne undersigned, who is / are duly authorised to on<br>BBE status level of contributor indicated in parage<br>ference(s) shown and I / we acknowledge that: | do so on behalf of the company/firm, certify that the points claimed, based on graphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for   |
|     | i) T    | he information furnished is true and correct;  |   |
|     | ii) T   | he preference points claimed are in accordance   | with the General Conditions as indicated in paragraph 1 of this form;   |
|     |         |  | sult of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may atisfaction of the purchaser that the claims are correct;   |
|     |         | the B-BBEE status level of contributor has been ave not been fulfilled, the purchaser may, in add  | n claimed or obtained on a fraudulent basis or any of the conditions of contract<br>lition to any other remedy it may have —  |
|     | (a)     | disqualify the person from the bidding process   | s;  |
|     | (b)     | recover costs, losses or damages it has incur  | 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 d 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   |
|     |         |  |   |

# **Derby Lizelle**

From: Pinky Dlamini <pinkygladys69@gmail.com>

Sent: 18 May 2021 03:02 PM

To: Derby Lizelle
Subject: Derby Lizelle
Hi am very sorry for the delay of the ice packs, I can't deliver them on time so It

better if you cancel the order m very sorry.

From Sbalukhulu G pty ltd.



DIRECTORATE: HEALTH SCM ETHEKWINI DISTRICT OFFICE

Tel: 031 2405397 Fax:031 2405359 Email: valerie.maraiskznhealth.gov.za

Ethekwini District Office

# SPECIFICATION NO. CAT/49/05/21-22

Specification for: DISPOSABLE SURGICAL ISOLATION WRAP GOWN

| CLAUSE | SPECIFICATION / REQUIREMENT   | BIDDERS COMMENTS:<br>STATE "COMPLIES"<br>OR "DOES NOT<br>COMPLY" |  |  |  |  |
|--------|---|--|--|--|--|--|
| 1      | Disposable hospital wrap gown   |  |  |  |  |  |
| 2      | Style: "round" neck – Velcro adjustable                               |  |  |  |  |  |
| 3      | Long sleeved gown with medical cuffs                                  |  |  |  |  |  |
| 4      | Medical cuffs made from cotton, latex free, non-itching or irritation |  |  |  |  |  |
| 5      | Spun bonded, non-woven material, either PP,PP+PE,SMS,SF               |  |  |  |  |  |
| 6      | Waterproof and antistatic,  |  |  |  |  |  |
| 7      | Bacterial barrier efficiency  |  |  |  |  |  |
| 8      | Body ± 54 gram  |  |  |  |  |  |
| 9      | Reinforced in chest and forearm areas                                 |  |  |  |  |  |
| 10     | Light weight, durable, breathable and comfortable                     |  |  |  |  |  |
| 11     | Colour: blue  |  |  |  |  |  |
| 12     | Size: Large   |  |  |  |  |  |
| 13     | Packaging: 1 set in poly bag each, in sets of 20 per                  |  |  |  |  |  |
|        | packaging   |  |  |  |  |  |
| T14    | Comments:   |  |  |  |  |  |
|        | ,   |  |  |  |  |  |
|        |   |  |  |  |  |  |
|        |   |  |  |  |  |  |
|        |   |  |  |  |  |  |
|        |   |  |  |  |  |  |

| NAME OF COMPANY  |  |  |
|--|--|--|
| INITIAL AND SURNAME OF PERSON COMPLETING DOCUMENT  |  |  |
| DATE   |  |  |
| COMPANY STAMP  |  |  |
| # Bidder to <b>INITIAL</b> and <b>DATE</b> all pages. All completed documents must be returned with QUOTATION. |  |  |
| QUOTATION.   |  |  |

