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## **KZN Health Intranet**

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KZN HEALTH

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AdvertQuote

| KWAZULU-NATAL PROVIN HEALTH REPUBLIC OF SOUTH AFRICA   | CE<br>Quotation Advert   |
|--|--|
| Opening Date:  | 2021-11-97 03  |
| Closing Date:  | 2021-11-05 / O   |
| Closing Time:  | 11:00  |
| INSTITUTION DETAILS  |  |
| institution Name:  | Dr Pixley ka Isaka Seme Memorial Hospital  |
| Province:  | KwaZulu-Natal  |
| Department or Entity:  | Department of Health   |
| Division or section:   | Central Supply Chain Management  |
| Place where goods / services is required   | DR PIXLEY KA ISAKA SEME MEMORIAL HOSPITAL  |
| Date Submitted   | 2021-11-02   |
| ITEM CATEGORY AND DETAILS  |  |
| Quotation Number:  | ZNQ: DPM / LLG   21-26   |
| Item Category:   | Goods  |
| Item Description:  | TENNIQOUTE RINGS   |
| Quantity (if supplies)   | 04 UNITS   |
| COMPULSORY BRIEFING SESSION  | / SITE VISIT   |
|  |  |
| Select Type:   |  |
| Select Type: Date :  | Not Applicable   |
| Date:  | Not Applicable   |
|  | Not Applicable   |
| Date : Time:   | Not Applicable   |
| Date : Time:   | Not Applicable   |
| Date : Time: Venue:  | Not Applicable  XZN HEALTH WEBSITE   |
| Date: Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO:  | Not Applicable  XZN HEALTH WEBSITE  310 JABU NDLOVU STREET, OLD BOYS MODEL PMB, QUOTATIONS TENDEL BOX/ EMAIL: quotations.scmho@kznhealth.gov.za  |
| Date : Time: Venue: QUOTES CAN BE COLLECTED FROM:  | Not Applicable  XZN HEALTH WEBSITE  310 JABU NDLOVU STREET, OLD BOYS MODEL PMB, QUOTATIONS TENDE BOX/ EMAIL: quotations.scmho@kznhealth.gov.za   |
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| Date: Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADV Name: Email: | Not Applicable  XZN HEALTH WEBSITE  310 JABU NOLOVU STREET, OLD BOYS MODEL PMB, QUOTATIONS TENDEL BOX/ EMAIL: quotations.scmho@kznhealth.gov.za  ZERT MAY BE DIRECTED TO:  zama/ siyabonga/ senzo/zinhle  zamampembe.dladla@kznhealth.gov.za |

