

KZN Health Intranet

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HOME

AdvertQuote

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	KWAZULU-NATAL PROVINCE			REPUBLIC OF SOUTH AFRICA

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000.00

[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMES& QSEs) MUST BE SUBMITTED IN ORDER
HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SBD 6.1)
VAT REGISTRATION NUMBER (If VAT vendor)
E-MAIL ADDRESS
CELLPHONE NUMBER
TELEPHONE NUMBER CODENUMBER FACSIMILE NUMBER CODENUMBER
STREET ADDRESS
POSTAL ADDRESS
NAME OF BIDDER
THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO WILL RESULT IN YOUR QUOTE BEING DISQUALIFIED)
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.
ALL QUOTES MUST BE SUBMITTED ON THE OFFICIAL FORMS - (NOT TO BE RE-TYPED)
The quote box is open from 08:00 to 15:30.
Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted for consideration.
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS) GREYTOWN HOSPITAL, BELL STREET EXT. GREYTOWN, 3250
UNIQUE REGISTRATION REFERENCE
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.
CONTRACT PERIOD(If applicable)
ZNQ NUMBER: GTW 35/05/21-22 DESCRIPTION: INSTALLATION OF MEDICAL HANDWASH BASINS FOR CLINICS
BELL STREET EXT, GREYTWON, 325
DATE ADVERTISED: 17 MAY 2021 CLOSING DATE: 25 MAY 2021 CLOSING TIME: 11:00 FACSIMIL ENLYMBED: 033 413 2809
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT GREYTOWN HOSPITAL

DESCRIPTION: INSTALLATION OF MEDICAL HANDWASH BASINS FOR CLINICS

CAPACITY UNDER WHICH THIS QUOTE IS SIGNED	SIGNATURE OF BIDDER
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# N.	_				
nem No	Quantity	Description	Brand & model	Country of manufacture	Price
		INSTALLATION OF			
		MEDICAL HANDWASH BASINS			
		FOR CLINICS			
	02 UNITS	AMATIMATOLO CLINIC			
	02 UNITS	AMAKHABELA CLINIC			
	02 UNITS	EHLANZENI CLINIC	i		
	02 UNITS	SIBUYANE CLINIC			
	02 UNITS	KRANSKOP CLINIC			
		(AS PER SPECIFICATION ATTACHED)			
		NB: ATTACH TAX CLEARANCE, CERTIFIED			
		BBBEE CERTIFICATE/SWORN AFFIDAVIT			
		NOT COPY OF A COPY AND SUMMARY REPORT			
		OF CSD WITH THE UNIQUE NUMBER			
		-			
		4.1			
VALUE ADD	DED TAX @	VALUE ADDED TAX @ 15% (Only if VAT Vendor)			
TOTAL QUO	TATION PR	TOTAL QUOTATION PRICE (VALIDITY PERIOD 60 Days)			

Does This Offer Comply With The Specification?	Does The Article Conform To The S.A.N.S. / S.A.B.S. Specification?
Is The Price Firm?	

Enquiries regarding the guote may be directed to:

Contact Person: MR.S. DLAMINI.....Tel: 033_4139400 E-Mail Address: bongukwanda.dlamini@kznhealta

Enquiries regarding technical information may be directed to:

Contact Person: MR.D.GOGE Tel:033.4139400

DECLARATION OF INTEREST

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	and/or
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	on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the quote.	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	gal person on whose behalf the bidding document is signed, has a relationship wit

provincial legislature; national Council of provinces; or national Assembly of the national Council of provinces; or Parliament.	.	 any national of provincial department, national of 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;
	2_	State
Position Date	70:	Name of bidder Signature
NCT AGAINST ME SHOULD THIS DECLARATION)R A	I ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.
CERTIFY THAT THE INFORMATION		I, THE UNDERSIGNED (NAME)FURNISHED IN PARAGRAPHS 2.
		4 DECLARATION
Full details of directors / trustees / members / shareholders. 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.	tees f the I	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 sto ensure that their details are up-to-date and verified on CSD. If the Department cannot validate the information not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17.
ie company have any interest in any other related companies whether	of th	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? [YES] NO 2.12.1. If so, furnish particulars
nship (family, friend, other) between any other bidder and any person r adjudication of this quote? YES NO	elation Ind or	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
ip (family, friend, other) with a person employed by the state and who	onshi lote?	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
State induction and the induction of the	000	state in the previous twelve months? YES NO 2.9.1. If so, furnish particulars:
Ifficial proof of such authority, where applicable, may result in the disqualification of the quote.] If no, furnish reasons for non-submission of such proof:	of:	2.8.2.2. If no, furnish reasons for non-submission of such proof:
YES NO	umen	2.8.2.1. If yes, did you attach proof of such authority to the quote document?
Position occupied in the state institution:	the bi	Position occupied in the state institution:
		Name of person / director / trustee / shareholder/ member:
by the state? [TICK APPLICABLE]	byed i	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:
The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable,	heir i	2.7. The names of all directors / trustees / shareholders / members,
. Company Registration Number:	2.4. 2.5.).2.6.	2.1. Full Name of bidder/representative
e completed and submitted with the quote.	ıst be	2. In order to give effect to the above, the following questionnaire must be completed and submitted with the quote
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.	lown /ed w	evaluation and or adjudication of the quote(s), or where it is known that such a relationship exists between the perso on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the quote.

[&]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

AMENDMENT OF CONTRACT

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.

'n **CHANGE OF ADDRESS**

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

دب ENERAL CONDITIONS ATTACHED TO THIS QUOTATION

- 33 22 The institution is under no obligation to accept the lowest or any quote.

 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.
- __ ယ ယ The bidder must ensure the correctness & validity of quote:
- \equiv calculations will be at the bidder's risk that the price(s), rate(s) & preference quoted cover all for the workfiem (s) & accept that any mistakes regarding the price (s) &
- 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.
- S documentation must be completed in full and submitted This quotation will be evaluated based on the 80/20 points system, specification & correctness of information. All required
- Offers must comply strictly with the specification.
- Only offers that meet or are greater than the specification will be considered
- 96.29 Late quotes will not be considered.
- 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 All delivery costs must be included in the quote price, for delivery at the prescribed destination.
- 3.12 variations) will not be considered. Only firm prices will be accepted. Such prices must remain firm for the contract period. Non-firm prices (including rates of exchange
- ω μ 14 13 In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 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

- 41 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.
- The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated
- 443 Quotation submitted must be complete in all respects.
- 4.6 Any alteration made by the bidder must be initialled.
 - Use of correcting fluid is prohibited
- 4.8
- question. Clear indication thereof must be stated on the schedules attached Quotation will be opened in public as soon as practicable after the closing time of quotation.
 Where practical, prices are made public at the time of opening quotations.
 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

Ş SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

- 5.1 directives in the quotation documents. Quotation shall be lodged at the address indicated not later than the closing time specified for their receipt, and in accordance with the
- 5.2 with, such quotations/bids may be rejected as being invalid. envelope shall not contain documents relating to any quotation other than that shown on the envelope. If this provision is not complied sealed envelope, with the name and address of the bidder, the quotation number and closing date indicated on the envelope. Each quotation shall be addressed in accordance with the directives in the quotation documents and shall be lodged in a separate
- 53 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 date and time of quotation will be considered. A specific box is provided for the receipt of quotations, and no quotation found in any other box or elsewhere subsequent to the closing

- 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.

 Quotation documents must not be included in packages containing samples. Such quotations may be rejected as being invalid.
- 5.6

6 SAMPLES

- 6.1 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. If a company/s who has not won the quote requires their samples, they must advise the institution in writing of such. If samples are not collected within three months of close of quote the institution reserves the right to dispose of them at their discretion. In the case of the quote document stipulating that samples are required, the supplier will be informed in due course when samples
- 33
- **3** 6.2 Samples must be made available when requested in writing or if stipulated on the document.
 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.

