SharePoint

Dlamini Nomfundo 🕶 ᅟ 😤



KZN Health Intranet KZN HEALTH

Search this site	0	
	′ 1	

HOME CORPORATE INFORMATION

COMPONENTS DIRECTORY DISTRICT OFFICES HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

AdvertQuote

KWAZULU-NATAL PROVID	The second of
HEALTH REPUBLIC OF SOUTH AFRICA	Quotation Advert
Opening Date:	2021-10-01
Closing Date:	2021-10-12
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Hlabisa hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	HLABISA HOSPITAL
Date Submitted	2021-10-01
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: HLB: 242-21/22
Item Category:	Services
Item Description:	MAJOR SERVICE FOR INFARRED DETECTION: HOSPITAL AND CLINICS
Quantity (if supplies)	
COMPULSORY BRIEFING SESSION	SITE VISIT
Select Type:	Not Applicable
Date :	Promote St. 19
Time:	
Venue:	
	· · · · · · · · · · · · · · · · · · ·
QUOTES CAN BE COLLECTED FROM:	60 SAUNDERS STREET, HLABISA HOSPITAL SCM PARKHOME
QUOTES SHOULD BE DELIVERED TO:	60 SAUNDERS STREET, HLABISA HOSPITAL MAINGATE TENDERBOX
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:
Name:	DLAMINI N.L
Email:	hlabisa.quotations@gmail.com
Contact Number:	,035 838 0033

Finance Manager Name:

Finance Manager Signature:

No late quotes will be considered

															po.
c	STANDARD QUO	TE DOCUMEN	TATION S	VIDUL	CHAIN	I BALA NI A	\ C E M E	ENIT O	WED	5 20 000	00 2	A L	\mathcal{C}	3)	RIVATE BAG X5001 HLABISA 3937 WEZEMPILO KWAZULU NATAI
YOU ARE HEREBY IN									VER	K30 000	V Y T	0 Z			
DATE ADVERTISED:										CLO	SIN 6	DINE:	11:08	_ 	X5001 937 KWAZ
FACSIMILE NUMBER:	035 838 19	59	E-MAIL	ADDRE	ESS:	labis	a.qu	otati	ons	@gma	ail 💆	TIES.	70))	393; 393; N
PHYSICAL ADDRESS:											ة با	STRI OTATO			E BA
LU D.	040 04/00										NIE	<u>2,59</u>		·)	PRIVAT HLA
ZNQ NUMBER: HLB:											PARI	BIS			
DESCRIPTION: MAJO						ETE	CTIC	DN.		,,,,,,,,,,	0	\$.5			N X
CONTRACT PERIOD	NCE OFF (if applicable)	VALID	ITY PERIO	DD 60 D	ays		SAF	RS PII	N			a b		*********	UMNYANGO
CENTRAL SUPPLIER DA	ATABASE REGIS	TRATION (CSI) NO.												
UNIQUE REGISTRATION	NREFERENCE		-											.,	
DEPOSITED IN THE QUO	OTE BOX SITUA?	TED AT (STRE	ET ADDRE	ESS)											
60 SAUNDERS	STREET,	HLABIS	A HOS	SPITA	۹L,	MAII	NGA	TE	IN	THE	TE	NDE	RBO	XC	
Bidders should ensure	that quotes are	dalivared tim	oouely to	the ee	eroot i	ddroo	. 16 41.	0.000	oto io	Into it	uill	not ho		tad f	0 r
consideration.	that quotes are	denvered tim	eousiy to	the co	11661	iuuies), II (II	e que	JIE 15	iale, il	WIII	not be	accep	neu i	OI .
The quote box is open fro	m 08:00 to 15:30.														
ALL QUOTES MUST BE	SUBMITTED ON	THE OFFICIAL	FORMS -	- (NOT 1	TO BE	RE-TYI	PED)								
THIS QUOTE IS SUBJ PROCUREMENT REGUL CONDITIONS OF CONTE	ATIONS, 2011, T														
		HE FOLLOWIN													7
	(FAILURE T	O DO SO WIL	L RESULT	'IN YOU	JR QU	OTE BE	ING D	ISQU	ALIFI	ED)					
NAME OF BIDDER							,	*******	•••••					•••••	
POSTAL ADDRESS	***************************************				••••••	********								,,,,,,,	
STREET ADDRESS	******************			*******											
TELEPHONE NUMBER	CODENU	MBER		FAC	SIMILE	NUME	BER	CODE	Ξ	,NUME	BER				
CELLPHONE NUMBER	***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	e>>tee+>>>tt>tt				•••••								
E-MAIL ADDRESS								,	,		•••••				
VAT REGISTRATION NU	MBER (If VAT ver	ndor)	*************										,,,,,,,,	• • • • • • • • • • • • • • • • • • • •	
HAS A B-BBEE STATUS	LEVEL VERIFICA	TION CERTIFI	CATE BE	EN SUB	MITTE	D? (SB	D 6.1)					YES		VO	

