

KZN Health Intranet KZN HEALTH

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AdvertQuote

	KWAZULU-NATAL PROV HEALTH REPUBLIC OF SOUTH AFRICA	Quotation Advert	
Opening Date		2021-05-12	
Closing Date:		2021-05-18	30
Closing Time:		11:00	Las
INSTITUTIO	N DETAILS		
Institution Na	ne:	Grey's hospital	•
Province:		KwaZulu-Natal	
Department or	Entity:	Department of Health	
Division or se	ction:	Central Supply Chain Management	
Place where g	oods / services is required	GREY'S- THEATRE	
Date Submitte	d	2021-05-12	10
ITEM CATE	GORY AND DETAILS		
Quotation Nur	nber:	ZNQ: GRH4575/02/21	
Item Category	:	Goods	~
Item Descripti	on:	TROCAR AND CANNULAR 4MM, FOR MAXILLARY SINUS GERMAN- SURGICAL STAINLESS 10-15 YEAR WARRANTY	
Quantity (if su	pplies)	3 PAIRS	
COMPULSO	RY BRIEFING SESSION	I / SITE VISIT	
Select Type:		Not Applicable	•
Date :			<u> </u>
Time:			
Venue:			
QUOTES CAN	BE COLLECTED FROM:	DEPARTMENTAL WEBSITE	
QUOTES SHOULD BE DELIVERED TO:		GREY'S TENDER BOX	
ENQUIRIES	REGARDING THE ADVI	ERT MAY BE DIRECTED TO:	
Name:		PEARL MSOMI	
Email:		NO EMAIL	
Contact Numb	er:	033 897 3482	
Finance Manag	ger Name:	MRS T.M_MAZIBUKO	

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00

		CLOSING DATE:		01.000			
ESCRIPTION				CLOSIA	IG TIME: 11:00		
	THE FOLLOWING PARTICU	LARS MUST BE FURNISHED (FAILU	IDE TO DO CO	WILL DECILIFICATION			
					OFFER BEING DISQU	ALIFIED)	
NAME OF BIO	DDER:	NAME & ADDRE		R (FIRM)			_
PHYSICAL ADDRESS			DATE:	ADDRESS:			
CONTACT NUMBER:				ILE NUMBER:			
SIGNATURE (SARS				
By signing this	document I hereby agree to all ter	rms and conditions]	-0.0	11	7-010-Y-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		
JNIQUE REGI	STRATION REFERENCE: 1		1	AL SUPPLIER DATABASE I	REGISTRATION (CSD) NO.: [
				1 1 1 1 1 1			1.
es this offer o	omply with the specification?						
he price firm?	omply with the specification?		State delivery	period e.g. E.g. 1day, 1wee	ť		
em Qua	ntity Description		Jell delivery cos	als must be included in the c	uole price		
lo	ocaonphon			Brand & model	Country of		
			manufacture			R	10
_					-	-	1
					-	-	+
						-	+
	TAX @ 15% (Only if VAT Vendor)						+
LUE ADDED							-
LUE ADDED	TION PRICE (VALIDITY PERIOD 6	in Cavet					

- If Al delivery costs must be included in the quote price, for delivery at the prescribed destination.
 Only fam prices will be excepted. Such prices trust remain firm for the contract period. Hon-firm prices floating rates of exchange vanishors) will not be considered from the contract period.
 In cases where different delivery points willusence the pricing, a separate pricing schedule must be automate to each delivery point.
 If a samples / computiony sile inspection / briefing session are required, the supplier will be informed in due community.

- 1.16 If samples / computatory sile inspection / briefling session are required, the supplier will be informed in due course.

 1.15 The supplier shall Limitsh any information, when requested.

 1.16 In the event that the tax compliance states has failed on CSD, it is the suppliers (responsibility to provide a SARS pin in order for the instation to validation the tax compliance states of the supplier.

 1.17 The supplier shall continue the KZN Department of Haalth Jaide to the purchaser of papers at all third-partly claims of infragreners of patent, trademark, or individual design rights around how supplier shall strid partly claims for contract for the purchaser.

 1.18 If the supplier table is deliver any or all of the goods or to partition the services within the period(s) specified in the contract, the purchaser shall, subtout propuleus to its other emedies under the contract, deduct from the contract, the purchaser shall, subtout propuleus to its other emedies under the contract deliver deliverse of the deliver of the deliver of one of the deliver of the contract of the contract of the deliverse of the deliver

- 2.5 Any after ation made by the bidder must be misaled.
 2.6 Use of correcting fails is prohibited.
 2.7 Outsation will be operaed in public as soon as practicable after the closing time of quotation.
 2.8 Where practical, prices are made public at the time of opening quotatons,
 2.9 If it is desired to make more than one offer agents any individual fases, such offers should be given on a photocopy of the page in question. Clear indication thereof miss be statud on the exchedules attached.

- photocopy of the page in question. Clear indication thereof misst be stated on the schedules allached.

 SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOYATIOMS

 Countering that be lodged at the address indicated not later has the dosing time specified for their receipt, and in eccordance with the directives indicated not later has the dosing time specified for their receipt, and in eccordance with the directives in the quotation shall be addressed in accordance with the directives in the quotation of countering and a super are scaled envelope, with the name and address of the bidder, the quotation makes and closing date indicated on the envelope. If this provision is not complied with, such quotations for any quotation of the state from on the universe of the envelope with the relevant quotation numbers on the envelopes are kept unopsend in safe custody until the closing time of the quotation-lide. Where, however, a quotation is reclaimed, the custom of the quotation number without not the sense of the quotation number without not the sense than the properties of the distriction of the quotation number without not the sense of the quotation number without not the sense that the period of the provided for the receipt of quotations, and no quotation found in any other bot or alteretiered substances to the desiring of sets and the receipt of quotation of the considered.

