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SharePoint

Msomi Benzangani - ?



KZN Health Intranet KZN HEALTH

HOME CORPORATE INFORMATION COMPONENTS

DIRECTORY

DISTRICT OFFICES

KZN Health > Components > Supply Chain Management

AdvertQuote

	KWAZULU-NATAL PROV NEALTH REPUBLIC OF SOUTH AFRICA	Quotation Advert		
Opening Date				
-		2021-05-12		
Closing Date		2021-05-18		
Closing Time	: :	11:00		
	ON DETAILS			
Institution Name:		Grey's hospital		
Province:		KwaZulu-Natal		
Department or Entity:		Department of Health		
Division or se	ection:	Central Supply Chain Management		
Place where goods / services is required		Greys hospital		
Date Submitted		2021-05-12	E	
ITEM CATE	GORY AND DETAILS			
Quotation Nu	mber:	ZNQ: GRS 358/04/21		
item Category	/ :	Goods	Ī.	
Item Description:		large towel drape disposable 45cmx30cm sterile latex free (20 units/box) ref:MP1000		
Item Descript	ion:	large towel drape disposable 45cmx30cm sterile latex free (2 ref:MP1000	20 units/box)	
Quantity (if su	upplies)	ref:MP1000 10 boxes	20 units/box)	
Quantity (if su		ref:MP1000 10 boxes N / SITE VISIT	20 units/box)	
Quantity (if su	upplies)	ref:MP1000 10 boxes	20 units/box)	
Quantity (if su COMPULS(Select Type:	upplies)	ref:MP1000 10 boxes N / SITE VISIT	20 units/box)	
Quantity (if su COMPULSO Select Type: Date :	upplies)	ref:MP1000 10 boxes N / SITE VISIT	20 units/box)	
Quantity (if su COMPULSO Select Type: Date : Fime: Venue:	upplies)	ref:MP1000 10 boxes N / SITE VISIT	20 units/box)	
Quantity (if su COMPULSO Select Type: Date : Time: Venue:	upplies) DRY BRIEFING SESSION	ref:MP1000 10 boxes N / SITE VISIT Not Applicable	20 units/box)	
Quantity (if su COMPULSO Select Type: Date: Fime: Venue: QUOTES CAN QUOTES SHO	upplies) DRY BRIEFING SESSION BE COLLECTED FROM: ULD BE DELIVERED TO:	ref:MP1000 10 boxes N / SITE VISIT Not Applicable Greys hospital Tender box	20 units/box)	
Quantity (if su COMPULSO Select Type: Date : Fime: Venue: QUOTES CAN QUOTES SHO ENQUIRIES	upplies) DRY BRIEFING SESSION BE COLLECTED FROM: ULD BE DELIVERED TO:	ref:MP1000 10 boxes N / SITE VISIT Not Applicable Greys hospital Tender box Greys hospital, 201 Townbush Road,PMB,3201	20 units/box)	
Quantity (if su COMPULSO Select Type: Date: Fime: Venue: QUOTES CAN QUOTES SHO ENQUIRIES Name:	IPPIIES) DRY BRIEFING SESSION BE COLLECTED FROM: ULD BE DELIVERED TO: REGARDING THE ADVI	ref:MP1000 10 boxes N / SITE VISIT Not Applicable Greys hospital Tender box Greys hospital, 201 Townbush Road,PMB,3201 ERT MAY BE DIRECTED TO:	20 units/box)	
Quantity (if su COMPULSO Select Type: Date: Fime: Venue: QUOTES CAN QUOTES SHO ENQUIRIES Vame: Email: Contact Numb	UPPIES) DRY BRIEFING SESSION BE COLLECTED FROM: ULD BE DELIVERED TO: REGARDING THE ADVI	ref:MP1000 10 boxes N / SITE VISIT Not Applicable Greys hospital Tender box Greys hospital, 201 Townbush Road,PMB,3201 ERT MAY BE DIRECTED TO: Pearl Msomi	20 units/box)	
Quantity (if su COMPULSO Select Type: Date: Fime: Venue: QUOTES CAN QUOTES SHO ENQUIRIES Name:	UPPIES) DRY BRIEFING SESSION BE COLLECTED FROM: ULD BE DELIVERED TO: REGARDING THE ADVI	ref:MP1000 10 boxes N / SITE VISIT Not Applicable Greys hospital Tender box Greys hospital, 201 Townbush Road,PMB,3201 ERT MAY BE DIRECTED TO: Pearl Msomi no email	20 units/box)	