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The institution has determined that a compulsory site meeting Date ____/ __/___Time ___: Place ____

Time

Place

take place

			Institution Stamp:
Date:	Signature:	Full Name:	Institution Site Inspection / briefing session Official

00 STATEMENT OF SUPPLIES AND SERVICES

000 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

ထ **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.

0 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
- 10.2 the institution to validate the tax compliance status of the supplier.

 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.

= TAX INVOICE

- A tax invoice shall be in the currency of the Republic of South Africa and shall contain the following particulars
- the name, address and registration number of the supplier;
- the name and address of the recipient;
- invoice is issued; an individual serialized number and the date upon which the tax
 - (iv) a description and quantity or volume of the goods or services
- (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.

ij 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.
- 13.2 2 In the event of delayed performance that extends beyond the delivery period, the institution is entitled to purchase commodities of a similar
- 133 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
- 13.4 should be awarded any contracts in the future.

 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.

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:
- 333
- 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
- 14.2 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. In the event the purchaser terminates the contract in whole or in part, the purchaser may procure, upon such terms and in such manner
- 14.3

귥 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

Ë 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

- $\stackrel{\cdot}{\Box}$ 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 system shall be applicable. The value of this quote is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the 80/20 preference point
- $\frac{1}{\omega}$ Points for this quote shall be awarded for
- **(E)** Price; and
- B-BBEE Status Level of Contributor
- 14 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

- 1.5 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.
- 5 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.

Ņ DEFINITIONS

- (a) Empowerment Act; "B-BBEE" means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic
- 6 empowerment, issued in terms of section 9(1) of the Broad-Based Black Economic Empowerment Act *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
- <u>(C)</u> or services, through price quotations, advertised competitive bidding processes or proposals; "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
- <u>a</u> of 2003); "Broad-Based Black Economic Empowerment Act" means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53
- æ "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;
- 3 "functionality" means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender
- <u>(Q</u> "prices" includes all applicable taxes less all unconditional discounts
- 3 "proof of B-BBEE status level of contributor" means:
- **=** 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,
- 3 "QSE" means a qualifying small business enterprise in terms of a code of good practice on black eccnomic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- 9 laxes; "rand value" means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable

POINTS AWARDED FOR PRICE

က က 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

P_{min} Points scored for price of bid under consideration Price of bid under consideration Price of lowest acceptable bid

POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR

4 ... 4 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:

0	Non-compliant contributor
2	00
4	7
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OS.	O1
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18	2
20	_
∾Number of points (80/20/syste	B-BBEE Status Level of Contributor Number of points (80/20 system)

<u>ე</u> **BID DECLARATION**

- Bidders who daim points in respect of B-BBEE Status Level of Contribution must complete the following:
- Ġ B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1
- <u>6</u> B-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.

7.	SUB-CONTRACTING	(Tick applicable box)	le box)	
7.1	Will any portion of the contract be sub-contracted?	YES	NO	
7.1.1	If yes, indicate:			
ço	i) What percentage of the contract will be subcontracted	% (Tick applicable box)) box)	
	 iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations, 2017: 	in terms of YES	NO	
	Designated Group: An EME or QSE which is at last 51% owned by:	-EME	QSE	
	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			

9.1	DECLARATION WITH REGARD TO COMPANY/FIRM Name of company/firm:
φ ν ώ κ	Company registration number:
9.4	TYPE OF COMPANY/ FIRM [TICK APPLICABLE BOX]
11 gm	□ Partnership/Joint Venture / Consortium □ One person business/sole propriety □ Close corporation □ Company □ (Pty) Limited
9.5	DESCRIBE PRINCIPAL BUSINESS ACTIVITIES
6.0	COMPANY CLASSIFICATION [TICK APPI.ICABLE BOX]
	Manufacturer Supplier Professional service provider Other service providers, e.g. fransporter, etc.
9.7 9.8	Total number of years the company/firm has been in business:
, mm	 i) The information furnished is true and correct; ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form; iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct; iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have —
	(a) disqualify the person from the bidding process;(b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;(c) cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;
	(d) recommend that the bidder or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted by the National Treasury from obtaining business from any organ of state for a period not exceeding 10 years, after the audi alteram partem (hear the other side) rule has been applied; and
	(e) forward the matter for criminal prosecution.
	WITNESSES SIGNATURE(S) OF BIDDERS(S)
	2 ADDRESS ADDRESS



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AMATIMATOLO CLINIC-UMPOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

AMAT-CAT "C" CORRECTIVE MAINTENANCE

ZNQ:

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

H PROJECT SPECIFICATIONS

1.1 SCOPE OF CONTRACT

This Contract is for the execution of the project indicated above

1.2 CONTRACT DRAWINGS

Attached drawing no.

1.3 CONDITIONS OF CONTRACT AND PRELIMINARIES

1.3.1 PERIOD OF CONTRACT

Three (03) Weeks as the Contract Period for the completion of the Work from date of Site handover

1.3.2 CONTRACT GUARANTEE:

Damage to the existing buildings: Bidders 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 Kwa Zulu- Natal Department of Health. Bidders are advised to visit the site prior to tendering and to acquaint themselves with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim whatsoever will be allowed on the grounds of ignorance of the conditions under

1.3.3 GUARANTEE PERIOD

which the work will be executed

delivery. Materials shall be guarantee for at list 5 years and above. materials must be a minimum of Three (3) Calendar Months from the date The guarantee period for the completion of the Structure indicated above and all of final

1.3.3.1 PENALTY FOR NON COMPLETION

Penalties of 0.04% a day shall apply for non-completion of the projects

1.3.4 SITE AND MODE OF PROCEDURE

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

AMATIMATOLO CLINIC - UMVOTI SUB DISTRICT

The Bidder is advised that the existing premises will be occupied throughout the period of the contract, and that the minimum amount of disruption to services is of the utmost importance.

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP DOH - AMATIM 2021 - CORRECTIVE MAINTENANCE

of the buildings will be repaired at the expense of the contractor/ Bidder. Damage to the existing buildings - Bidders to note that any damages cone or occurring to any

nature of the work to be done and Bidders are advised to visit the site prior to tendering and to acquaint themselves with the The repairs must be to the satisfaction of the Kwa Zulu- Natal Department of Health which the work will be executed whatsoever will be allowed on the grounds of ignorance of the conditions under access to the siting of the existing buildings etc., as no

1.3.5 SATISFACTORY INSTALLATION

Occupational Health and Safety Act and Regulations 85/1993 as amended Specification, Regulations, The whole of the installation shall be carried out in accordance with the South African of Standards Code of the KZNPA the South African Bureau of Standards Code Standard Preambles Practice for the 8 all application Trades, of National of Practice the KZNPA and the Building General

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

1.3.6 CERTIFICATE INSURANCE 9 COMPLIANCE APPLICABLE To SIHT PROJECT S LIABILITY

- Bidder shall allow to submit electrical compliance certificate
- Equipment operating manuals.
- Training of maintenance staff certificate
- Mechanical guarantee certificate
- Copy of company liability insurance must be included in the quotation prior to submission

1.3.7 GENERAL

the installation and making good of all work related to the installation. The patching and painting (If Any) must be to the satisfaction of the KwaZulu-Natal Department of The Bidders / Contractors will be responsible for all masonry work associated with

2. TECHNICAL SPECIFICATION

2.1 GENERAL

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

2.1.1 SCOPE

to avoid under quote. water supply - all contractor to confirm piping measurement prior to submitting of quotation Supply materials and labour to remove existing old and damaged medical basins and elbow action taps and supply and installation of class 02 copper pipes and connect to hot and cold

completion of the projects / works. fixing screws are included in the quotation / materials are allowed by contractor for the that new handwash basin are installed as per manufactures specifications and all required Materials that are used are to comply with ISO 9001:2008 Standards. The bidder is to ensure

