

KZN Health Intranet

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AdvertQuote

KWAZULU-NATAL PROVI	NCE	
MEACH SEPHELE OF SOUTH AFRICA	Quotation Advert	
Opening Date:	2021-11-24	P
Closing Date:	2021-12-01	geom to the
Closing Time:	11:00	\
INSTITUTION DETAILS		
Institution Name:	Umzinyathi district office	
Province:	KwaZulu-Natal	•
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	uMzinyathi Health District Office	
Date Submitted	2021-11-24	(vocas)
ITEM CATEGORY AND DETAILS	**************************************	[2]
Quotation Number:	ZNQ:	
Now Oak	UMZ295/2021/22	
Item Category:	Goods	•
Item Description:	MDR TB Register / Drug Resistant TB Registers	
Quantity (if supplies)	100	
COMPULSORY BRIEFING SESSION /		
Select Type:	Not Applicable	
Date :	***************************************	~
Time:	N/A	
Venue:	N/A N/A	
QUOTES CAN BE COLLECTED FROM:	Quotes can be downloded from the Webmaster	
QUOTES SHOULD BE DELIVERED TO:	uMzinyathi Health District Office	

portal.kznhealth.gov.za/components/scm/SitePages/AdvertQuote.aspx

Name:

Email:

Contact Number:

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Khulekani Zondo

034-2999 162

khulekani.zondo@kznhealth.gov.za

11/24/21, 11:05 AM

Supply Chain Management - AdvertQuote

Finance Manager Name:

Finance Manager Signature:

No late guotes will be considered

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000.00 YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: UMZINYATHI HEALTH DISTRICT OFFICE DATE ADVERTISED: 24/11/2021 CLOSING TIME: 11:00 E-MAIL ADDRESS: khulekani.zondo@kznhealth.gov.za FACSIMILE NUMBER: 0342123139 PHYSICAL ADDRESS: 34 WILSON STREET DUNDEE, 3000 ZNQ NUMBER: UMZ295/2021/22 MDR TB REGISTER / DRUG RESISTENT TB REGISTERS CONTRACT PERIOD. ONCE-OFF SARS PIN..... **VALIDITY PERIOD 60 Days** (if applicable) CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO. UNIQUE REGISTRATION REFERENCE DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS) 34 WILSON STREET DUNDEE 3000 Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted for 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 CODE......NUMBER......FACSIMILE NUMBER CODENUMBER......NUMBER..... CELLPHONE NUMBER E-MAIL ADDRESS VAT REGISTRATION NUMBER (If VAT vendor) YES NO HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SBD 6.1) IA B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMES& QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]

DEPARTMENT OF HEALTH
UMZINYATHI DISTRICT OFFICE

2 4 NOV 2021

PRIVATE BAG 2052 DUNDEE 3000

DESCRIPTIO	_{N:} MDR	TB REGISTER / DRU	JG RESIST	ENTIB	REGISTER	S	
SIGNATURE By signing th	OF BIDDER	I hereby agree to all terms and conditio	ns]	, DATE.	······································		
CAPACITY L	INDER WHIC	CH THIS QUOTE IS SIGNED				·····	
Item No	Quantity	Description		Brand & model	Country of manufacture	Price R	С
01.	100	SUPPLY AND DELIVER MDR TB RE	GISTER / DRUG				
		RESISTANT TB REGIS	STERS				
		- COVER: PRINTED FULL COLOU	IR BOTH SIDES		•		
		: 350 GSM MAGNO N	1ATT				
		: MATT LAMINATED BOT	H SIDES				
		- TEXT: 80 GSM BOND	WHITE				
		: PRINTED BLACK THRO					
		: 28 PAGES					
		SIZE: 594MM X 210	MM		Winhord Processing Control of Con		
		: SCORE AND FOLD TO 2971	MM X 210MM	= -			
		: SADDLE STITCH					
		- NB: ELECTRONIC SAMPLE	AVAILABLE				
				youanna .			
		- TO BE DELIVERED AT UMZINYATHI HEALT	H DISTRICT OFFICE				
							
	<u> </u>						-
		Address Provincian Conference					
				<u> </u>			
		15% (Only if VAT Vendor)					
TOTAL QU	OTATION P	RICE (VALIDITY PERIOD 60 Days)					l
Dogs This ()	ffer Comply	With The Specification?	es The Article Conf	orm To The S A	N.S. / S.A.B.S. Specif	ication?	
Is The Price			ate Delivery Period				
Contact Pe	rson: Khul	e <u>guote</u> may be directed to: ekani Zondo _{Tel:} 034,2999 ekani zondo@kznhealth.q	162		nical information may		

DECLARATION OF INTEREST

- 1. Any legal person, including persons employed by the state¹, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to quote (includes a price quotation, advertised competitive quote, limited quote or proposal). In view of possible allegations of favouritism, should the resulting quote, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where-
- the bidder is employed by the state; and/or
- the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the quote(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the quote.