[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]

HLB: 242-21/22

OFFICIAL PRICE PAGE FOR QUOTATIONS	ZNQ NUMBER:
DESCRIPTION: MAJOR SERVICE FOR INFRARRED DE	ETECTION
SIGNATURE OF BIDDER [By signing this document I hereby agree to all terms and conditions]	DATE
CAPACITY UNDER WHICH THIS QUOTE IS SIGNED	

Item No	Quantity	Description	Brand &	Country of	Price	
		-	model	manufacture	R	
		MAJOR SERVICE FOR INFRARRED DETECTION				
	120	HLABISA HOSPITAL				
	06	MAKHOWE CLINIC				
	06	INHLWATH! CLINIC				
	06	GUNJANENI CLINIC				
	05	MACHIBINI CLINIC				
	08	SIPHO ZUNGU CLINIC				
	14	KWAMSANE CLINIC				
	04	MTUBA FIXED CLINIC				
	04	GATEWAY CLINIC				
	04	MPUKUNYONI CLINIC				
	04	SOMKHELE CLINIC				
	04	NTONDWENI CLINIC				\Box
	06	NKUNDUSI CLINIC				T
	05	EZWENELISHA CLINIC				\Box
	02	MPEMBENI CLINIC				
	04	MACABUZELA CLINIC				
	07	MADWALENI CLINIC				
						_
		SPECIFICATION ATTACHED				
**************************************		LIST ATTACHED				<u> </u>
		QUOTATION DOCUMENT CAN BE EMAILED OR FAXED	· · · · · · · · · · · · · · · · · · ·			+
		AT YOUR OWN RISK DUE TO NETWORK CHALLENGE				-
/ALUE AD	L DED TAX ന	15% (Only if VAT Vendor)	<u>. </u>	1		+

Does This Offer Comply With The Specification?	Does The Article Conform To The S.A.N.S. / S.A.B.S. Specification?	
Is The Price Firm?	State Delivery Period E.G. E.G. 1day, 1week	

10 1110 11100 1 111111	Otato Donve	7 1 01100 E.O. E.O. 1007, 111	OON	1
	*****	***************************************		
Enquiries regarding the guote may be directed to:	***			

Contact Person: DLAMINI.N.L.....Tel: 035.8380033 E-Mail Address: hlabisa.quotations@gmail.com

Enquiries regarding technical information may be directed to: Contact Person: SHABALALA S. Tel: 0358380009



MAINTENANCE DEPARTMENT

Physical Address: 60 saunder street, hlabisa, 3739 Postal Address: P/Bag x 5001, hlabisa

Tel035 838 8808. Fax035 838 1117 Email: sizani shabalala@kznhealth gov za

Enquiries: Ms S.R Shabalala

EXT No.: 8808

Section: Maintenance

MAJOR SERVICE FOR INFRARRED DETECTION

- 1. Minimum requirement
- > Service provider must have valid CIDB EB/EP contractor
- > Service provider must have registered with central supplier data base.
- > Service provider must attached letter of good standing.
- > Service provider to report at Maintenance and complete relevant register for payment purposes.
- > Duties must be available on the CSD (industry classification information)

2. Documents required when after service is done:

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-finalized project.

- > Report of the service as per unit and institution
- > Signed and stamp scheduler
- Signed job cards by maintenance officer
- > Original Tax Invoice
- > After service report and quote (ZNB form) together

SCOPE OF WORK

- > Service the attached list of distribution board as per scope given
- > Write and color the pictures report shall be submitted to the project manager
- > The report shall be in book form and be color picture with recommendation as required
- > Submit report with your equipment calibration test certificate attached to the report
- > Each institution shall be quoted page given and the total shall be carry over

Signature:	Date: 30/08/203/
V	

MAINTENANCE DEPARTMENT

sical Address: 60 saunder street, hiabisa, 3739 Ital Address: P/Bag x 5001, hiabisa 035 838 8808: Fax035 838 1117 Email: erran shabatata@franneath.sov.za