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PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH 3

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

2.1.2 WORK TO BE CARRIED OUT

Supply and install the following:

- Supply and install 15mm stop cocks for hot and cold water supply.
- Supply and deliver 15mm and 22mm connex copper fittings.
- • Supply and install new hospital medical hand wash basin. Supply and install 15mm class 02 copper piping as pointed out.
- Supply and install new hospital medical wall mounted elbow action taps.
- Supply and make good of existing walls and prepare for new painting where necessary.
- Supply metal wall mounted pipes holder brackets which have nylon

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

3. SCHEDULE OF RATES

PREAMBLE TO SCHEDULE OF RATES

Items and Pricing

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

Tax and Duties

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

Rates

items and shall cover all labour, 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 shall be the full rates and prices for the service delivered described under the respective items in the Schedule of Rates. Except where provision is made in the Schedule of Rates, the rates and prices inserted

		Carried To Collection Summary PS 1
	it 02	Schedule of Prices must be computed excluding the applicable Sales Tax. 2) Where items are described as "Or other approved", approval must be obtained prior to tendering or submission of documents. 3) All rates quoted shall be inclusive of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done. 5) Greytown Hospital will not be responsible for any mistakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document INSTITUTION: AMATIMATOLO CLINIC-UMVOTI SERVICE: INSTALLATION OF MEDICAL "HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MINER STALLATION OF MEDICAL "HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MINER SUPPLY labour and all materials for the complete installation of hospital medical pillar type mixer taps, steel chromed waste overflow and fittings, fixing screws as per suppliers specification, hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand washbasin will accepted. The size of the hospital hand washbasin will accepted. The size of the hospital hand washbasin will accepted. The size of the hospital hand washbasin will accepted to ensure they are familiarized themselves to the setting of the site and what is requested from the specification to successful complete the project without challenges and to avoid price underquote. Sample will be
c R	R	NOTEC
RATE/ UNIT	QTY	Item DESCRIPTION UNIT

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Carried To C	5 th C	A. ha	3. er	2. C. S.	. <u>C. S.</u>		tem
Carried To Collection Summary PS 2	Contractors are requested to note the structure is chromodek container	Supply metal wall mounted pipes holder brackets which have nylon hanker.	Various connex copper fittings, to be measured. Contractors to measure on site to ensure	Supply and install new 22mm class 2 clean copper pipes	SERVICE: INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER TAPS Supply and install new 15mm class 2 clean copper pipes	1) All rates for items contained in this Schedule of Prices must be computed excluding the applicable Sales Tax. 2) Where items are described as "Or other approved", approval must be obtained prior to tendering or submission of documents. 3) All rates quoted shall be inclusive of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done for any mistakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document	DESCRIPTION
	n/c	item	item	unit			UNIT
				06	2		QTY
R							RATE/ UNIT
							n
							TOTAL
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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

COLLECTION SUMMARY

NOTE:

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

Ħ	TOTAL: CARRIED TO TENDER FORM
R	ADD Provision for Value Added Tax Allow 15% of SUB-TOTAL "A"
R	SUB-TOTAL "A"
R	Collection Summary PS 3
R	Collection Summary PS 2
R	Collection Summary PS 1

IMPORTANT

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

OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE

Site/building/institution involved: AMATIMATOLO CLINIC-UMVOTI SUB DISTRICT

DOH - AMATIM-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

Quotation No.:

Service:

DATE:	DEPARTMENTAL STAMP:	SIGNATURE OF DEPARTMENTAL REPRESENTATIVE	DATE:	SIGNATURE OF TENDERER OR AUTHORISED REPRESENTATIVE	THE SCOPE OF THE SERVICE TO BE RENDERED.		VISITED AND INSPECTED THE SITE ON	THIS IS TO CERTIFY THAT OF (STATE NAME OF TENDERER)	***************************************
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DOH – AMATIM 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SECTION K

SCHEDULE OF VARIATIONS FROM GOODS OR SERVICES INFORMATION

the original quotation documentation. 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

	 	 	 	,	 ,	 	 	,	 	
										SECTION
										PAGE
										VARIATION: CLAUSE OR ITEM

DOH – AMATIM 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP	
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DATE:

SIGNATURE OF TENDERER:

AMATIMATOLO CLINIC-UMVOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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
	•		
វ ល	GNATURE OF TENDERER:	DERER:	
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DATE:	SIGNATURE OF TENDERER:

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 $\frac{SCHEDULE\ OF\ REFERENCES}{References\ of\ previous\ work\ completed\ for\ the\ department\ of\ health\ or\ other\ to\ be\ listed\ below.}$

WAS DONE	CONTACT PERSON	COMPLETED SCOPE OF WORK
	3333	
SIGNATURE OF TENDERER:		
DATE:		

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IMPORTANT

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

QUESTIONNAIRE

DATE	SIGNATURE OF TENDERER	
	Is a special import permit required?	12.
	What are the names and addresses of the factories where the goods will be manufactured and, if required, inspected?	<u> </u>
	Where are these facilities available?	10.
	What facilities exist for the servicing of the Machine/goods offered?	့်
	Where are stock held?	ÓO
	What is the approximate value of spares carried in stock in the RSA for this particular make and model of machine?	7.
	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?	O
	Are you the accredited agents in the RSA for the Manufacture/ supply of the goods offered by you?	Ċī
	Is the equipment guaranteed for a minimum period of six months?	4.
	How will delivery be affected?	ω
	Is the delivery period stated firm?	2
REPLIES	Are the prices/rates quoted firm?	

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DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SUMMARY FOR QUOTATION OPENING PURPOSES ONLY (To be completed by Tenderer)

80/20 PREFERENCE POINTS CLAIMED IN TERMS OF THE KWAZULU-NATAL PROCUREMENT REGULATION

DA H	OIGNATORE	NAME OF COMPANY	
		NAME OF COMBANY	
YES NO	ATTEND THE OFFICIAL SITE INSPECTION?	IF APPLICABLE: DID THE TENDERER ATTEND THE OFFICIAL BRIEFING SESSION/ COMPULSORY SITE INSPECTION?	ුග
YES NO	BEEN SUBMITTED?	HAS AN ALTERNATIVE QUOTATION BEEN SUBMITTED?	Ċ1
YES NO	Ę?	HAVE ANY ALTERATIONS BEEN MADE?	4.
	IMPORTANT appropriate block with	Mark app	
	4 (four weeks)	TIME FOR COMPLETION/ DELIVERY:	ώ
		AMOUNT IN WORDS:	į,
	7.	QUOTATION PRICE INCLUDING V.A.T.	

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

THIS PAGE CAN BE USED BY CONTRACTORS TO TAKE NOTES DURING SITE BRIENG MEETING

																			SITE BRIENG CONTRACTOR'S NOTES:	

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AMAKHABELA CLINIC-UMVOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

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DOH -

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

. PROJECT SPECIFICATIONS

1.1 SCOPE OF CONTRACT

This Contract is for the execution of the project indicated above

1.2 CONTRACT DRAWINGS

Attached drawing no.

1.3 CONDITIONS OF CONTRACT AND PRELIMINARIES

1.3.1 PERIOD OF CONTRACT

Three (03) Weeks as the Contract Period for the completion of the Work from date handover. of Site

CONTRACT GUARANTEE:

of the buildings will be repaired at the expense of the contractor/ Tenderer.

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

Bidders are advised to visit the site prior to tendering and to acquaint themselves with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim whatsoever will be allowed on the grounds of ignorance of the conditions under which the work will be executed Damage to the existing buildings Bidders to note that any damages done or occurring to any

1.3.3 GUARANTEE PERIOD

delivery. Materials shall be guarantee for at list 5 years and above. materials must be a minimum of Three [3] Calendar Months from the date The guarantee period for the completion of the Structure indicated above and all of final

1.3.3.1 PENALTY FOR NON COMPLETION

Penalties of 0.04% a day shall apply for non-completion of the projects.