|   |   | TANDARD QUOTE DOCUMENT   |   |  |  |  |  |                    |  |  |  |
|---|---|--|---|--|--|--|--|--------------------|--|--|--|
| DATE ADI                                      | VEDTIONS: 03/11   | D TO QUOTE FOR REQUIREMENTS A  |   | ::::::::::::::::::::::::::::::::::::::   | MAII . quotations.scmho@   | ⊉kznhealth.gov.za  |  | <br>               |  |  |  |
| ENUI IIBI                                     | S REGARDING   | THE QUOTE. ZAMAMPEMBE  |   | CONTACT NUMBER: 087.131.1783<br>CONTACT NUMBER: 087.131.1783                     |  |  |  |                    |  |  |  |
| ENQUIRIE                                      | S REGARDING   | TECHNICAL INFORMATION:   | CONTA   | CT NUMBER: 087.1   | 31 1783  |  |  |                    |  |  |  |
| PHYSICAL                                      | L ADDRESS: .DR  | PIXLEY KAISAKA SEME MEMO HOS   | PITAL,310 BHEJANE   | ROAD, GATE 3,  | KWAMASHU ,4360   |  | ******************   | <u></u>            |  |  |  |
| QUOTE N                                       | NUMBER: DPM   | 146/21-22  | LOSING DATE: 10/1   | 1/2021   | CLOSING  | TIME: 11:00  |  |                    |  |  |  |
| DESCRIP                                       |   | JTE RINGS  |   |  |  |  |  |                    |  |  |  |
|   | THEF  | OLLOWING PARTICULARS MUST BE F   | URNISHED (FAILURE   | TO DO SO MAY   | RESULT IN YOUR OFFER   | BEING DISQUALIFI   | ED)  |                    |  |  |  |
|   |   |  | NAME & ADDRESS  | OF BIDDER (FIR   | VI)  |  |  |                    |  |  |  |
| NAME OF                                       | BIDDER:   |  |   | DATE:  |  |  |  |                    |  |  |  |
| PHYSICA                                       | L ADDRESS:  |  |   | EMAIL ADDRES   | 3S:  |  |  |                    |  |  |  |
| CONTAC  | T NUMBER:   |  |   | FACSIMILE NU   | MBER:  |  |  |                    |  |  |  |
|   | RE OF BIDDER:   |  |   | SARS PIN:  |  |  |  |                    |  |  |  |
|   |   | hereby agree to all terms and conditions   | ]   | CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.: 1                              |  |  |  |                    |  |  |  |
| UNIQUE  | REGISTRATION I  | REFERENCE: L   |   |  | <del>                                     </del>   |  |  | <del></del>        |  |  |  |
|   |   |  |   |  |  |  |  |                    |  |  |  |
| oes this of                                   | fer comply with th  | e specification?   | ate delivery period   | l, e.g. <i>1day, 1week</i>   |  |  |  |                    |  |  |  |
| s the price I                                 |   |  | All   | delivery costs mu  | ist be included in the quote   | d price  |  |                    |  |  |  |
| Item<br>No                                    | Quantity  | Description  |   |  | Brand & model  | Country of manufacture   | Price<br>R   | С                  |  |  |  |
|   |   | SUPPLY AT  | ND DELIVER  |  |  |  |  | 1                  |  |  |  |
|   | 04UNITS   | TENNIQO  | UTE RINGS   |  |  |  |  | -                  |  |  |  |
|   |   |  |   |  |  |  |  |                    |  |  |  |
|   |   | attach relevent brouchu  | re for evaluation purpo   | osė.   |  |  |  | <del> </del>       |  |  |  |
|   |   | with current CSD summary re  | ······································  |  |  |  |  |                    |  |  |  |
|   |   |  | offer being disqualified  |  |  |  |  |                    |  |  |  |
|   |   |  |   |  |  |  |  |                    |  |  |  |
|   |   |  |   |  |  |  |  |                    |  |  |  |
|   |   |  |   |  |  |  |  |                    |  |  |  |
|   |   | % (Only if VAT Vendor)   |   |  |  |  | -  |                    |  |  |  |
|   |   | CE (VALIDITY PERIOD 60 Days)   |   |  | * 1 1 16   |  | the singular shattlest.  | o tho              |  |  |  |
| 1.1. The C<br>1.2. The E<br>incom<br>of price | Department is under mo<br>Department reserves the plate or where there a clear the plate of the pla | NDITIONS OF QUOTATIONS  o obligation to accept the lowest or any quote. he right to communicate in writing with vendors in a  are obscurities regarding technical aspects of the c  ms in cases where it is evident that a typing, write  he vendor's standing and ability to complete the st  Y THE DEPARTMENT ARE FINAL, INCLUDING | offer, to obtain confirmation<br>n, transfer or unit error has<br>upply/service satisfactorily. | plural and vice<br>neuter.  2.2 Under no circ<br>of the original<br>photocopies. | istent with or expressly indicated<br>e versa and with words importing<br>umstances whatsoever may the q<br>bid documentation may be used,<br>advised to check the number of p | the masculine gender sha<br>uotation/ bid forms be rely<br>but an original signature r | ll include the feminine a<br>rped or redrafted. Photo<br>nust appear on such | ind the<br>ecopies |  |  |  |