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00

DESCRIPTIONTHE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE T	O DO SO WILL RESULT IN YOUR O					
		CED SEING DIROLL	TEICS:			
NAME & ADDRESS O	F BIDDER (FIRM)	Fren Being DisQUA	CIFIEU)			
NAME OF BIDDER:	DATE:					
PHYSICAL ADDRESS:	EMAIL ADDRESS:					
CONTACT NUMBER:	FACSIMILE NUMBER:					
SIGNATURE OF HIDDER:	SARS PIN:					
By signing his document I hereby agree to all terms and conditions	CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.: (
UNIQUE REGISTRATION REFERENCE: 1			FILE	-		
			1111	71		
oes this offer comply with the specification?				1-4		
t tate	delivery period e.g. E.g. 1day, 1week elivery costs must be included in the q	note Mice				
Item Quantity Description	Brand & model Country of Price					
No		manufacture	R c			
		1				
			1			
ALUE ADDED TAX @ 15% (Only if VAT Vendor)						
OTAL QUOTATION PRICE (VALIDITY PERIOD 50 Days)						

- Only fish pricas will be accepted. Such prices must remain firm for the contract period. Non-firm prices
 finducing rates of exchange variations) will not be considered.
 In cases silver different delivery points influence the prionig, a separate prionig schedule must be authorited
 for each delivery point.
 If samples I compulsory sile inspection I briefling session are required, the supplier will be informed in due
 course.

- 1.14 If samples / computery site inspection / briefing session are required, the supplier will be informed in due course.
 1.15 The supplier shall briefs any information, when requested.
 1.16 In the event that the tax compliance states has laided on CSD, it is the suppliers' responsibility to provide a SARS in in order for the institution to validate the tax compliances states of the supplier.
 1.17 The supplier shall indevnity the KZM Department of Neath (also the purchaser) against all third-party cleans, of intergeneral of patent, in adultant, or including design rights among trou use of the goods or any part fluered by the purchaser.
 1.18 If the supplier take 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 presidence to its other emedies under the contract, the chart from the contract, the purchaser shall, without presidence to its other emedies under the contract, the contract of the deliver of the deli

- Nny atteration made by the bidder must be misited.
 Use of correcting fluid by printipled
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 Use of correcting fluid by printipled
 Use of correcting fluid by
 If it is desired to make more than one offer against any individual fears, such offers should be given on a photocopy of the page in question. Clear edication thereof must be stated on the schedules attached.

- SPECIAL MISTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

 SPECIAL MISTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

 Outsiden shall be lodged at the address indicated not later han the closing firm specified for their receipt, and in accordance with the directions in the quotation documents, and shall be lodged as a separate usabed envelope, usin fine amount and defeased the bidder, the quotation documents and shall be lodged as a separate usabed envelope, usin fine mane and address of the bidder, the quotation numbers and closing date indicated on the swistops. The swistops shall not contain doctaments, the quotation when the shall show on on the envelope. The swistops shall not contain doctaments relating to any quotation other than that shown on the envelope. The swistops shall not contain a swistops such as the production of the swistops are kept unopersed in safe custody until the cheang time of the quotation amender on the servelopes are kept unopersed in safe custody until the cheang time of the quotation are involved, he quotation number ascertained, the sweetiges safed and the quotation are reviewed with the swistops. If shall be outpeted, it is received period of the receipt casted and the quotation are reviewed with the description of the quotation are reviewed with the description of the sweetiges and the dark of the quotation and the sweetiges of the sweetiges and the special section of the sweetiges of the quotation of the considered.

 3.5 No quotation documents of the contained of the area of quotation and the considered of the first production of the sweetige and time significate in the quotation of the documents of the quotation and the on making will not be accepted as proof of delivery.

 3.6 Cuotation documents must not be included in packages containing samples. Such quotations may be rejected as being invalid.