1.3.4 SITE AND MODE OF PROCEDURE

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

AMAKHABELA CLINIC - UMVOTI SUB DISTRICT

The Bidder is advised that the existing premises will be occupied throughout the period of the contract, and that the minimum amount of disruption to services is of the utmost importance.

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP **DOH - AMAK 2021 - CORRECTIVE MAINTENANCE**

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

Bidders are advised to visit the site prior to tendering and to acquaint themselves with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim whatsoever will be allowed on the grounds of ignorance of the conditions under which the conditions is a sixty of the conditions. The repairs must be to the satisfaction of the Kwa Zulu- Natal Department of Health which the work will be executed

1.3.5 SATISFACTORY INSTALLATION

Occupational Health and Safety Act and Regulations 85/1993 as amended Specification, Regulations, the KZNPA Bureau of The whole of the installation shall be carried out in accordance with the South African Standards Code of the South African Bureau of Standards Code of Practice Standard Practice for the Preambles 8 application all Trades, of National the KZNPA and the Building General

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

1.3.6 CERTIFICATE INSURANCE Ş COMPLIANCE APPLICABLE Ö SIHT PROJECT SI LIABILITY

- Bidder shall allow to submit electrical compliance certificate
- Equipment operating manuals.
- Training of maintenance staff certificate
- Mechanical guarantee certificate
- Copy of company liability insurance must be included in the quotation prior to submission

1.3.7 GENERAL

the installation and making good of all work related to the installation. The patching and painting (If Any) must be to the satisfaction of the KwaZulu-Natal Department of The Bidders / Contractors will be responsible for all masonry work associated with

2. TECHNICAL SPECIFICATION

2.1 GENERAL

particular installation, whether any specific clauses are referred to cr not 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

2.1.1 SCOPE

water supply – all contractor to confirm piping measurement prior to submitting of quotation to avoid under quote. action taps and supply and installation of class 02 copper pipes and connect to hot and cold Supply materials and labour to remove existing old and damaged medical basins and elbow

completion of the projects / works fixing screws are included in the quotation / materials are allowed by contractor for the that new handwash basin are installed as per manufactures specifications and all required Materials that are used are to comply with ISO 9001:2008 Standards. The bidder is to ensure

PROVINCE OF KWAZULU-NATAL

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

2.1.2 WORK TO BE CARRIED OUT

Supply and install the following:

- Supply and install 15mm stop cocks for hot and cold water supply.
- Supply and deliver 15mm and 22mm connex copper fittings.
- Supply and install 15mm class 02 copper piping as pointed out.
- Supply and install new hospital medical hand wash basin.
- Supply and install new hospital medical wall mounted elbow action taps.
- Supply and make good of existing walls and prepare for new painting where necessary.
- Supply metal wall mounted pipes holder brackets which have nylon

DOH - AMAK-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

3. SCHEDULE OF RATES

PREAMBLE TO SCHEDULE OF RATES

Items and Pricing

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

Tax and Duties

Prices, tendered 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 current rate). provided under this contract, including Value Added Tax (applicable to the

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 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 and shall cover all labour, transport, overhead charges and profit, etc. as well as the items in the Schedule of Rates.

		R			Carried To Collection Summary PS 1	Carrie
			02	Unit	Schedule of Prices must be computed excluding the applicable Sales Tax. 2) Where items are described as "Or other approved", approval must be obtained prior to tendering or submission of documents. 3) All rates quoted shall be inclusive of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done of Greyfown Hospital will not be responsible for any missakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document INSTITUTION: AMAK CLINIC-UNVOILSUB SERVICE: INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER Supply labour and all materials for the complete installation of hospital medical hand wash basin, installation shall be inclusive of hospital medical pillar type mixer taps, steel chromed waste overflow and fittings, fixing screws as per suppliers specification, hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand wash basin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand wash basin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand wash basin shall be white glazed in colour and wash basin will be eas follows: Height: 380mm Volume:96700500m* Width: 435mm Length: 585mm Volume:96700500m* Width cast of the site inspection all bidders are requested to ensure they are familiarized themselves to the setting of the site and what is requested from the specification to successful complete the project without challenges and to avoid price underquote. Sample will be 1. available on request.	
					NOTES: 1) All rates for items contained in this	
0	с 72	R			A VALUE AND THE STATE OF THE ST	
TOTAL	_	RATE/ UNIT	QTY	TINU	DESCRIPTION	Item
	-	,				

	R		1 7 1
		n/c	Contractors are requested to note the structure is chromodek container
		item	Supply metal wall mounted pipes holder brackets which have nylon 4. hanker.
		item	Various connex copper fittings, to be measured. Contractors to measure on site to sensure
		unit 04 unit 06	Supply and install new 22mm class 2 clean copper pipes 2.
			DISTRICT SERVICE: INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER TAPS Supply and install new 15mm class 2
			INOTES: 1) All rates for items contained in this Schedule of Prices must be computed excluding the applicable Sales Tax. 2) Where items are described as "Or other approved", approval must be obtained prior to tendering or submission of documents. 3) All rates quoted shall be inclusive of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done for any mistakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document
TOTAL	RATE/ UNIT	UNIT QTY	tem DESCRIPTION

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DOH - AMAK-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

COLLECTION SUMMARY

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

Ħ	TOTAL: CARRIED TO TENDER FORM
R	ADD Provision for Value Added Tax Allow 15% of SUB-TOTAL "A"
R	SUB-TOTAL "A"
R	Collection Summary PS 3
R	Collection Summary PS 2
R	Collection Summary PS 1
	i

IMPORTANT

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

OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE

Site/building/institution involved: AMAKHABELA CLINIC-UMVOTI SUB DISTRICT

DOH - AMAK-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SIGNATURE OF DEPARTMENTAL REPRESENTATIVE DEPARTMENTAL STAMP:	DATE :	SIGNATURE OF TENDERER OR AUTHORISED REPRESENTATIVE	THIS IS TO CERTIFY THAT	Service:	Quotation No.:
			ENDERER) SITE ON NCES AND		

DOH – AMAK 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

DATE:....

DOH - AMAK-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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.

		_								
DATE:										SECTION
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										VARIATION: CLAUSE OR ITEM

DATE:	SIGNATURE OF TENDERER:

DOH – AMAK 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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DOH - AMAK-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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
SIG	SIGNATURE OF TENDERER:	DERER:	
DATE:	ιί		

DOH – AMAK 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

<u>SCHEDULE OF REFERENCES</u>

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

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	j					:		-			PLACE WORK WAS DONE
											CONTACT PERSON
											COMPLETED SCOPE OF WORK

DOH – AMAK 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

DATE:

SIGNATURE OF TENDERER:

IMPORTANT

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

QUESTIONNAIRE

	Are the prices/rates quoted firm?	REPLIES
5	Is the delivery period stated firm?	
ω	How will delivery be affected?	
4	Is the equipment guaranteed for a minimum period of six months?	
كا	Are you the accredited agents in the RSA for the Manufacture/ supply of the goods offered by you?	
. ල	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?	
00	Where are stock held?	
.0	What facilities exist for the servicing of the Machine/goods offered?	
0.	Where are these facilities available?	
= =	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

DOH -- AMAK 2021 -- CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH AMAKHABELA CLINIC-UMVOTI SUB DISTRICT

DOH - AMAK-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SUMMARY FOR QUOTATION OPENING PURPOSES ONLY (To be completed by Tenderer)