- 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.
- The bidder must ensure the correctness & validity of the quotation:
  (i) that the price(s), rate(s) & preference quoted cover all for the work/item (s) & accept that any (i) mistakes regarding the price (s) & calculations will be at the bidder's risk it is the responsibility of the bidder to confirm receipt of their quotation and to keep proof thereof.
- (ii) It is the responsibility of the board to confirm receipt or their quotation and to keep prior thereof. 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. This quotation will be evaluated based on the 80/20 points system, specification, correctness of information and/or functionality criteria. All required documentation must be completed in full and
- Offers must comply strictly with the specification.
- 1.9. Only offers that meet or are greater than the specification will be considered.
   1.10. Late offers will not be considered.
- 1.11. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six months.
- 1.12. Used/ second-hand products will not be accepted.
  1.13. A bidder not registered on the Central Suppliers Database or whose verification has failed will not be
- considered.

  1.14. All delivery costs must be included in the quoted price for delivery at the prescribed destination.

  1.15. 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.

  1.16. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 1.17. In the event of a bidder having multiple quotes, only the cheapest according to specification will be considered.
- 1.18. Verification will be conducted to identify if bidders have multiple companies and are cover-quoting for this
- 1.19. In such instances, the Department reserves the right to immediately disqualify such bidders as coverquoting is an offence that represents both corruption and acquisition fraud.
- SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS QUOTATION.

- duplations submitted must be complete in all respects; however, where it is identified that information in a bidder's response is incomplete in any respect, the said supplier meets all specification requirements and is lowest to quote, the Department reserves the right to request the bidder to complete/submit such information.
- Any alteration made by the bidder must be initialled. Failure to do so may render the response invalid.
- Use of correction fluid is prohibited and may render the response invalid.

  Quotations will be opened in public as soon as practicable after the closing time of quotation.

- 2.0 Where practical, prices are made public at the time of opening quotations.

  2.1 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.

  2.10 The Department is under no obligation to pay suppliers in part for work done if the supplier can no longer
- SPECIAL INSTRUCTIONS REGARDING HAND-DELIVERED QUOTATIONS

fulfit their obligation

- Quotations shall be lodged at the address indicated no later than the closing time specified for their receipt and in accordance with the directives in the quotation documents.

  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.
- 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.

  A specific box is provided for the receipt of quotations, and no quotation found in any other box or
- A specific box is provided for the receipt of quotations, and no quotation will be considered elsewhere subsequent to the closing date and time of quotation will be considered. 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
- 3.6 rejected as being invalid.

## health R SPECIFICATION FORM Department: Health PROVINCE OF KWAZULU-NATAL **Quote Number:** Item Description: **Tenniqout Ring** Department/Section: **Operating Theatre Complex** Purpose of Item: Positioning device-anaesthetics Pre-qualification criteria if any: 1.1. Is the item required to have a regulatory body certification (e.g. SABS, SANS, SANAS, ISO, CIDB, etc.)? Yes / No. Regulatory Body / certification required if Yes: 1.2. Is a compulsory site inspection / briefing session required? Yes / Mo if Yes, specify: Date \_\_\_\_\_\_ Time \_\_\_\_ Place \_\_\_\_\_ 1.3. Is local production and content part of the quote? Yes / Mo if Yes, specify: 1.4. Provisions of section 4(1)(a) of the PPPFA Regulations, 2017 if applicable? Yes / No. if Yes, specify: 1.5. Liability Cover insurance? Yes / No if Yes, specify: What is the specification of the required item? List specifications to be advertised Comment Any colour Circular rubber ring 2, 3. 4. Does a sample need to be submitted? Yes / No(select option 3.1 or 3.2) 3.1. Deadline for submission if Yes: Date // // Time Place 3.2. Specify that samples must be made available when requested in writing. Yes or No l Penalties to be noted by the suppliers: 4.1. 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. What is the evaluation criteria / special terms and conditions to be advertised? list evaluation criteria / special terms and conditions to be advertised (if applicable) Pre-qualification criteria | Does the offer meet the pre-qualification criteria? Administrative Does the offer comply to stipulated administrative requirements? Conformance: Was the product made or service performed to specifications? Will/does the product/service fulfil its performance obligation, in a manner that releases the Performance: supplier from all liabilities under the contract? Features: What characteristics does the product or service have? How long can a product go between failures and the need for maintenance? (guarantee) Reliability: What is the useful life for the product? How will the product hold up under extended use? Durability: How easy is it to repair, maintain or support the product or service? (customer support) Serviceability: Ability & Capacity The ability and capacity of the vendor to execute the contract

