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AdvertQuote



Finance Manager Name:

MR S.M BUTHELEZI

Finance Manager Signature:

No late quotes will be considered

Print this page

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000.00				
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: ITSHELEJUBA HOSPITAL				
DATE ADVERTISED: 05/05/2021 CLOSING DATE: 13/05/2021 CLOSING TIME: 11:00				
FACSIMILE NUMBER: 034 413 2591 E-MAIL ADDRESS: bonisiwe.dludlu@kznhealth.gov.za				
PHYSICAL ADDRESS: ALONG N2 ROAD, 32KM FROM PONGOLA TOWN				
ITS/021/21/22				
ZNQ NUMBER: ITS/021/21/22				
DESCRIPTION: MAJOR SERVICE TO OXYGEN GENERATOR PLANT				
CONTRACT PERIOD ONCE-OFF VALIDITY PERIOD 60 Days SARS PIN				
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.				
UNIQUE REGISTRATION REFERENCE				
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS)				
ITSHELEJUBA HOSPITAL AT THE MAIN SECURITY GATE - TENDER BOX				
Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted fo consideration.				
The quote box is open from 08:00 to 15:30.				
ALL QUOTES MUST BE SUBMITTED ON THE OFFICIAL FORMS - (NOT TO BE RE-TYPED)				
THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2011, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.				
THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO WILL RESULT IN YOUR QUOTE BEING DISQUALIFIED)				
NAME OF BIDDER				
POSTAL ADDRESS				
STREET ADDRESS				
TELEPHONE NUMBER CODENUMBER FACSIMILE NUMBER CODENUMBER				
CELLPHONE NUMBER				
E-MAIL ADDRESS				
VAT REGISTRATION NUMBER (If VAT vendor)				
HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SBD 6.1)				

[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMES& QSES) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]

OFFICIAL PRICE PAGE FOR QUOTATIONS		ZNQ NUMBER: ITS/021/21/22				
ESCRIPTI	ON: MAJO	OR SERVICE TO OXYGEN GENER	RATOR PL	-ANT	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
GNATURI	E OF BIDDER		DATE.			
y signing t	his document	I hereby agree to all terms and conditions]				
PACITY	UNDER WHIC	CH THIS QUOTE IS SIGNED		,,,,,,,,,,		
tem No	Quantity	Description	Brand &	Country of	Price	
			model	manufacture	R	
01	SPEC ATT	MAJOR SERVICE TO OXYGEN GENERATOR				
		PLANT (INTAKA)				\dashv
		REQUIREMENT: CIDB 1 ME OR ABOVE	+			7
		VALID REGISTRATION AS MECHANICAL				Ì
		CONTRACTOR ON ELECTRICAL MACHINERY				1
		LETTER OF GOOD STANDING TO THE RELEVANT				
		FIELD				
	+	(SDEC ATTACHED)				
		(SPEC ATTACHED)		+		-
						\dashv
		-				
			1			
						_
			1			
		-				
		-				
ALUE AD	DED TAX @	15% (Only if VAT Vendor)	•	•		_

Boos mis offer comply with the opcompation:	poed the Atticle Contont to the C.A.N.C. 7 C.A.D.C. Openication:	- 1
Is The Price Firm?	State Delivery Period E.G. E.G. 1day, 1week	1
		_]
Enquiries regarding the quote may be directed to Contact Person: MANDLATel: 034 E-Mail Address: mandlenkosi.mhlongo@	Enquiries regarding technical information may be directed to:	8