80/20 PREFERENCE POINTS CLAIMED IN TERMS OF THE KWAZULU-NATAL PROCUREMENT REGULATION

	<u>ဂ</u>	Ċī	4,		ယ		Ю	
NAME OF COMPANY	IF APPLICABLE: DID THE TENDERER ATTEND THE OFFICIAL BRIEFING SESSION/ COMPULSORY SITE INSPECTION?	. HAS AN ALTERNATIVE QUOTATION BEEN SUBMITTED?	. HAVE ANY ALTERATIONS BEEN MADE?	Mark ap	TIME FOR COMPLETION/ DELIVERY:		AMOUNT IN WORDS:	QUOTATION PRICE INCLUDING V.A.T.
SIGNATURE	R ATTEND THE OFFICIAL SITE INSPECTION?	BEEN SUBMITTED?	DE?	IMPORTANT appropriate block with	4 (four weeks)			.⊤ R
DATE	YES NO	YES NO	YES NO			70		

DOH – AMAK 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL

DOH - AMATIM -2021 - CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP



EHLANZENI CLINIC-UMYOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

DOH -GTW-CAT "C" SNZ CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

<u>|</u> PROJECT SPECIFICATIONS

1,1 SCOPE OF CONTRACT

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

1.2 CONTRACT DRAWINGS

Attached drawing no.

1.3 CONDITIONS OF CONTRACT AND PRELIMINARIES

1.3.1 PERIOD OF CONTRACT

Three (03) Weeks as the Contract Period for the completion of the Work from date of Site handover.

1.3.2CONTRACT GUARANTEE:

Damage to the existing buildings - Bidders 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 Kwa Zulu- Natal Department of Health. claim whatsoever will be allowed on the grounds of ignorance of the conditions under which the work will be executed. nature of the work to be done and access to the siting of the existing buildings etc., as no Bidders are advised to visit the site prior to tendering and to acquaint themselves with the

1.3.3 GUARANTEE PERIOD

delivery. Materials shall be guarantee for at list 5 years and above. The guarantee period for the completion of the Structure indicated above materials must be a minimum of *Three (3) Calendar Months* from the date and all of final

1.3.3.1 PENALTY FOR NON COMPLETION

Penalties of 0.04% a day shall apply for non-completion of the projects.

1.3.4 SITE AND MODE OF PROCEDURE

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

EHLANZENI CLINIC - UMVOTI SUB DISTRICT

contract, and that the minimum amount of disruption to services is of the utmost importance. The Bidder is advised that the existing premises will be occupied throughout the period of the

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP DOH - SBYN 2021 - CORRECTIVE MAINTENANCE

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

Bidder's are advised to visit the site prior to tendering and to acquaint themselves with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim whatsoever will be allowed on the grounds of ignorance of the conditions under The repairs must be to the satisfaction of the Kwa Zulu- Natal Department of Health which the work will be executed

1.3.5 SATISFACTORY INSTALLATION

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

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

1.3.6 CERTIFICATE INSURANCE Q F COMPLIANCE APPLICABLE TO THIS PROJECT S LIABILITY

- Bidder shall allow to submit electrical compliance certificate
- Equipment operating manuals.
- Training of maintenance staff certificate
- Mechanical guarantee certificate
- Copy of company liability insurance must be included in the quotation prior to submission

1.3.7 GENERAL

the installation and making good of all work related to the installation. The patching and painting (If Any) must be to the satisfaction of the KwaZulu-Natal Department of The Bidders / Contractors will be responsible for all masonry work associated with

2. TECHNICAL SPECIFICATION

2.1 GENERAL

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

2.1.1 SCOPE

water supply – all contractor to confirm piping measurement prior to submitting of quotation to avoid under quote. Supply materials and labour to remove existing old and damaged medical basins and elbow action taps and supply and installation of class 02 copper pipes and connect to hot and cold

completion of the projects / works. fixing screws that new handwash basin are installed as per manufactures specifications and all required Materials that are used are to comply with ISO 9001:2008 Standards. The bidder is to ensure are included in the quotation / materials are allowed by contractor for the

DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMYOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL

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DOH -- GTW-CAT "C"

- CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

WORK TO BE CARRIED OUT

Supply and install the following:

- Supply and install 15mm stop cocks for hot and cold water supply.
- . . Supply and deliver 15mm and 22mm connex copper fittings.
- Supply and install 15mm class 02 copper piping as pointed out.
- . Supply and install new hospital medical hand wash basin.
- Supply and install new hospital medical wall mounted elbow action taps.
- Supply and make good of existing walls and prepare for new painting where necessary.
- Supply metal wall mounted pipes holder brackets which have nylon hanker.

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMVOTI SUB DISTRICT

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

3. SCHEDULE OF RATES

PREAMBLE TO SCHEDULE OF RATES

Items and Pricing

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

Tax and Duties

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 Prices, tendered and paid, must include all customs, excise and import duties, and any current rate).

Rates

items and shall cover all labour, transport, overhead charges and profit, etc. as well as the general liabilities, obligations and risks arising out of the Conditions of Contract, the 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 in the Schedule of Rates. overhead charges and profit being spread proportionately over the rates of the relative

Carried 1		Item
Carried To Collection Summary PS 1	NOTES: 1) All rates for items contained in this Schedule of Prices must be computed excluding the applicable Sales Tax. 2) Where items are described as "Or other approved," approval must be obtained prior to tendering or submission of documents. 3) All rates quoted shall be inclusive of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done for any mistakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document INSTITUTION: EHLANZENI CLINICLIMWOTI SUB DISTRICT SERVICE: INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER TAPS Supply labour and all materials for the complete installation of hospital medical hand wash basin, installation shall be inclusive of hospital medical pillar type mixer taps, steel chromed waste overflow and fittings, fixing screws as per suppliers specification, hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand washbasin will accepted. The size of the hospital hand washbasin will accepted. The size of the soft and what is requested from the specification to the setting of the site and what is requested from the specification to successful complete the project without challenges and to avoid price underquote. Sample will be available on request.	DESCRIPTION
	Upit.	UNIT
	02	QTY
		RATE/ UNIT
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		TO'
		TOTAL

Carried To Collection Summary	Contractors are requested to note the structure is chromodek container	-	Various connex copper fittings, to be measured. Contractors to measure on site to 3. ensure	1. Supply and install new 22mm class 2 clean copper pipes	SERVICE: INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER TAPS Supply and install new 15mm class 2 clean copper pipes		tem
PS 2	o note n/c	pipes nylon item	igs, to be site to item	unit		ined in this ce computed S Tax. as "Or other be obtained bmission of inclusive of o the exact sion is done e responsible toting should be maintenance maintenance rior to filling ent INIC-UMVOTI	UNIT
				04			QTY
R							RATE/ UNIT
							TOTAL
							0

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMVOTI SUB DISTRICT

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DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

COLLECTION SUMMARY

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

×	TOTAL: CARRIED TO TENDER FORM
ZJ	ADD Provision for Value Added Tax Allow 15% of SUB-TOTAL "A"
₩	SUB-TOTAL "A"
R	Collection Summary PS 3
R	Collection Summary PS 2
R	Collection Summary PS 1

THIS FORM IS ONLY TO BE INCLUDED AND COMFLETED WHEN APPLICABLE TO THE QUOTATION IMPORTANT

OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE

Site/building/institution involved: **EHLANZENI CLINIC-UMVOTI SUB DISTRICT**

DOH -- EHLANZ-CAT "C" -- CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

Service:	Quotation No.:

THIS IS TO CERTIFY THAT
SIGNATURE OF TENDERER OR AUTHORISED REPRESENTATIVE
DATE:
SIGNATURE OF DEPARTMENTAL REPRESENTATIVE
DEPARTMENTAL STAMP:
DATE:

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMYOTI SUB DISTRICT

DOH -- GTW-CAT "C" -- CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SECTION K

SCHEDULE OF VARIATIONS FROM GOODS OR SERVICES INFORMATION

the original quotation documentation. 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

SIGNATURE OF TENDERER:									SECTION
TENDERER									PAGE
									VARIATION: CLAUSE OR ITEM

DATE:	O'GNA CRE OF TENDERREY.