INFRARRED DETECTION LIST MADWALENI CLINIC

NO	LOCATION	QUANTITY
1	MAIN CLINIC	01
2	NURSES HOME 1&2	02
3	GUARD ROOM	01
4	KIOSK	01
5	PARK HOME	02
,		
	5.	

nysical Address, 60 saunder street, Irlabisa, 3739 ostal Address, P/Bag x 5001, Irlabisa el035 838 8808, Fax035 838 1117 Email

MAINTENANCE DEPARTMENT

INFRARRED DETECTION LIST MACABUZELA CLINIC

NO	LOCATION	QUANTITY	-
1	MAIN CLINIC	01	
2	NURSES HOME 1&2	02	
3	KIOSK	01	

Physical Address 60 saunder street, hlabisa, 3739 Postal Address P/Bag x 5001, hlabisa Fel035 838 8808: Fax035 838 1117 Email: 15 15 15 15 15 15 15 15 15 15 15

MAINTENANCE DEPARTMENT

INFRARRED DETECTION LIST MPEMBENI CLINIC

NO	LOCATION	QUANTITY
1	MAIN CLINIC	01
2	PARKHOME	01
3		
	*	

MAINTENANCE DEPARTMENT

Physical Address, 60 saunder street, blabisa, 3739 Postal Address: P/Bag x 5001, hlabisa Tel035 838 8808: Fax035 838 1117 Email: sizani shabalala@kzubsalth.gov.za

INFRARRED DETECTION LIST ZWENELISHA CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01	
2	KIOSK	01	
3	STORE ROOM	01	
4	PARKHOME	01	
5	KIOSK NO2	01	

Physical Address: 60 saunder street, hlabisa, 3739 Postal Address: P/Bag x 5001, hlabisa Tel035 838 8808: Fax035 838 1117 Email: 80 ani shabalala@lzrhealb.cov.za

MAINTENANCE DEPARTMENT

INFRARRED DETECTION LIST NKUNDUSI CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01	
2	PARKHOME	01	
3	NURSES HOME 1 & 2	02	
4	SECURITY GUARD HOSE	01	
5	KIOSK	01	
	\$		



nysical Address. 60 saunder street, filabisa, 3739 ostal Address. P/Bag x 5001, filabisa al035 838 8808. Fax035 838 1417 Email: sp. pj. fiabjalata@kanhoaith 20v £a MAINTENANCE DEPARTMENT

INFRARRED DETECTION LIST NTONDWENI CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01	
2	NURSES HOME 1, 2 & 3	03	
	\$		
	1		



MAINTENANCE DEPARTMENT

vsical Address: 60 saunder street, hlabisa, 3739 stal Address: P/Bag x 5001, hlabisa 085 838 8808: Fax065 838 1117 Email: sizan, shabatala @kinhealth.gov.za

INFRARRED DETECTION LIST SOMKHELE CLINIC

LOCATION	QUANTITY
	01
	01
MATERNITY	01
KIOSK	01
	LOCATION MAIN CLINIC FILE ROOM MATERNITY KIOSK



Physical Address 60 saunder street, hlabisa, 3739 Postal Address P/Bag x 5001, hlabisa Tel035 838 8808 Fax035 838 11117 Email, sizani shabalata@kznhealth.gov.za

MAINTENANCE DEPARTMENT

INFRARRED DETECTION LIST MPUKUNYONI CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01.	
2	PARKHOME	01	
3	NURSES HOME 1	01	
4	STORE ROOM	01	
	8		
	,		

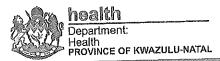


MAINTENANCE DEPAREMENT

ysical Address 60 saunder street, hlabisa, 3739 stal Address: P/Bag x 5001, hlabisa 035 838 8808: Fax035 838 1117 Email: sizani.shabalala@kznheaith.gov.za

INFRARRED DETECTION LIST GATEWAY CLINIC

NO	LOCATION	QUANTITY
1	MAIN CLINIC	01
2	PARKHOME 1	01
3	GUARD HOUSE	01
4	KIOSK	01
-r		
	6.	