DECLARATION OF INTEREST

1.	whose behalf the declarant acts and	allegations of favouritism, shoul ith or related to them, it is requivalicating authority where- and/or be bidding document is signed, quote(s), or where it is known to persons who are involved with to	ld the	the (includes a price quotation, adverting resulting quote, or part thereof, be that the bidder or his/her authorised as a relationship with persons/a persouch a relationship exists between the evaluation and or adjudication of the	ised competitive quote, limited awarded to persons employed representative declare his/her on who are/is involved in the ne person or persons for or on quote.
2.	In order to give effect to the above, the f	ollowing questionnaire must be	co	mpleted and submitted with the quote	
2					
2	Full Name of bidder/representative Identity Number		.4.	Company Registration Number:	***************************************
2	3. Position occupied in the Company (di	reder trustee about all 1210	.5.	Tax Reference Number:	******************
	3. Position occupied in the Company (di	rector, trustee, shareholder-);2.	o.	VAT Registration Number:	
2					
۷.	 The names of all directors / trustees / employee / persal numbers must be in 	shareholders / members, their	r ind	lividual identity numbers, tax reference	e numbers and, if applicable
2.	employee / persal numbers must be in	the hidder paragraph 3 below.			[TICK APPLICABLE]
2.	 Are you or any person connected with B.1.If so, furnish the following particulars: 	the bloder presently employed	j by	the state?	YES NO
	Name of person / director / trustee / sh	areholder/ member:			
	Name of person / director / trustee / sh Name of state institution at which you of Position occupied in the state institution	or the nerson connected to the	 Mida	lan la annul.	
	Position occupied in the state institution	a are become councered to the t	DIUL	er is employed:	***************************************
2.	3.2. If you are presently employed by the in the public sector?	state, did you obtain the appre	onri	ate authority to undertake	
	in the public sector?	appropriate approp	Opii	ate authority to undertake remunerati	ve work outside employment
2.0	3.2.1. If yes, did you attach proof of such	authority to the quote document	nt?		YES NO
1,1010	. I GRUIG IO AUDINII DICKI) DI SIICO ALMAANI	urbara analisable u :		e disqualification of the quote)	
2.0	3.2.2. If no, furnish reasons for non-subn Did you or your spouse, or any of the	nission of such proof:			
2.3	Did you or your spouse, or any of the state in the previous twelve months?	company's directors / trustees /	/ sh	areholders / members or their spouse	es conduct husiness with the
20	state in the previous twelve months?				YES NO
2.1	.1. If so, furnish particulars:	46			1201 140
	Do you, or any person connected with may be involved with the evaluation an			family, friend, other) with a person em	ployed by the state and who
2.1	0.1. If so, furnish particulars:	o or adjudication of this quote?	?		YES NO I
2,1					120 1110
	employed by the state who may be inve	alved with the evaluation and or	ภารท	Ip (ramily, friend, other) between any	other bidder and any person
2.1	1.1. If so, furnish particulars:	or the man are evaluation and the	1 40	judication of this quote?	YES NO
2.1				ampany have one interest in the	
	or not they are bidding for this contract	?		simposity make any unterest in any other	
2.1.	2.1. If so, furnish particulars:	************************************			YES NO
3.	Full details of directors I trustees I me	mbom / shall be			
NB:	The Department Of Health will validate	details of directors towards an	1	ombon (skandad) - oon a	
	to ensure that their details are up-to-da not be considered and passed over as i	le and verified on CSD. If the	Dor	entioers / snarenoiders on CSD. It is	the suppliers' responsibility
	not be considered and passed over as i	non-compliant according to Nati	tion	A Treasury Instruction Note 4 (a) 2044	tion on CSD, the quote will
4	DECLARATION	, and the state of		a reasory manuacion Note 4 (a) 2010	0/17.
1 7					
FUI	HE UNDERSIGNED (NAME) RNISHED IN PARAGRAPHS 2.	••••••		CERTIFY THAT	THE INFORMATION
l Ac PR(CCEPT THAT THE STATE MAY RI OVE TO BE FALSE.	EJECT THE QUOTE OR A	.CT	AGAINST ME SHOULD THIS	DECLARATION
	e of bidder Signat	ure		Position	
u 0.	Ť	-	1	valuuri	Date
''Slat a)	e" means —				
٠,	any national or provincial department, national constitutional institution within the meaning of the Art 1999 (Art No. 1 of 1999).	or provincial public entity or c)	pro	vincial legislature;	
b)	Act, 1999 (Act No. 1 of 1999); any municipality or municipal entity;	Public Finance Management d) e)	nat Par	ional Assembly or the national Council of providing the following the second of the se	nces; 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.