| ame of End-user (in full) | Ms Y. Mhangzi" | Name of SCM Rep (in full)   | BIYA MROW  |
|---------------------------|----------------|-----------------------------|------------|
|                           | AMN: Theate    | Designation/ Rank (in full) | STAMP      |
| ignature<br>ate           | 16.08. 2021    | Signature                   | (A)        |
| ndard End Hans Charle     | JAC .          | Date                        | 1/1/09/204 |

Preferential Procurement System (80/20) if applicable

Preference points

Picture for Illustration

## **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.      | ln   | order to give e  | ffect to the                       | above, t               | he follo              | wing q              | uestionn                 | aire must t                | ое сог         | npleted a                             | ind submitte               | ed with the q      | uote.         |          |              |               |
| 2       | 2.   | Full name of the Identity Number Position occupants of the Identity Number 1 (Identity Number 1) Full name of the Identity Number 1 (Identity Number 1) Identity Number 1 (Identity Numb | er:<br>cupied in                   |                        |                       |                     |                          | trustee,                   | 2.4.<br>2.5.   | Compan<br>Tax Refe                    | y Registrati<br>erence Num | on Number:<br>ber: |               |          | ,,,,,,       |               |
| 2       | .7.  | The names or employee / pe   | f all director<br>ersal numbe      | s / truste<br>ers must | ees / sł<br>be indi   | narehol<br>cated in | ders / me<br>n paragra   | embers, th                 | eir inc        |                                       |                            |                    |               | umbe     |              | applicable,   |
| 2       | .8.  | Are you or an  | y person co                        | nnected                | l with th             | ne bidde            | er preser                | itly employ                | ed by          | the state                             | ∍?                         |                    |               |          | YES          | NO            |
| 2       | 8.1  | If so, furnish t<br>Name of perso  | he following                       | particu                | lars:                 | ahaldar             | ·/ mamba                 |                            |                |                                       |                            |                    |               |          |              |               |
|         |  | Name of person<br>Name of  |                                    |                        |                       |                     | / membe<br>which         | you                        | or             | the                                   | person                     | connecte           | d to          |          | the bid      | lder is       |
|         |  | employed:  |                                    |                        |                       |                     |                          | ,                          |                |                                       | •                          |                    |               |          |              |               |
|         |  | Position   | occupied                           | İ                      | in                    | the                 | Si                       | tate                       | insti          | ution:                                |                            |                    |               |          | Any          | other         |
|         |  | particulars:<br>; If you are p   | a                                  |                        |                       | المستنانية          | <br>!alaah               | tain the or                |                | iota auth                             | arity to und               | ortoko romu        | norativo      | work     | outeida ar   | nnlovment     |
| 2       | 8.2  | t, if you are p<br>in the public   |                                    | ipioyea i              | by the s              | state, u            | ia you on                | ıtanı tne ap               | ppropr         | iale auui                             | only to und                | eriave ienin       | HEIGHIVE      | WOIN     | YES          | NO            |
| 2       | 8.2  | .1. If ves, did  | you attach                         | proof of               | such a                | uthority            | y to the q               | uote docu                  | ment?          | )                                     |                            |                    |               |          | ILO          | 1101          |
| (Not    | $\rho \cdot f$   | ailure to subm   | it proof of s                      | uch autl               | hority, v             | vhere a             | pplicable                | e, may resu                | ult in t       | he disqua                             | alification of             | the quote.)        |               |          |              |               |
| 2       | 8.2  | .2. If no, furn  | ish reasons                        | for non                | -submi:               | ssion o             | f such pr                | oof:                       |                |                                       | /                          |                    |               | aand     | ant busins   | ac with the   |
| 2       | .9.  | Did you or yo<br>state in the pr   | ur spouse,<br>ovious two!          | or any o               | ir the co<br>he?      | ompany              | rs airect                | ors / truste               | es/s           | narenolu                              | ers / memor                | ers or mem s       | phonees       | CONC     | YES          | NO NO         |
