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AdvertQuote

5.77.T	KWAZULU-NATAL PROVINCE HEALTH REPUBLIC OF SOUTH AFRICA QUOTATION Advert								
Onenias Date	REPUBLIC OF SOUTH AFRICA	Quotation Advert							
Opening Date		2021-05-18	ē						
Closing Date:		2021-05-25							
Closing Time:		11:00							
INSTITUTIO	N DETAILS								
Institution Na	me:	Grey's hospital	•						
Province:		KwaZulu-Natai							
Department or Entity:		Department of Health							
Division or se	ction:	Central Supply Chain Management							
Place where g	oods / services is required	Grey's Hospital							
Date Submitted		2021-05-18	1						
ITEM CATE	GORY AND DETAILS		1 <u>5</u>						
Quotation Nur	mber:	ZNQ:							
		GRS 5123/03/21							
Item Category		Goods	,						
ltem Descripti	on:	DIGITAL THERMOMETER, MUST BE ABLE TO MEASURE IN DEGREES, CELCIUS FROM 0 TO 100C, MUST BE ABLE TO BE LOW TEMPERATURE STERILIZED, WHEN THE BATTERY IS REMOVED AND BATTERY MUST BE ABLE TO BE REPLACED							
Quantity (if su	pplies)	05 UNITS							
COMPULSO	RY BRIEFING SESSION	N / SITE VISIT							
Select Type:		Not Applicable	J						
Date :		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Time:			B						
/enue:									
QUOTES CAN BE COLLECTED FROM:		DEPARTMENTAL WEBSITE							
QUOTES SHOU	JLD BE DELIVERED TO:	GREY'S TENDER BOX							
ENQUIRIES	REGARDING THE ADV	ERT MAY BE DIRECTED TO:							
Name:		PEARL MSOMI							
Email:		NO EMAIL							
Contact Number	er:	033 897 3482							
inance Manag	jer Name:	MRS T.M MAZIBUKO							

- 1

YOU A	ARE HEREBY INV	STANDARD QUOTE DOCUME TED TO QUOTE FOR REQUIREMENTS A		_	-		MAGE	-	_	_	_	_			_	_	
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		I hereby agree to all terms and conditions]		С	ENT	RALSU	JPPLIER (ATA	MASE	REG	ISTRA	TION	(CSD)	NO.:			-
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DECLARATION OF INTEREST

- 1. Any legal person, including persons employed by the state*, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to quote (includes a price quotation, advertised competitive quote, limited 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 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 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. 2. In order to give effect to the above, the following questionnaire must be completed and submitted with the quote.
- 2.1. Full Name of bidder/representative..... 2.4. Company Registration Number: 2.2. Identity Number: 2.5. Tax Reference Number: 2.3. Position occupied in the Company (director, trustee, shareholder²):2.6. VAT Registration Number: 2.7. The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, 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: YES NO Name of person / director / trustee / shareholder/ member: Name of state institution at which you or the person connected to the bidder is employed:.... 2.8.2. If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment 2.8.2.1. If yes, did you attach proof of such authority to the quote document? YES NO (Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the quote.) 2.8.2.2. If no, furnish reasons for non-submission of such proof:
 2.9. Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses conduct business with the 2.9.1. If so, furnish particulars:.... 2.10. Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this quote? 2.10.1. If so, furnish particulars: YES NO 2.11. Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this quote? 2.11.1. If so, furnish particulars: YES NO 2.12. Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract? 2.12.1. If so, furnish particulars: YES NO 3. Full details of directors / trustees / members / shareholders. NB: The Department Of Health will validate details of directors / trustees / members / shareholders on CSD. It is the suppliers' responsibility to ensure that their details are up-to-date and verified on CSD. If the Department cannot validate the information on CSD, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17. **DECLARATION** I ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAINST ME SHOULD THIS DECLARATION Name of bidder Signature Position Date "Slate" means -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); any municipality or municipal entity.

- c) provincial legislature;
- d) national Assembly 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.