2.	In order to give effect to the above, the following questionnaire mu	ist be	completed and submitted with the quote.		
		2.5.	Tax Reference Number:		
2.7.	The names of all directors / trustees / shareholders / members, t				
	employee / persal numbers must be indicated in paragraph 3 belo	ow.		ICK APPLICA	
	Are you or any person connected with the bidder presently employed	oyed b	yy the state?	YES	NO
2.8.	 If so, furnish the following particulars: Name of person / director / trustee / shareholder/ member: 				
	Name of state institution at which you or the person connected to	the hi	dder is employed	***************************************	
	Position occupied in the state institution:		Any other particulars:		
2.8.	If you are presently employed by the state, did you obtain the a	ppro	priate authority to undertake remunerative	work outside	employment
	in the public sector?		,	YES	NO
	If yes, did you attach proof of such authority to the quote doc			<u> </u>	
	Failure to submit proof of such authority, where applicable, may res				
2.8.		oof:		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
2.9.	Did you or your spouse, or any of the company's directors / trust	ees /	shareholders / members or their spouses of		
2.0	state in the previous twelve months?			YES	NO
2.9.	If so, furnish particulars: Do you, or any person connected with the bidder, have any relation.	onehii	n /family friend other) with a nerson emolo	wed by the st	ate and who
2.10	may be involved with the evaluation and or adjudication of this qu			YES	NO I
2.10).1. If so, furnish particulars:			LILU	INO
2.11	. Are you, or any person connected with the bidder, aware of any re	elation	nship (family, friend, other) between any oth	ner bidder and	l any persor
	employed by the state who may be involved with the evaluation a			YES	NO
2.11	.1. If so, furnish particulars:			1-6-1	! le - 4le + .
2.12	2. Do you or any of the directors / trustees / shareholders / members	or the	e company nave any interest in any other re		
2.42	or not they are bidding for this contract? 2.1. If so, furnish particulars:			YES	NO
	Full details of directors / trustees / members / shareholders. The Department Of Health will validate details of directors / trusto ensure that their details are up-to-date and verified on CSD. I not be considered and passed over as non-compliant according to	f the	Department cannot validate the information	on on CSD, th	
4	DECLARATION				
	HE UNDERSIGNED (NAME) RNISHED IN PARAGRAPHS 2.		CERTIFY THAT	THE INFOR	RMATION
	CCEPT THAT THE STATE MAY REJECT THE QUOTE (OVE TO BE FALSE.	OR A	CT AGAINST ME SHOULD THIS D	ECLARATI	ION
	ne of bidder Signature		Position Date		
INdl	ic oi pidoci Signature	Г	Osition Date		
	te" means –	٠,	acquiscial logislature		
a) b)	any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999); any municipality or municipal entity;	c) d) e)		ces; or	

²"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.

6. 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 disqua	lified from the evaluation process.
(i) (ii)	The institution has determined that a compulsory site meeting Date/ Time: Place	N/A take place
Insti	tution 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
- 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;
 - 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;
- (j) "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

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5.	×н		11-1		4	ж.	ы п	IL J	n

- 5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:
- 6. B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1
- 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.