MAINTENANCE DEPARTMENT

sical Address, 60 saunder street, hlabisa, 3739 tal Address: P/Bag x 5001, hlabisa)35 838 8808, Fax035-838 1117 Email: sizani shabalatatakzinhealth qov za

INFRARRED DETECTION LIST MTUBAMTUBA CLINIC

NO	LOCATION	QUANTITY
1	MAIN CLINIC1	01
<u>, </u>	MAIN CLINIC 2	01
3	PARKHOME1, 2, 3 & 4	01
4	GUARD ROOM	01

MAINTENANCE DEPARTMENT

sical Address: 60 saunder street, hiabisa, 3739 tal Address: P/Bag x 5001, hiabisa)35.838.8808: Fax035.838.1117 Email: sizani shabalala@kzahealih.dov.za

INFRARRED DETECTION LIST MSANE CLINIC

NO	LOCATION	QUANTITY
1	MAIN CLINIC	01
2	KIOSK	01
3	PARK HOME1	01
4	PARK HOME2	01
5	PARK HOME3	01
6	PARK HOME4	01
7	PARK HOME5	01
8	PARK HOME6	01
9	PARK HOME 7 %	01
10	PARK HOME8	01
11	PARK HOME9	01
12	PARK HOME10	01
13	MAIN SUPPLY FOR PARKHOMES	01
14	WASTE CONTAINER	01



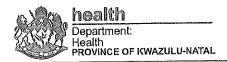
MAINTENANCE DEPARTMENT

nysical Address: 60 saunder street, hlabisa, 3739

ostal Address: P/Bag x 5001 hlabisa 51035 838 8808: Fax035 838 111/7 Eimeill sizani shabalala@kznheath dov za

INFRARRED DETECTION LIST SIPHO ZUNGU CLINIC

NO	LOCATION	QUANTITY
1	MAIN CLINIC	01
2	NURSES HOME 1, 2, 3, 4 & 5	05
3	KIOSK	01
4	GUARD HOUSE	01
	\$	



MAINTENANCE DEPARTMENT

/sical Address: 60 saunder street, hlabisa, 3739 stal Address. P/Bag x 5001, hlabisa 035 838 8808, Fax035 838 1117 Email: stzat, shabalata@kznheaith gov za

INFRARRED DETECTION LIST MACHIBINI CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01	
2	PARKHOME 1, 2 &3	03	
3	GUARD HOUSE	01	
	8		

nysical Address 60 saunder street, hlabisa, 3739 ostal Address: P/Bag x 5001, hlabisa ajo35 838 8808: Fax035 838 1117 Emaik sizem s rabelala oʻk mheaith gov za MAINTENANCE DEPARTMENT

INFRARRED DETECTION LIST GUNJANENI CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01	
2	PARKHOME	01	
3	NURSES HOME 1, 2 & 3	03	
4	KIOSK	01	
	&		

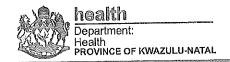


MAINTENANCE DEPARTMENT

Physical Address: 60 saunder street, hlabisa, 3739 Postal Address: P/Bag x 5001, hlabisa Tel035 838 8808. Fax035 838 1117 Email: sizani shabalala@kznhealth.qov za

INFRARRED DETECTION LIST NHLWATHI CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01	
2	NURSES HOME 1,2 & 3	03	
3	GUARD HOUSE	01	
***	KIOSK	01	
	3		
	3		



MAINTENANCE DEPARTMENT

Physical Address, 60 saunder street, hlabisa, 3739 Postal Address: P/Bag x 5001, hlabisa Tel035 838 8808. Fax035 838 1117 Email: sizani shabalala@kznhealth.gov.za

INFRARRED DETECTION LIST MAKHOWE CLINIC

NO	LOCATION	QUANTITY	
1	MAIN CLINIC	01	
2	NURSES HOME 1&2	02	
3	GUARD ROOM	01	
4	KIOSK	01	
5	PARK HOME	01	



nysical Address. 60 saunder street, hlabisa, 3739 ostal Address. P/Bag x 5001, hlabisa 3035 838 8808. Fax035 838 1117 Email: stant shabalala@kznheath.gov.za