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP DOH - SBYN 2021 - CORRECTIVE MAINTENANCE

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMYOTI SUB DISTRICT

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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

DATE:	SIGNATURE OF TENDERER:

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP DOH - SBYN 2021 - CORRECTIVE MAINTENANCE

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMVOTI SUB DISTRICT

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP SCHEDULE OF REFERENCES

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

WAS DONE	CONTACT PERSON	COMPLETED SCOPE OF WORK
		58
SIGNATURE OF TENDERER:	DERER:	
DATE:		

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

IMPORTANT

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

QUESTIONNAIRE

-	Are the prices/rates quoted firm?	REPLIES
2	Is the delivery period stated firm?	
ω	How will delivery be affected?	
4.	Is the equipment guaranteed for a minimum period of six months?	
Ω	Are you the accredited agents in the RSA for the Manufacture/ supply of the goods offered by you?	
O	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?	
œ	Where are stock held?	
9	What facilities exist for the servicing of the Machine/goods offered?	
10.	Where are these facilities available?	
<u></u>	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?	
1	SIGNATIBE OF TENDERED	DATE

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMVOTI SUB DISTRICT

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SUMMARY FOR QUOTATION OPENING PURPOSES ONLY (To be completed by Tenderer)

80/20 PREFERENCE POINTS CLAIMED IN TERMS OF THE KWAZULU-NATAL PROCUREMENT REGULATION

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		Ò	4				
NAME OF COMPANY	<i>IF APPLICABLE</i> : DID THE T BRIEFING SESSION/ COMF	HAS AN ALTERNATIVE QU	HAVE ANY ALTERATIONS BEEN MADE?	71	TIME FOR COMPLETION/ DELIVERY:	AMOUNT IN WORDS:	QUOTATION PRICE INCLUDING V.A.T.
SIGNATURE	<i>IF APPLICABLE</i> : DID THE TENDERER ATTEND THE OFFICIAL BRIEFING SESSION/ COMPULSORY SITE INSPECTION?	HAS AN ALTERNATIVE QUOTATION BEEN SUBMITTED?	BEEN MADE?	IMPORTANT Mark appropriate block with "X"	DELIVERY: 4 (four weeks)		JDING V.A.T. R
DATE	YES NO	YES NO	YES NO				

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

DOH – EHLANZ -2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

THIS PAGE CAN BE USED BY CONTRACTORS TO TAKE NOTES DURING SITE BRIENG MEETING SITE BRIENG CONTRACTOR'S NOTES: INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP DOH - SBYN-CAT "C" ZNQ: - CORRECTIVE MAINTENANCE

ZNQ 1 FORM

PROVINCE OF KWAZULU-NATAL
DEPARTMENT OF HEALTH
EHLANZENI CLINIC-UMVOTI SUB DISTRICT

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PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH EHLANZENI CLINIC-UMVOTI SUB DISTRICT

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SIBUYANE CLINIC-UMYOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

GTW-CAT "C" CORRECTIVE MAINTENANCE

ZNQ:

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

1 PROJECT SPECIFICATIONS

1.1 SCOPE OF CONTRACT

This Contract is for the execution of the project indicated above

1.2 CONTRACT DRAWINGS

Attached drawing no.

1.3 CONDITIONS OF CONTRACT AND PRELIMINARIES

1.3.1 PERIOD OF CONTRACT

Three (03) Weeks as the Contract Period for the completion of the Work from date handover of Site

1.3.2 CONTRACT GUARANTEE:

Damage to the existing buildings Bidders 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 Kwa Zulu- Natal Department of Health. which the work will be executed. claim whatsoever will be allowed on the grounds of ignorance of the conditions under nature of the work to be done and access to the siting of the existing buildings etc., as no Bidders are advised to visit the site prior to tendering and to acquaint themselves with the

1.3.3 GUARANTEE PERIOD

delivery. Materials shall be guarantee for at list 5 years and above. materials The guarantee period for the completion must be a minimum of Three (3) of the Structure indicated above Calendar Months from the date of final and all

1.3.3.1 PENALTY FOR NON COMPLETION

Penalties of 0.04% a day shall apply for non-completion of the projects

1.3.4 SITE AND MODE OF PROCEDURE

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

SIBUYANE CLINIC - UMVOTI SUB DISTRICT

contract, and that the minimum amount of disruption to services is of the utmost importance. The Bidder is advised that the existing premises will be occupied throughout the period of the

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP **DOH – SBYN 2021 – CORRECTIVE MAINTENANCE**

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

The repairs must be to the satisfaction of the Kwa Zulu- Natal Department of Health. Bidders are advised to visit the site prior to tendering and to acquaint themselves with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim whatsoever will be allowed on the grounds of ignorance of the conditions under which the work will be executed.

1.3.5 SATISFACTORY INSTALLATION

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

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

1.3.6 CERTIFICATE INSURANCE OĦ. COMPLIANCE APPLICABLE 5 SIHI PROJECT SI LIABILITY

- Bidder shall allow to submit electrical compliance certificate
- Equipment operating manuals.
- Training of maintenance staff certificate
- Mechanical guarantee certificate
- Copy of company liability insurance must be included in the quotation prior to submission

1.3.7 GENERAL

the installation and making good of all work related to the installation. The patching and painting (If Any) must be to the satisfaction of the KwaZulu-Natal Department of The Bidders / Contractors will be responsible for all masonry work associated with

2. TECHNICAL SPECIFICATION

2.1 GENERAL

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

2.1.1 SCOPE

to avoid under quote. water supply - all contractor to confirm piping measurement prior to submitting of quotation action taps and supply and installation of class 02 copper pipes and connect to hot and cold Supply materials and labour to remove existing old and damaged medical basins and elbow

completion of the projects / works. fixing screws are included in the quotation / materials are allowed by contractor for the that new handwash basin are installed as per manufactures specifications and all required Materials that are used are to comply with ISO 9001:2008 Standards. The bidder is to ensure

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP DOH - SBYN 2021 - CORRECTIVE MAINTENANCE

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SIBUYANE CLINIC-UMVOT! SUB DISTRICT

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DOH -

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

2.1.2 WORK TO BE CARRIED OUT

Supply and install the following:

- Supply and install 15mm stop cocks for hot and cold water supply.
- Supply and deliver 15mm and 22mm connex copper fittings.
- Supply and install 15mm class 02 copper piping as pointed out.
- Supply and install new hospital medical hand wash basin.
- Supply and install new hospital medical wall mounted elbow action taps.
- Supply and make good of existing walls and prepare for new painting where necessary.
- Supply metal wall mounted pipes holder brackets which have nylon hanker.