P			
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:		
	i) What percentage of the contract will be subcontracted% ii) The name of the sub-contractor		
8.	Whether the sub-contractor is an EME or QSE	(Tick applicable box)	

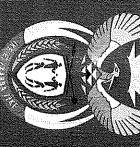
iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations, 2017:

Fleigleittiai Floculeitleit Regulations,2017.	EME	QSE
Designated Group: An EME or QSE which is at last 51% owned by:	EN/E	QOE
	. 1	٧
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		

3.	DECLA	RATION WITH	I REGARD TO COMPANY/FIRM		
9.1	Nam	e of company/f	irm:		
9.2	VAT	registration nu	mber:		
9.3	Com	pany registration	on number:		
9.4	TYP	E OF COMPAN	IY/ FIRM [TICK APPLICABLE BOX]		
	(•			
9.5	DES	CRIBE PRINC	IPAL BUSINESS ACTIVITIES		
9.6			IFICATION [TICK APPLICABLE BO	X]	
		Manufacture Supplier	er e		
		Professiona	I service provider		
	{	Other service	e providers, e.g. transporter, etc.		
9.7	Tota	l number of ye	ars the company/firm has been in bu	siness:	
9.8	the	B-BBE status le	ed, who is / are duly authorised to devel of contributor indicated in parag hown and I / we acknowledge that:	o so or raphs 1	behalf of the company/firm, certify that the points claimed, based on 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for
	i)	The information	on furnished is true and correct;		
	ii)	The preference	e points claimed are in accordance	with the	General Conditions as indicated in paragraph 1 of this form;
	iii)	In the event o	f a contract being awarded as a rest furnish documentary proof to the sa	ult of po tisfaction	oints claimed as shown in paragraphs 1.4 and 6.1, the contractor may on of the purchaser that the claims are correct;
	iv)	If the B-BBEE have not beer	status level of contributor has been fulfilled, the purchaser may, in addi	claime	d or obtained on a fraudulent basis or any of the conditions of contract any other remedy it may have –
	(a) disqualify	the person from the bidding process	;	
	(b) recover o	osts, losses or damages it has incurr	ed or s	uffered as a result of that person's conduct;
	(c) cancel the arrangem	e contract and claim any damages v ents due to such cancellation;	/hich it	has suffered as a result of having to make less favourable
	(who acted	d on a fraudulent basis, be restricted or a period not exceeding 10 years,	by the	olders and directors, or only the shareholders and directors National Treasury from obtaining business from any organ the audi alteram partem (hear the other side) rule has been
	1	e) forward th	ne matter for criminal prosecution.		
	W	TNESSES			
	1.	***************************************			SIGNATURE(S) OF BIDDERS(S)
					DATE:
	2.				ADDRESS
	1			1	***************************************

South African Department of Health National Tuberculosis Control Programme

Drug Resistant-IIB Register



Department:
Health
REPUBLIC OF SOUTH AFRICA

Province:

REGIMEN 1: NEW PATIENTS (RHZE) REGIMEN 2: RE-TREATMENT (RHZES) REGIMEN 3: PAEDIATRIC TB REGIMENS REGIMEN 4: M/XOR-TB PATIENTS CATEGORY II: RE-TREATMENT (RHZES)* CATEGORY III: EXTRAPULMONARY TB CATEGORY IV: M/XOR-TB PATIENTS CATEGORY IV: M/XOR-TB PATIENTS	CLASSIFICATION OF TUBERCULOSIS	TUBERCULOSIS
EFES (S):	SOUTH AFRICAN TB CONTROL	WORLD HEALTH ORGANIZATION
	REGIMEN 1: NEW PATIENTS (RHZE)	CATEGORY 1: NEW PATIENTS (PHZE)
	REGIMEN 2: RE-TREATMENT (RHZES)*	CATEGORY II: RE-TREATMENT (RHZES)"
	REGIMEN 3: PAEDIATRIC TB REGIMENS	CATEGORY III: EXTRAPULMONARY TB
	REGIMEN 4: M/XDR-TB PATIENTS	CATEGORY IV: M/XDR-TB PATIENTS

"REGINER 2 or CATEGORY if the been removed in South Africa although several individuals who received this regimen are still alike and to come with prother form of hospatolists hence if it inquistant to know this historical part of our 16 Control.

There are countries that are still making use or REGIMEN 2 or CATEGORY ITTB TREATNENT.