| 2       | 9.1  | If so, furnisi   | n narticulars                      | 3:                     |                       |                     |                          |                            |                |                                       |                            |                    |               |          |              |               |
| 2       | .10.   | Do vou, or ar  | ny person d                        | connecte               | d with                | the bid             | der, hav                 | e any rela                 | tionsh         | ip (family                            | y, friend, otl             | ner) with a p      | erson e       | mplo     | yed by the   | state and     |
| _       |  | who may be i   | nvolved wit                        | h the ev               | aluatior              | n and o             | r adjudic                | ation of thi               | s quo          | e?                                    |                            |                    |               |          | YES          | NO            |
| 2       | .10.   | 1. If so, furnisl<br>. Are you, or a   | n particulars                      | connact                | ind with              | the hi              | idder av                 | ware of an                 | v rela         | tionshin                              | (family frie               | <br>nd other) h    | etween .      | anv c    | other bidde  | er and anv    |
| 2       | . 1 1 .  | person emplo   | ved by the                         | state wh               | no may                | be invo             | lved with                | the evalu                  | ation          | and or ac                             | judication o               | of this quote      | ?             | ,        | YES          | NO            |
| 2       | .11.   | 1 If so furnish  | narticular                         | s:                     |                       |                     |                          |                            |                |                                       |                            |                    |               |          | L            |               |
| 2       | .12.   | Do you or ar   |                                    |                        |                       |                     |                          | rs / meml                  | oers c         | f the cor                             | mpany have                 | any intere         | st in any     | / othe   | er related o | NO NO         |
| 2       | 12   | whether or no<br>1. If so, furnish   | ot they are t                      | olaaing ti             | or this c             | contrac             | l?                       |                            |                |                                       |                            |                    |               |          | IEO          | INO           |
| _       |  |  |                                    |                        |                       |                     |                          |                            |                | **********                            |                            |                    |               |          |              |               |
|         | 3. Full details of directors / trustees / members / shareholders.  NB: The Department Of Health will validate details of directors / trustees / members / shareholders on CSD. It is the suppliers' responsibility to ensure that their details are up-to-date and verified on CSD. If the Department cannot validate the information on CSD, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17. |  |                                    |                        |                       |                     |                          |                            |                |                                       |                            |                    |               |          |              |               |
| 4       |  | DECLARA  |                                    |                        |                       |                     |                          |                            |                |                                       |                            |                    |               |          |              |               |
| I,<br>F | TI<br>UF   | HE UNDERS<br>RNISHED IN  | IGNED (1<br>PARAGE                 | NAME)<br>RAPHS         | 2.                    |                     | •••••                    |                            |                |                                       |                            | .CERTIFY           | THAT          | 'THI     | E INFORI     | MATION        |
|         |  | CCEPT THA<br>OVE TO BE I   |                                    | ATE M                  | AY R                  | EJECT               | THEC                     | OTE C                      | R A            | CT AGA                                | AINST ME                   | SHOULD             | THIS I        | DECI     | LARATIC      | N             |
|         |  | e of bidder  |                                    |                        | Signa                 |                     |                          |                            |                | Positio                               |                            | ***************    |               | Date     | e            | 1414194444444 |
| a<br>b  | )  | te" means –<br>any national or<br>constitutional In<br>Act, 1999 (Act N<br>any municipality  | stitution within<br>o. 1 of 1999); | the mean               | national<br>ing of th | or prov<br>e Public | incial publ<br>Finance M | ic entity or<br>lanagement | c)<br>d)<br>e) | provincial<br>national A<br>Parliamer |                            | e national Cour    | icil of provi | inces; ( | or           |               |

<sup>2\*</sup> 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