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SIBUYANE CLINIC-UMVOTI SUB DISTRICT

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DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

3. SCHEDULE OF RATES

PREAMBLE TO SCHEDULE OF RATES

Items and Pricing

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

Tax and Duties

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

Rates

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

Carried T		[tem
Carried To Collection Summary PS 1	NOTES: 1) All rates for items contained in this Schedule of Prices must be computed excluding the applicable Sales Tax. 2) Where items are described as "Or other approved", approval must be obtained prior to tendering or submission of documents. 3) All rates quoted shall be inclusive of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done of Greytown Hospital will not be responsible for any mistakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document INSTITUTION: SIBUYANK CLINICALIMVOTI SUB DISTRICT SERVICE: INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER EXPRICE INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER SUpply labour and all materials for the complete installation of hospital medical hand wash basin, installation shall be inclusive of hospital medical pillar type mixer taps, steel chromed waste overflow and fittings, fixing screws as per suppliers specification, hospital hand washbasin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand wash basin will be as follows: Height: 380mm Volume:96700500m* Volume:96700500m* During the day of the site inspection all bidders are requested to ensure they are familiarized themselves to the setting of the site and what is requested from the specification to successful complete the project without challenges and to avoid price underquote. Sample will be available on request.	DESCRIPTION
	Unit	UNIT
	02	QTY
R		RATE/ UNIT
,-		C
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PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SIBUYANE CLINIC-UMVOTI SUB DISTRIC

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

ZNQ:

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

COLLECTION SUMMARY

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

Z	TOTAL: CARRIED TO TENDER FORM
R	ADD Provision for Value Added Tax Allow 15% of SUB-TOTAL "A"
R	SUB-TOTAL "A"
R	Collection Summary PS 3
R	Collection Summary PS 2
R	Collection Summary PS 1

IMPORTANT

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

OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE

Site/building/institution involved: SIBUYANE CLINIC-UMVOTI SUB DISTRICT

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

Service:

Quotation No.:

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THIS IS TO CERTIFY THAT OF (STATE NAME OF TENDERER)
(DATE) AND IS THEREFORE FAMILIAR WITH THE CIRCUMSTANCES AND
THE SCOPE OF THE SERVICE TO BE RENDERED.
SIGNATURE OF TENDERER OR AUTHORISED REPRESENTATIVE
DATE:
SIGNATURE OF DEPARTMENTAL REPRESENTATIVE
DEPARTMENTAL STAMP:
DATE:

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SIBUYANE CLINIC-UMVOTI SUB DISTRICT

4.

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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.

DATE:	SIGNATURE OF TENDERER:									SECTION
	TENDERER									PAGE
										VARIATION: CLAUSE OR ITEM

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SIBUYANE CLINIC-UMVOTI SUB DISTRICT

4.

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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
SIGNATURE OF TENDERER:	DERER:	
DATE:		

	DATE:
DOH - SBYN 2021 - CORRECTIVE MAINTENANCE	

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH |F-40|

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DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

<u>SCHEDULE OF REFERENCES</u>

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

PLACE WORK WAS DONE	CONTACT PERSON	COMPLETED SCOPE OF WORK
SIGNATURE OF TENDERER:		
DATE:		

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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IMPORTANT

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

QUESTIONNAIRE

DATE	SIGNATURE OF TENDERER	
	Is a special import permit required?	12.
	What are the names and addresses of the factories where the goods will be manufactured and, if required, inspected?	<u>.</u>
	Where are these facilities available?	10.
	What facilities exist for the servicing of the Machine/goods offered?	9
	Where are stock held?	ò
	What is the approximate value of spares carried in stock in the RSA for this particular make and model of machine?	7.
	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?	<u></u> .
	Are you the accredited agents in the RSA for the Manufacture/ supply of the goods offered by you?	Ċι
	Is the equipment guaranteed for a minimum period of six months?	4.
	How will delivery be affected?	ယ
	Is the delivery period stated firm?	5
REPLIES	Are the prices/rates quoted firm?	

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE
INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SIBUYANE CLINIC-UMVOTI SUB DISTRICT

1.

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SUMMARY FOR QUOTATION OPENING PURPOSES ONLY (To be completed by Tenderer)

80/20 PREFERENCE POINTS CLAIMED IN TERMS OF THE KWAZULU-NATAL PROCUREMENT REGULATION

	က	ĊΊ	4.		ယု	5	
NAME OF COMPANY			. HAVE ANY ALTERATIONS BEEN MADE?		TIME FOR COMPLETION/ DELIVERY:	AMOUNT IN WORDS:	QUOTATION PRICE INCLUDING V.A.T.
SIGNATURE	IF APPLICABLE: DID THE TENDERER ATTEND THE OFFICIAL BRIEFING SESSION/ COMPULSORY SITE INSPECTION?	HAS AN ALTERNATIVE QUOTATION BEEN SUBMITTED?	BEEN MADE?	IMPORTANT Mark appropriate block with "X"	DELIVERY: 4 (four weeks)		UDING V.A.T. R
DATE	YES NO	YES NO	YES NO				

DOH – SBYN 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH SIBUYANE CLINIC-UMVOTI SUB DISTRICT

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KRANSKOP CLINIC-UMVOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

DOH - GTW-CAT "C" CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

<u>:</u> PROJECT SPECIFICATIONS

1.1 SCOPE OF CONTRACT

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

1.2 CONTRACT DRAWINGS

Attached drawing no.

1.3 CONDITIONS OF CONTRACT AND PRELIMINARIES

1.3.1PERIOD OF CONTRACT

Three (03) Weeks as the Contract Period for the completion of the Work from date of Site handover

1.3.2 CONTRACT GUARANTEE:

claim whatsoever will be allowed on the grounds of ignorance of the conditions under The repairs must be to the satisfaction of the Kwa Zulu- Natal Department of Health Damage to the existing buildings - Bidders to note that any damages done or occurring to any of the buildings will be repaired at the expense of the contractor/ Tenderer. which the work will be executed. nature of the work to be done and access to the siting of the existing buildings etc., as no Bidders are advised to visit the site prior to tendering and to acquaint themselves with the

1.3.3 GUARANTEE PERIOD

The guarantee period for the completion materials must be a minimum of *Three (* delivery. Materials shall be guarantee for at list 5 years and above. of the Structure indicated above Calendar Months from the date and all of final

1.3.3.1 PENALTY FOR NON COMPLETION

Penalties of 0.04% a day shall apply for non-completion of the projects

1.3.4 SITE AND MODE OF PROCEDURE

KRANSKOP CLINIC - UMVOTI SUB DISTRICT The work contained in this contract will be carried out on the site of the existing

contract, and that the minimum amount of disruption to services is of the utmost importance. The Bidder is advised that the existing premises will be occupied throughout the period of the

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP DOH - GTW 2021 - CORRECTIVE MAINTENANCE

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

The repairs must be to the satisfaction of the Kwa Zulu- Natal Department of Health. Bidders are advised to visit the site prior to tendering and to acquaint themselves with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim whatsoever will be allowed on the grounds of ignorance of the conditions under which the work will be executed.

1.3.5 SATISFACTORY INSTALLATION

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

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

1.3.6 CERTIFICATE INSURANCE OH OH COMPLIANCE APPLICABLE TO THIS PROJECT S LIABILITY

- Bidder shall allow to submit electrical compliance certificate
- Equipment operating manuals.
- Training of maintenance staff certificate
- Mechanical guarantee certificate
- Copy of company liability insurance must be included in the quotation prior to submission

1.3.7 GENERAL

the installation and making good of all work related to the installation. The patching and painting (If Any) must be to the satisfaction of the KwaZulu-Natal Department of Bidders / Contractors will be responsible for all masonry work associated with

2. TECHNICAL SPECIFICATION

2.1 GENERAL

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

2.1.1 SCOPE

water supply - all contractor to confirm piping measurement prior to submitting of quotation Supply materials and labour to remove existing old and damaged medical basins and elbow action taps and supply and installation of class 02 copper pipes and connect to hot and cold to avoid under quote.