303 03 1	DEFINITION
A15.0	TB of lung, confirmed by sputain microscopy with or without culture
A15.1	18 of tung, conferred by stattare with
A15.2	TB of lung, castinged by histologically
A15.3	T8 of lung, confirmed unspecified means
A15.4	TB of inhathoracic lymph hades confirmed bacteriologically and histologically
A15.6	Tuberculous pleurisy, confirmed teateriologically and histologically
A16.0	TB of tursp, bacteriological and histologically negative
A16.1	TB of lung, bacteriological and fi-stollogical examination not done
A15.2	TB of fulls, without member of bacterological and histological confunation
A16.3	TB of intra-receasio lymph races, withour mention of bacteria-logical or histological continuation
A16.5	Tubertukous oleunisy, vileteut mention of bacteriological or histological continuorion
A16.7	Primary respitatory 16 without mention of bacteriological or histological confirmation
A17.0+	TB mediagitis (GC1)
A17.1+	Maningeal Jubercularia (607)
A18.0	TB of bones and joints
A18.1	18 of generalinary system
A18.2	Taberculeus peripheral lymphedenopatny
A18.3	TB of intestines, perifoneum and mesenleric glands
A18.4	TB of skin and subcutaneous lissue
A18.8	TB of other specified organs
A19.0	Acuse military TB of a single opeculied site
A19.1	Acute multary TB of multiple sites
A19.2	Agute millary TB. unspectfied
820.0	Human Ennulrogeticiency (HM) disease resulting in 16
P37.0	Compenial TE
J65	Silicoluberculosis
ž	Presumptioniosis associated with TB

DR-TB DEFINITIONS

a) Previous Drug History

- necurrence and east recommend they and special collected for resistance testing at the start of a calegory it explined Patients are placed in this Special charge for the processor for the Season before the continued. They should be considered and years the symbolic to a chargery for ingrince because InChar ED was better continued. The first observation and continued incent first province and continued continued continued and continued continued and continued continued continued continued continued continued and continued continued continued the continued con 1 = New (N): A palient who has not received antiliciterculosis medicines or who has received antiliciterculosis medicines or who has received antiliciterculosis medicines for who has received antiliciterculosis.
- z= Previously treated with first-line drugs only (PT1): A patent who has been based for the mask or more for B with first-line messions only.
- 4 = Unknown (UNK): A patient who has been treated for one more; or more for 18 but not known whether they received first line or second line 18 mediorinas.

b) Patient Calegory

- 2 = Relapse (R); A patient whose most report treatment outcome was "cared" or "treatment outspleted", autosequently adaptises with bode mologically positive IB by spallor smear microscopy, building or shed. and who is
- 4 = Treatment after failure of Category I (TF1); A pollent who has received Category I also known as regimen 1 for 18 and in when treatment hear failure. Failure is defined as sputom smear positive at love months or later during
- 5 = Treatment atter tailure of Calegory II (TF2): À patient who has sextileed Calegory 8 also known as estimen 2 far 18 and in whom treatment was taled. Fallure is oddined as spullars smear possive at seven moutos or faller during treatment.
- 6 = Other: There are several types of pages as you may you'll into any of the phone categories. Examples includes system smear positive pagents who ineventual registeral other than Category I or it (possibly in the private according to the than the provided several types and the category I or it (possibly in the private according to the priv

C) Patient Registration Type

- M = Mayed in. A potent who is diagnosed and registered for this episode of DR-TB in another facility within the same district and its moved to this (forcewing) harilly to continue finalment.
- T = Transferred in: A carion who is diagnosed and registered for this episorie of DR-TB in another facility outside this distinct and is transferred to this (receiving) facility to conduce treatment.
- S = Shared Case: A palient who is disprosed, inpisitional and solution on treatment but this episions of DH-TR state neather bacility but is being followed up at another bacility but. Such a palient will have a cories of appointments at noth racilities, it is therefore important that these are explused.

d) Definitions of resistant tuberculosis

Poly-resistance (P); Resistance to more than one antituberculosis medicines, other than toon boreazid and Ritangulain.

Ritampicin Resistance Tuberculosis (RB-TB): Resistance to Ritampicia celectos using phenalysic or genalypic methods, with or without cestance to other arti-TB medicines.

RR-TB: Registarios v. Altemplica: detical using prembytor or gerospio metrods, with or without resistance to other anti-18 medicines (as above).

PRE-XOR-TB: Pasocianos re Retemploiria, Isomazio, and exter an injectable or a fluoroquinolone

- 3 = Previously treated with second-time drugs (PT2); A palied who has been fleeked for one month a mode for 18 with one or none second-time medianes, with or without first-line medianes.

- New: A palest who has not isseed a hithosophos's nedicines or who has resivus arthobiquitos's medifines for last force month.
- 3 = Treatment after toss to toitow up (TAL); A pakers who returns to breatment following memopition of beatment for two or many consecutive membs.