DECLARATION OF INTEREST

1. - -	blood relationship, may make an limited quote or proposal). In vie employed by the state, or to per declare his/her position in relation the bidder is employed by the the legal person on whose be evaluation and or adjudication	offer or offers in terms of this invita w of possible allegations of favouriti sons connected with or related to the to the evaluating/adjudicating auth state; and/or whalf the bidding document is signed of the quote(s), or where it is know	sons having a kinship with persons ention to quote (includes a price quotation ism, should the resulting quote, or parthem, it is required that the bidder or loority where- d, has a relationship with persons/a parth that such a relationship exists betwoeld.	on, advertised competitive quote, t thereof, be awarded to persons his/her authorised representative person who are/is involved in the teen the person or persons for or	
2.			be completed and submitted with the c	•	
2.1	Full Name of bidder/representat	iuo 2	.4. Company Registration Number:		
2.2.	Identity Number:	2	.5. Tax Reference Number:		
2.3.	Position occupied in the Compar	ny (director, trustee, shareholder²):2	.6. VAT Registration Number:		
			v		
2.7.	The names of all directors / trus employee / persal numbers mus	tees / shareholders / members, thei t be indicated in paragraph 3 below.	r individual identity numbers, tax refer	rence numbers and, if applicable, [TICK APPLICABLE]	
		d with the bidder presently employe	d by the state?	YES NO	
	. If so, furnish the following partic			-	
	Name of person / director / truste	e / shareholder/ member:	L:JJ:_		
	Position occupied in the state ins	i you or the person connected to the	bidder is employed:Any other particulars:	***************************************	
			ropriate authority to undertake remuni		
_	in the public sector?	-,, , o o o o o o o o o o o o o o o o o o		YES NO	
		of such authority to the quote docum		120 110	
	ailure to submit proof of such au	thority, where applicable, may result	in the disqualification of the quote.)		
2.8.2	.2. If no, furnish reason	ns for non-submission of such proof:			
2.9.	state in the previous twelve mon		s / shareholders / members or their sp		
291				YES NO	
				n employed by the state and who	
	.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? YES NO				
2.11.	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		be involved with the evaluation and		YES NO	
2.12	Do you or any of the directors / ti	rustees / shareholders / members of	the company have any interest in any	other related companies whether	
	or not they are bidding for this co		and demparty rieve any interest in any	YES NO	
2.12.		************************************		120 110	
	Full details of directors / truste				
	The Department Of Health will vito ensure that their details are u	alidate <mark>details of directors / truste</mark> p-to-date and verified on CSD. If th	es / members / shareholders on CSE te Department cannot validate the info lational Treasury Instruction Note 4 (a	ormation on CSD, the quote will	
4	DECLARATION				
	IE UNDERSIGNED (NAME NISHED IN PARAGRAPHS		CERTIFY	THAT THE INFORMATION	
	CEPT THAT THE STATE M VE TO BE FALSE.	1AY REJECT THE QUOTE OR	ACT AGAINST ME SHOULD T	THIS DECLARATION	
		Signature	Position	Date	

- any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999);
- any municipality or municipal entity;

- provincial legislature;
 ational Assembly or the national Council of provinces; or
- e) Parliament.

²⁰ Shareholder* means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

1. AMENDMENT OF CONTRACT

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

2. CHANGE OF ADDRESS

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

3. GENERAL CONDITIONS ATTACHED TO THIS QUOTATION

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

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

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

5. SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

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

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

SAMPLES

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

7. COMPULSORY SITE INSPECTION / BRIEFING SESSION

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

8. STATEMENT OF SUPPLIES AND SERVICES

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

9. SUBMISSION AND COMPLETION OF SBD 6.1

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

10. TAX COMPLIANCE REQUIREMENTS

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

11. TAX INVOICE

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

12. PATENT RIGHTS

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

13. PENALTIES

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

14. TERMINATION FOR DEFAULT

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

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

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

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

1. GENERAL CONDITIONS

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

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

- 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.
- 1.6 The purchaser reserves the right to require of a bidder, either before a quote is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

2. DEFINITIONS

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

3. POINTS AWARDED FOR PRICE

3.1 THE 80/20 PREFERENCE POINT SYSTEMS

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

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

Ps = Points scored for price of bid under consideration

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

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

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

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

5.	BID	DECL	ARA	TION

5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:

^	DIRECT ATATION CORE ACCOUNTS OF A CONTROLLING OF BUILDING OF BUILDING A CONTROL A CONTROLLING OF BUILDING OF BUILDING A CONTROLLING OF BUILDING OF BUILDING A CONTROL	
6	B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND	1117
D.	- D-DDEE STRUUS LEVEL UE GUNTRIDITIUR GLANDIED IN LERIVIS DE PARAGRAPAS LA AIVI.	3 M I

6.1 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)
7.1	Will any portion of the contract be sub-contracted?	YES NO
7.1.1	If yes, indicate:	
8.	i) What percentage of the contract will be subcontracted	(Tick applicable box)
Ų.	Thiotics the day contractor to the Eine of Got	(Tiok applicable box)

iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of YES NO				
Preferential Procurement Regulations, 2017:				
Designated Group: An EME or QSE which is at last 51% owned by:	EME	QSE		
	V			
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.	DECLARA	ATION WITH REGARD TO COMPANY/FIRM			
9.1	Name of company/firm:				
9.2	VAT registration number:				
9.3	Company registration number:				
9.4	TYPE C	OF COMPANY/ FIRM [TICK APPLICABLE BOX]			
		Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited			
9.5	DESCR	RIBE PRINCIPAL BUSINESS ACTIVITIES			
,					
9.6	COMPA	ANY CLASSIFICATION [TICK APPLICABLE BOX	X		
		Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.			
9.7	Total nu	umber of years the company/firm has been in bus	siness:		
9.8	I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, bat the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ f the preference(s) shown and I / we acknowledge that:				
	 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 m be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;				
		the B-BBEE status level of contributor has been over not been fulfilled, the purchaser may, in addit	claimed or obtained on a fraudulent basis or any of the conditions of contract ion to any other remedy it may have –		
	(a)	disqualify the person from the bidding process;			
	(p)	recover costs, losses or damages it has incurre	ed or suffered as a result of that person's conduct;		
	(c)	cancel the contract and claim any damages w arrangements due to such cancellation;	hich it has suffered as a result of having to make less favourable		
	(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.			
	WITN	ESSES	CONATIDE (C) OF DIDE DO(C)		
	1		SIGNATURE(S) OF BIDDERS(S)		
			DATE:		
	2		ADDRESS		



Physical Address: Along N2 between Pongola and Piet Retief town Postal Address: Private/Bag X0047, Pngola 3170 Tel: 034 413 4000; Fax:034 413 2545 Email: Nkosinathi. mahlobo@kznhealth.gov.za

ITSHELEJUBA HOSPITAL

HEALTH PROMOTION HOSPITAL

Medical oxygen self-generator Plant

Plant name: Medical Oxygen self-generator plant

Service Type: Major Service

Institution: Itshelejuba District Hospital



Physical Address: Along N2 between Pongola and Piet Retief towns Postal Address: Private/Bag X0047, Pngola,3170 Tel: 034 413 4000; Fax:034 413 2545 Email:Nkosinathi mahlobo@kznhealth.gov.za

ITSHELEJUBA HOSPITAL

HEALTH PROMOTION HOSPITAL

Minimum requirements

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- The bidder must be registered on ZNB 5730/2013H or be CIDB registered as ME 1 or above
- CSSD commodities register as mechanical contractor on electrical machinery
- Valid Registration as mechanical contractor electrical machinery



Physical Address: Along N2 between Pongola and Piet Retief towns Postal Address: Private/Bag X0047, Pngola, 3170
Tel: 034 413 4000, Fax:034 413 2545
Email:Nkosinathi.mahlobo@kznhealth.gov.za

ITSHELEJUBA HOSPITAL

HEALTH PROMOTION HOSPITAL

2. Retainable document for evaluation

- Signed tender document
- ME CIDB Grade 1 or above

Documents required after service is done:

finalized project. The contractor shall submit the invoice with the following documents for the payment approval, if this document is not submitted we are going to take as un-

- Report of the service done
- Attached Schedule report being filled accordingly
- Signe job cards by maintenance officer
- Original Tax Invoice



Physical Address: Along N2 between Pongola and Piet Retief towns Postal Address: Private/Bag X0047, Pngola,3170 Tel: 034 413 4000; Fax:034 413 2545 Email:Nkosinathi.mahlobo@kznhealth.gov.za

ITSHELEJUBA HOSPITAL

HEALTH PROMOTION HOSPITAL

Scope of work:

Service the equipment as per schedule given.

schedule. Read schedule and quote as per items that will be changed during your service, as there will be no payment done without doing the service as per

Service repot shall be submitted to the official if not, the service is incomplete no payment will be done. Lock book shall be sing time in and time out.