Materials that are used are to comply with ISO 9001:2008 Standards. The bidder is to ensure completion of the projects / works. fixing screws that new handwash basin are installed as per manufactures specifications and all required are included in the quotation / materials are allowed by contractor for the

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP **DOH - GTW 2021 - CORRECTIVE MAINTENANCE**

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DEPARTMENT OF HEALTH KRANSKOP CLINIC-UMVOTI SUB DISTRICT PROVINCE OF KWAZULU-NATAL

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DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

2.1.2 WORK TO BE CARRIED OUT

Supply and install the following:

- Supply and install 15mm stop cocks for hot and cold water supply.
- . . Supply and deliver 15mm and 22mm connex copper fittings.
- Supply and install 15mm class 02 copper piping as pointed out.
- Supply and install new hospital medical hand wash basin.
- Supply and install new hospital medical wall mounted elbow action taps.
- Supply and make good of existing walls and prepare for new painting where necessary.
- Supply metal wall mounted pipes holder brackets which have nylon

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH KRANSKOP CLINIC-UMVOTI SUB DISTRICT

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DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

3. SCHEDULE OF RATES

PREAMBLE TO SCHEDULE OF RATES

Items and Pricing

of his tender for the contract and of the rates and prices stated in the Schedule of Rates. 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 be deemed to have satisfied himself before tendering as to the correctness and sufficiency apparently no corresponding items are given in the Schedule of Rates. in respect of any order, other parts of the document. The Department reserves the right to place an order for any quantities of items included in which may be described or implied Thus the supplier shall not have claim for further payment in the contract, The supplier shall although

Tax and Duties

Prices, tendered 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).

Rates

items and shall cover all labour, 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 shall be the full rates and prices for the service delivered described under the respective Except where provision is made in the Schedule of Rates, the rates and prices inserted items in the Schedule of Rates.

	₽				Carried To Collection Summary PS 1	Carried
			02	Unit	Schedule of Prices must be computed excluding the applicable Sales Tax. 2) Where items are described as "Or other approved", approval must be obtained prior to tendering or submission of documents. 3) All rates quoted shall be inclusive of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done of transport, labour and profit. 4) caution to be taken to do the exact measurements before submission is done of transport, labour and profit. 5) Creytown Hospital will not be responsible for any mistakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document with maintenance department at the Hospital prior to filling and submitting of the document prior to filling and submitting of the comment prior to filling and submitting of the comment prior to filling and submitting of the comment prior to filling and submitting of the dall materials for the completer taps, steel chromed wash basin, installation of hospital medical pillar type mixer taps, steel chromed wash basin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand wash basin shall be white glazed in colour and No alternative basin will accepted. The size of the hospital hand wash basin will be white glazed from the specification to successful complete the project without challenges and to avoid price underquote. Sample will be a villable on request.	
×	G	×			NOTES:	
TOTAL			QTY	TINU	DESCRIPTION	Item
I V I C I	/ TINIT	DATE.	ALC	TINIT		lItem

Carried To Collection Summary	Contracto the struct container	Supply holder l	Various comeasured. Contractor consure	Suppl clean	Suppl clean	INSTIT SERVI BASIN	NOTES: 1) 2) 3) 4) 4)	tem DESCR
ion Summary PS 2	Contractors are requested to note the structure is chromodek container	Supply metal wall mounted pipes holder brackets which have nylon hanker.	Various connex copper fittings, to be measured. Contractors to measure on site to ensure	Supply and install new 22mm class 2 clean copper pipes	Supply and install new 15mm class 2 clean copper pipes	INSTITUTION: KRANSKOP CLINIC-UMVOTI SUB DISTRICT SERVICE: INSTALLATION OF MEDICAL HANDWASH BASIN AND WALL MOUNTED ELBOW ACTION MIXER TAPS	All rates for items contained in this Schedule of Prices must be computed excluding the applicable Sales Tax. Where items are described as "Or other approved", approval must be obtained prior to tendering or submission of documents. All rates quoted shall be inclusive of transport, labour and profit. caution to be taken to do the exact measurements before submission is done Greytown Hospital will not be responsible for any mistakes and underquoting all Technical enquiries should be communicated with maintenance department at the Hospital prior to filling and submitting of the document	DESCRIPTION
	n/c	item	item	unit	unit			UNIT
				06	04			QTY
R								RATE/ UNIT
								n
								TOTAL
								a

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PROVINCE OF KWAZULU-NATAL ij

ZNQ:	DEPARTMENT OF HEALTH KRANSKOP CLINIC-UMVOTI SUB DISTRIC
	DISTRIC

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

COLLECTION SUMMARY

NOTE

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

R	TOTAL: CARRIED TO TENDER FORM
R	ADD Provision for Value Added Tax Allow 15% of SUB-TOTAL "A"
R	SUB-TOTAL "A"
R	Collection Summary PS 3
R	Collection Summary PS 2
R	Collection Summary PS 1

IMPORTANT

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

OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE

Site/building/institution involved: KRANSKOP CLINIC-UMVOTI SUB DISTRICT

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

DATE.
DEPARTMENTAL STAMP:
SIGNATURE OF DEPARTMENTAL REPRESENTATIVE
DATE
SIGNATURE OF TENDERER OR AUTHORISED REPRESENTATIVE
THE SCOPE OF THE SERVICE TO BE RENDERED.
OF (STATE NAME OF TENDE
特特特特特特特特特特特特特特特特特特特特特特特特特特特特特特特特特特特特
Service:
Quotation No.:

DOH – GTW 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH KRANSKOP CLINIC-UMVOTI SUB DISTRICT

DOH - GTW-CAT "C" - CORRECTIVE MAINTENANCE

INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

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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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

SCHEDULE OF ALTERNATIVE QUOTATIONS

of the original quotation documentation. 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

SECTION	PAGE	ITEM
SNATURE OF TENDERER:	ERER:	
TE:		

DOH - GT	DATE:	SIGNATURE OF TENDERER:
DOH – GTW 2021 – CORRECTIVE MAINTENANCE INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TA		

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

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INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

<u>SCHEDULE OF REFERENCES</u>

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

_	_	-,	 	 		 	 	 	 	
										PLACE WORK WAS DONE
										CONTACT PERSON
										COMPLETED SCOPE OF WORK

DATE:	SIGNATURE OF TENDERER:

DOH – GTW 2021 – CORRECTIVE MAINTENANCE
INSTALLATION OF MEDICAL HANDWASH BASINS INCLUDING MEDICAL ELBOW ACTION TAP

IMPORTANT

THIS FORM IS ONLY TO BE INCLUDED AND COMPLETED WHEN APPLICABLE QUOTATION. 70 元后

QUESTIONNAIRE

DATE	SIGNATURE OF TENDERER	1
	Is a special import permit required?	12
	What are the names and addresses of the factories where the goods will be manufactured and, if required, inspected?	
	Where are these facilities available?	
	What facilities exist for the servicing of the Machine/goods offered?	9.
	Where are stock held?	œ
	What is the approximate value of spares carried in stock in the RSA for this particular make and model of machine?	7.
	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?	<u></u>
	Are you the accredited agents in the RSA for the Manufacture/ supply of the goods offered by you?	က်
	Is the equipment guaranteed for a minimum period of six months?	4
	How will delivery be affected?	က
	Is the delivery period stated firm?	5
REPLIES	Are the prices/rates quoted firm?	

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SUMMARY FOR QUOTATION OPENING PURPOSES ONLY (To be completed by Tenderer)

80/20 PREFERENCE POINTS CLAIMED IN TERMS OF THE KWAZULU-NATAL PROCUREMENT REGULATION

DATE	SIGNATURE	NAME OF COMPANY	
			l
YES NO	ER ATTEND THE OFFICIAL Y SITE INSPECTION?	IF APPLICABLE: DID THE TENDERER ATTEND THE OFFICIAL BRIEFING SESSION/ COMPULSORY SITE INSPECTION?	6.
YES NO	N BEEN SUBMITTED?	HAS AN ALTERNATIVE QUOTATION BEEN SUBMITTED?	Ċī
YES NO	ADE?	HAVE ANY ALTERATIONS BEEN MADE?	4.
	IMPORTANT appropriate block with	Mark a	
	4 (four weeks)	TIME FOR COMPLETION/ DELIVERY:	ώ
		AMOUNT IN WORDS:	i,
	A.T. R	QUOTATION PRICE INCLUDING V.A.T.	

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