- N = Newly registered: A polited who is stockholed and rejudened for this episode of DR-TB at this leading. This palled may be New Oit previously successfully headed for lithercubods (i.e. was bured or had completed treatment).

Mono resistant (M): Resistance to any one of the following first line antitudercates is medicines viz. H or Z or E

RR-TB includes 4 main entities: Which are <u>resistance to Rifampicin alone MOR-TB, pre-XDB-TB and XDR-TB.</u>

MDS-TB; Resistance to R. lampicia and isomazid with a without other autitude culoses drugs.

XDR_TB: Resistance to Ritampicin, Isoniazid, an injectable and a fluoroquinolone

e) Treatment Outcome Date

It is the date that the potient last test reservent at this rightly. For example, it the potient consulted this the reservent is would be the treatment and that it the patient shall treatment, consect, debutted or was trul to roll with, it would be the last shell have the patient had to amount at this facility.

f) TB culture conversion

13 culture comersion is said to have occurred when a patient cobeins two conspositive negative 16 culture results an spintum raken 20 days apart; the culture convencion, days is the coblection date of the first sportment that further 16 culture negative.

g) Treatment Outcome-DR-TB Long-Term Regimen

1 = Cored (C). A Catapory M satisful who has 16 cubine conversion with all lexit 3 regalitier 16 cubines daring the continuation prize (at least 30 days apart) who received a scall curation of realment not less than 18 months with no chrival ademixation.

- 2 = Treatment completed (TG): A Catopary IV patient who has had 18 culture conversion, with less than 3 consecutive negative cultures during the continuation phase (at least 30 days specificant receives a minimal duration of 18 morals treatment with no evidence of ofinical deterioration.
- 3 = Treatment after loss to follow up (TAL): A Calcipar). Wipation whose treatment was interrupted for two or more consecutive nunths for any reason. without medical approval.
- 4 = Treatment failure (TP): Textinest will be considered to these tailed it a Category if patient failed it (i) underly colline connection by month for in the or make of the like cultures recorded in the final 12 months or thesely affects the suit the satisfies of the condition is determined, (ii) Textinent will also be unspised or the like fail and a describe that the months of the months of termined beneficial received or to decay to be recorded in determine the adding more than 2 meeticals; because of pury clinical and/or redictory or provide events. These salivers can be indicated capability in order to dis sub-statistics.
- $\mathbf{5} = \mathbf{Died}$ (D): A Category M patient who area for any reason during the course of DR-TB treatment.
- 6 = Transferred out (TD); A creation IV policin who has been released from this failiby to a facility in shottlest district, province or creating to continue treatment and for engineering and for extensive treatment and for engineering and for extensive treatment and continue treatment.
- T = Noved out (NO): A coepory N palent who has been related from this facility or a tacility within the same district and for whom the treatment pulcation is not known.
- 8 = Still on treatment (ST): A Calegory Bypathert who remains on breathert और 78 encittes due to slew response to beathert. 9 = Not evaluated (NE): A Calegory বিনুষ্টোৰূল recorded in this register who does not have the necessary recorded data to enable electrically and consecuted by the relative collections of the relative collections are not the relative collections.

h) Treatment Outcome -DR-TB Short-Term Regimen

- 1 a Cured (C): A Catgory IV palled and has had 18 uilture conversion decined treatment for a tabled decision of 9 months or more, has at least 3 consective negative TP cubines suring continuation places (at least 30 days open) and there is no evidence of clinical deletionation.
- 2 = Treatment completed (TD): A Catagory IV satisfy who has read TB culture conversion, recensed treatment for 9 involves or more, has less than 3 consequence negative TB cultures curing confinantion interes and flower or usualized of chinical devilopation.
- 3 = Treatment after loss to follow up (TALL): A Calegary M patient whose treatment was interacted for two or none consecutive months for any reason without method spipowal.
- 4 = Treatment tailure (TF): Integrined will be considered to take tasked if (i) a Category IV parient failure (to undergo culture conversion by month 4. (ii) two or more of the direct conversion by month 4. (iii) two or more of the direct cultural confideration of the parient control of the cultural confideration of the parient control of the cultural confideration of the control of the cultural confideration of the cultural confideration of the cultural control of the cultural cul
- 5 = Died (D): A Category IV patient who dies from any cause during the course of DR-TB treatment.
- 6 = Transferred out (TO); A category fol political who had been defended from this facility for a facility in another district, province or country to continue treatment and for whom the forament outcome is not known.
- 7 = Moved out (MD): A category IV patient who has been reterrent from this facility to a facility within the same district and for whom the treatment outdome is not known.
- 6 ± Still on treatment (ST); A Caegory IV patient who remains on treatment after 11 months due to stow response to treatment
- 9 * Not evaluated (NE): A Calegory IV gatient recorded on this register who does not have the notestady recorded data to enable obsolition of ourcome into one of the above automic calegories.