Inspection shall be done with chief/foremen

The schedule shall be fill-in and submitted to the official.

The contractor to used approved parts on the equipment. The contractor must change all filters and parts which are that are due as per equipment schedule. The correct part number of each part shall be used



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The contractor needs to change the following parts

Not that the contractor will have to came with all spares and be approved by maintenance manager prior be used on the equipment

- 1. Atlas copco compressors need to be serviced every 4000hrs.
- 2. All filters need to be replaced yearly.
- 2 x 4000hr service kits for GA 5 compressors.
- 1 x Mini Puro oil/water separator kit
- 1 x FX 012 Carbon Element
- 1 x FZ 006 Filter element
- 2 x 015 AA domnick hunter element
- 1 x 015 ACS domnick hunter element
- 1 x 015 AO domnick hunter element



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4 x 5lt Atlas copco 8000hr oil

Service Schedule for Self generator of medical gas plant

INSTRUCTION	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	DESCRIPTIONOF SPARES USED	DISCRIPTION OF OTHER REPAIRS REQUIRED	DISCRIPTION OF SPAIRS REQUIRED	QTY REQ
Self-generation of medical gas plant						
Oxygen purity (Record)						237
Check if all alarm condition are ok						© ∃
Check and record running hours						_
Check and record Running compressor dry temperature						
Check and record running compressor element out temperature	*	В				
Check if all alarms connected						



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Manual drain of compressor air tanks Drain compressor manual								24
Drain compressor manual								
INSTRUCTION	ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	DESCRIPTIONOF SPARES USED	DISCRIPTION OF OTHER REPAIRS REQUIRED	DISCRIPTION OF SPAIRS REQUIRED	٥	QTY REQ	
Check back-up compressor is connected in automatic position	# E (W)						в : Ш	
Check compressor oil level		2 3		* II				
Check and drain all coalescent filters drain						r El	0	1
Clean air and oil radiator in main and backup compressor								
Clean compressor air filters								
Visual check of possible oil		88						
leaks(unusual noise in the compressor)								
Check total working hours of main								



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	2						Check the condition of the V-belt
l							upwards
							Change the oil separator GA11
							11(belt driven)
				×			Change the oil separator GA5-
	- 1						Service WSD condenser filter
							-
					286		Clean dry condenser
11							
			6				Clean air and oil coolers
			6				O
							Change air filters
					53		
				•			Change oil filters
			,		DONE		
					RUNNING REPAIRS		
		REQUIRED	REPAIRS REQUIRED	SPARES USED		ORDER	
	QTY REQ	DESCRIPTION OF SPEIRS	DESCRIPTION OF OTHER	DESCRIPTION OF	OTHER NON-SPECIFIED	Z	INSTRUCTION
				i d			0
-							Change oil
-							and plant
							Do housekeeping in plant room
							tightness
		(V)		12.00			Check all electrical wiring for



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Change the V-belt if required		8				
Change the kit admission valve	8					
Change the minimum pressure valve			- 1			*
		70. 70.				in the second
INSTRUCTION	ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	DESCRIPTION OF SPARES USED	DESCRIPTION OF OTHER REPAIRS REQUIRED	DESCRIPTION OF SPEIRS REQUIRED	QTY REQ
Test dryer and element						
temperature shat-down function		23				X
Test safety valves			0			
Lubricate motor bearings if required			×			
Change medical air filters kit						
Replace coal tower filter			•			
Replace concentrator inlet filter						
Replace oxygen outlet active carbon filter						