 15. No quotation/function of counterlation, and provided posting will not be accepted as provided districtives of the desiring of the admitted of the provided of the provided

DECLARATION OF INTEREST

- Any legal person, including persons employed by the state¹, or persons having a kinship with persons employed by the state, including a blood quote or proposal). In view of possible allegations of favouritism, should the resulting quote, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her the bidder is employed by the state; and/or
- the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the quote(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the quote.

4.1.	order to give effect to the above, the following questionnaire	mast ne C	ompleted and submitted with th	e quote.
22	Full Name of bidder/representative	24	Company Posistantia No.	
2.2.	Identity Number: Position occupied in the Company (Figure 1)	2.5	Tay Reference Mumb	er:
2.01	osition occupied in the Company (director, trustee, shareho	older2):2.6.	VAT Registration Number:	***!
0 7	Position occupied in the Company (director, trustee, shareho		registration Number:	
2.7.	The names of all directors / trustons 1 - b.	oro thairi-	and the second	
20	employee / persal numbers must be indicated in paragraph 3 Are you or any person connected with the bid.	sio, men m Lbolow	orvidual identity numbers, tax r	eference numbers and, if applicable
2.0.	Are you or any person connected with the bidder presently earlies of turnish the following particulars:	mnioved h	wtho state 0	[TICK APPLICABL
2.0.1. N	If so, furnish the following particulars:	···ipioyeu u	/ uie state?	YES NO
Ň	vame of state institution / trustee / shareholder/ member:	********		
P	Name of person / director / trustee / shareholder/ member: Name of state institution at which you or the person connected of state in the state institution: If you are presently employed by the	d to the bid	der is employed:	
2.8.2.	Position occupied in the state institution: If you are presently employed by the state, did you obtain to the public sector? If yes, did you attach proof of such suits at the state.	•••••••	Anv other particulars:	
	in the public sector?	he appropr	iate authority to undertake	
2.8.2.1	If yes did you attack		3 to endantano (em	unerative work outside employmen
ole: Fa	illure to submit a set of	document?	1	YES I NOT
2.8.2.2	If no furnish recent destroncy, where applicable, may	' result in th	ne discussification of the	
2.9. [old you or your spouse, or any of the company's directors / tr tate in the previous twelve months? If so, furnish particulars:	••••••		
S	tate in the previous twelve months?	ustees / sh	areholders / members or their	SDOUSES conduct business and at
2.9.1.	If so, furnish particulars:			YES NO
2.10, ()	o you, or any person connected with the hidder, have any sale			[153] [NU]
m	lay be involved with the analysis	iauonsnip (ISMIV friend other) with a	on employed by the state and who
2. 1U. I. 2.11 A.	If so, furnish particulars:	quote?		VEC THO
AJ	re you, or any person connected with the bidder, aware of any	v relational	in Hamilton	[TES] NO
ы.	MINIMON BY the etcle	r i Giallulisi.	ID Hamily trional assault	n any other bidder and any person.
	If so, furnish particulars:	ranu or au	ludication of this quote?	YES I NO I
	not they are hidding for the directors / trustees / shareholders / member	ers of the o	mnony have envised	
.12.1. I	by you or any of the directors / trustees / shareholders / member not they are bidding for this contract? If so, furnish particulars:		mpany mave any interest in any	other related companies whether
				YES NO
i FUII	I details of directors / trustees / members / shareholders.			
D. IN	e Department Of Health will validate details of directors / true ensure that their details are up-to-date and verified on CSD.			
10 (ensure that their details are up-to-date and verified on CSD	rates / W	mbers / shareholders on CSI	D. It is the suppliers' responsibility
ш	ensure that their details are up-to-date and verified on CSD. be considered and passed over as non-compliant according	to Nation	arrment cannot validate the inf	ormation on CSD, the quote will
D	be considered and passed over as non-compliant according PECLARATION	to Italiona	reasury Instruction Note 4 (a) 2016/17.
JRNIS	JNDERSIGNED (NAME) CHED IN PARAGRAPHS 2.		OF P. Trans.	
	TARAGRAPHS 2.		CERTIFY 1	THAT THE INFORMATION
ACCE	PT THAT THE STATE MAY REJECT THE QUOTE (TO BE FALSE.	on		
COAF	TO BE FALSE.	UK ACT	AGAINST ME SHOULD T	HIS DECLARATION
				CO. HAT HON
•••••	vidder Signature	•••	***************************************	
me of b	•	Po	osition	Date
me of b	IS -			
me of b ste' mean	ational or provincial department, national or provincial public entity or	c) provi	ncial logiclature.	
me of b ste" mean any n constit	999 (Act No. 1 of 1000).	d) natio	ncial legislature; nal Assembly or the national Council -	
Me of b ate* mean any n constit Act, 19		:	or one national Conucil of	DMVinces: or
me of b ste* mean any n constit Act, 19 any mi	unicipality or municipal entity; * means a person who owns shares in the company and is actively involved			
Vame of b "State" mean) any n constit	999 (Act No. 1 of 1000).	d) natio	nal Assembly or the national Council of	DMVinces: or