SOUTH AFRICAN NATIONAL TUBERCULOSIS CONTROL PROGRAMME

DR-TB UNIT:

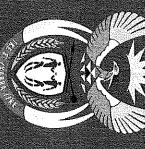
QUARTER:

YEAR:

		T			 	T									Hewly registered	in this t	acility	
														Men	red in from another lacil	ity within	the same district	
	-													Trai	nsterred from another fac	eitily out	side the district	
	1														Share	d care		
															NUMBER (###/yyyr)	TB REGISTRATION		
							A CONTRACTOR OF THE CONTRACTOR								FIRST NAME (S) (LONN SELEC)	11.11.11.11.11.11.11.11.11.11.11.11.11.	SURNAME (User speed	PATIENT INFORMATION
															DATE OF BIRTH (LONA'S SPACE) (Adistractypy)		ID NUMBER (Jopen space)	FORMATION
															AGE (Loner space)		GENDER (M/F) (Upaur space)	
		l	L_										I		PREVIOUS 1= N, 2= PT 1	0RUG I , 3= PT	HISTORY 2 , 4=UHX	
									••••						PATIENT 1 = New, 2 = 4 = TF1, 5	CATEG Relaps = TF2, I	ORY * e, 3 = TAL, B = Other	
															Pulmonary or I (P i	Extra Pe or EPTE	uteroeary TB I)	
															PREVIOUS TB REGISTRATION NUMBER OR DR-T6 REGISTRATION NUMBER FROM REFERRING UNIT (8 applicable) (Lamor space)		Referring facility (Ugger space)	REFERBING UNIT
							<u></u>		.1						resistant or Poly resistant TB ° (M or P)	Mann	(Tibko	
											****				Rifampicin Resistance (RR)	20	TYPE OF DR - TB (Ties are asturn teate MDR-TB or ADR-TB or Pe-XDR-TB)	
			-		 -	+		-	21. V	-					MDR-TB Contirmed	RR-TB	YPE OF DI	
-	+			-											MDA-TB Not Confirmed		R - 118 or XDR-18	
												_	 ļ		XDR TB		i ai Pre-XI	
													 _		Confirmed	хоя-тв	96- <i>1</i> 6)	
															Not Contirmed	œi		

																		Short	Regin	ien (1	ickj		TYPE OF REGIMEN		
		-																	 _	Long	Regin	en ()	ick)		
	:																			Result (Lower space)	(Upper sp.k.e.) (da/mm/upy)	Dale	Xperl		PRE-TRE
																				Result (Lower space)	(Upper space) (da/mm/yyy)	Date	Other		PRE-TREATMENT LABORATORY RESULTS
					•															Result (Lower space)	(Upper space) (divinatiyyyy)	Dale	Smear Microscopy		
																				Result (Lower space)	(Opper space)	Date	TB Culture		DR-T8 REFLEX TESTING
																				Result (Laser späce)	(dishumiyay)	Date	1º line LPA		X TESTING
																				Result	(odjanic)stan	Date	2 rd line LPA		
	<u>.</u> j		1	L			1		!							.1					Unk	STATUS	Ę		HIV INFORMATION
																					(odram/gusty)	ART Date Started			RMATION
					-	 -		-													POSII	IVE :	Tick)		R VOO
																	_		 		NEGA	TIVE (Tros)		COVID-19 TEST RESULTS
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		-			-	 _		-							-				 	 			n (<i>lick</i>) n (<i>lick</i>)		TYPE OF REGIMEN AT END OF TREATMENT
																				(DAM SAME)	OUTCOME		DATE dd/mm/yyy (Upper space)		TREATMENT OUTCOME
																							חבוואחואס	DEMARKS	

Each patient will have one final suitcome, either for short regimes or long regimes, not both.



Department:
Health
REPUBLIC OF SOUTH AFRICA