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Date:		Signature:			fficial on site:	Name of responsible official on site:
Signature:	Total KM	KM:	To:	KM:	То:	rom:
			Date:	Time on site:	Time out:	ime in:
					CK LETTERS):	COMPANY NAME (BLOCK LETTERS):
					S UNSKILLED:	NAME OF ASSISTANT/S UNSKILLED:
					NT/S: SEMI-SKILLED:	NAMES/S OF ASSISTANT/S: SEMI-SKILLED:
				SIGNATURE:	V(BLOCK LETTERS)	NAME OF SERVICEMAN(BLOCK LETTERS) SIGNATURE:
				ARRIED OUT	IED SERVICE WAS CA	CERTIFY THAT SPECIFIED SERVICE WAS CARRIED OUT
			,			
			9		lves	est all receiver safety valves
Ti di					ent	teplace oxygen outlet pacteriological filter element



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Official stamp

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Scope of servicing of Major Service

- Service the equipment as per schedule given.
- Read schedule and quote as per items that will be changed during your service, as there will be no payment done without doing the service as per
- Service repot shall be submitted to the official if not, the service is incomplete no payment will be done.
- Lock book shall be sing time in and time out.
- Inspection shall be done with chief/foremen
- The schedule shall be fill-in and submitted to the official.

DROVICE OF KWAZULU-NATAL: DEPARTMENT OF HEALTH ITSHELEJUBA DISTRICT HOSPITAL

Service Schedule for Self generator of medical gas plant (INTAKA)

INSTRUCTION	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	DESCRIPTIONOF SPARES USED	DISCRIPTION OF OTHER REPAIRS REQUIRED	DISCRIPTION OF SPAIRS REQUIRED	QTY REQ
Self-generation of medical gas plant						*
Oxygen purity (Record)			P. Carlotte			
Check if all alarm condition are ok				B		
Check and record running hours						
Check and record Running compressor dry temperature	2	93		=		
Check and record running compressor element out temperature			В			н
Check if all alarms connected				8		
Manual drain of compressor air tanks						
Drain compressor manual						
Check back-up compressor is connected in automatic position						

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INSTRUCTION	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	DESCRIPTIONOF SPARES USED	DISCRIPTION OF OTHER REPAIRS REQUIRED	DISCRIPTION OF SPAIRS REQUIRED	QTY REQ
Check compressor oil level	2			20 1	Speller or	
Check and drain all coalescent filters drain						
Clean air and oil radiator in main and backup compressor						
Clean compressor air filters			0			
Visual check of possible oil	917	9.8		V		
Check total working hours of main compressor and backup					2	
Check all electrical wiring for tightness						
Do housekeeping in plant room and plant						
Change oil		SE SE			9	
Change oil filters						
Change air filters						
Clean air and oil coolers						
Clean dry condenser						

PROVICE OF KWAZULU-NATAL: DEPARTMENT OF HEALTH ITSHELEJUBA DISTRICT HOSPITAL

2	4				9	Ť
INSTRUCTION	ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	SPARES USED	DISCRIPTION OF OTHER REPAIRS REQUIRED	REQUIRED	QTYREQ
					No.	
Service WSD condenser filter		9				
Change the oil separator GA5-11(belt driven)						jt.
Change the oil separator GA11 upwards			150	N N		1
Check the condition of the V-belt						
Change the V-belt if required	0		Tr. e			
Change the kit admission valve						
Change the minimum pressure valve	3				5	
Test dryer and element temperature shat- down function						2
Test safety valves				_		
Lubricate motor bearings if required		х			_ 24	£.
Change medical air filters kit						
Replace coal tower filter		U				
Replace concentrator inlet filter						
Replace oxygen outlet active carbon filter						

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INSTRUCTION	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	DESCRIPTIONOF SPARES USED	DISCRIPTION OF OTHER DISCRIPTION OF SPAIRS REPAIRS REQUIRED REQUIRED	DISCRIPTION OF SPAIRS REQUIRED	QTY REQ
Replace oxygen outlet bacteriological filter element		•				
Test all receiver safety valves					1 100 a 200	