MAINTENANCE DEPARTMENT

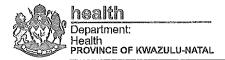
Enquiries: Ms S.R Shabalala

EXT No.: 8808

Section: Maintenance

INFRARRED DETECTION

NO	DEPARTMENT	LOCATION
1	PLANT ROOMS	Substation (generator plant)
2	PLAINT ROOIVIS	Mini-substation (next to medical gas
2		plant)
3		Medical gas plant
4		Theatre central air condition plant
5		Maternity1 central air condition plant
6		Maternity 2 central air condition plant
7		TB ward central air condition plant
8		H ward central air condition plant
9		B ward central air condition plant
10		C ward central air condition plant
11	6	CSD central air condition plant
12		ICU central air condition plant
13		Pump house plant
14		H ward hot water plant
15		C ward hot water plant
16		Laundry hot water plant
17		Nurses home hot water plant
18	**	Kitchen cold room plant
19	Kiosk	Kiosk next lab1
20		Kiosk next gen plant
21		Kiosk next to main kitchen
22		Kiosk next to nurses home
23		Kiosk next to old Mr. Ntombela flat
24		Kiosk next to lab2
25		Kiosk next recreation hall
26		Kiosk next to red buildings
27		Kiosk next to Mr. Withembu office
28		Kiosk next to Mortel house (back)
29		Kiosk next doctors resident
30		Kiosk next to mortel (front)



MAINTENANCE DEPARTMENT

ical Address: 60 saunder street, hlabisa, 3739 al Address: P/Bag x 5001, hilabisa 35 838 8808: Fax035 838 1117 Email: sizani shabalala@kontiealth.gov.za

INFRARRED DETECTION LIST

31	DISTRIBUTION BOARD WARDS	H ward
32		C ward
33		C ward
34		C ward
35		Maternity1
35		Maternity2
36		B ward
37		S ward
38		TB ward
39		Theatre1
40	4,	Theatre2
41		Theatre3
42		Theatre main
43	DISTRIBUTION BOARD DEPARTMENTS	Mortuary
44		Main kitchen1
45		Main kitchen2
46		Main kitchen 3
47		Laundry1
48		Laundry2
47		Laboratory1
49		Laboratory2
50		Pharmacy
51		Physio therapy
52		New admin block
53	• 4	Old admin block
54		Maintenance workshop
55		Main gate/ guard house
56		SCM logistic
57	DISTRIBUTION BOARD PARK HOMES	SCM acquisition parkhome
58		Philanjalo park home
59		Eye clinic park home
60		Social worker park home
61		Wellness centre parkhome
62		Loger mother paekhome1
63		Loger mother parkhome2
64		Resident parkhome lab
65		Resident parkhome no1
66		Resident parkhome no2
66		Resident parkhome no2

MAINTENANCE DEPARTMENT

cal Address: 60 saunder street, hilabisa, 3739 I Address: P/Bag x 5001, hilabisa 5 838 8808: Fax035 838 1117 Email: State shabalate Oktobe alth doctor

INFRARRED DETECTION LIST

67	DISTRIBUTION BOARD N/ HOME	Reception
68		Recreation hall
69		C1
70		C2
71		D1
72		D2
73		ВВ
74		81
75		B2
76		D
77		D1
78	DISTRIBUTION BOARD DOCTORS	B101-1
79		B101-2
80		B101-3
81		B101-4
82		B101-5
83		B101-6
84		B101-7
85		B101-8
86		B102-1
87		8102-2
88		B102-3
89		8102-4
90		B102-5
91		B102-6
92		B102-7
93		B102-8
94		B104-1
95		B104-2
96		B105-1
97		B105-2
98		B106-1
99		B106-2
100		B107-1
101		B107-2
101		B108-1
102		

MAINTENANCE DEPARTMENT

sical Address. 60 saunder street, hlabisa, 3739 tal Address. P/Bag x 5001, hlabisa)35.838.8808: Fax035.838.1117 Email: https://doi.org/10.1007/280

INFRARRED DETECTION LIST

NO	DESCRIPTION	LOCATION
103	HOUSEKEEPING	Standby building
104		Old office housekeeper
105		Mudenda resident
106		Mzobes resident
107		Old Dlamini residence
108		Female transit
109		Male transit
110		Adams house
111		Motel house
112	***	Blue house
113		Vanilla house
114		Red house1
115		Red house2
116		Red house3
117		Red house4
118		Paradise resident
119		Rogger resident
120	COLLAGE	Nurses collage
	• 4	
, ,		

DECLARATION OF INTEREST

	Any legal person, including persons employed by the state ¹ , or pers blood relationship, may make an offer or offers in terms of this invital limited quote or proposal). In view of possible allegations of favouriti employed by the state, or to persons connected with or related to the declare his/her position in relation to the evaluating/adjudicating authorithe bidder is employed by the state; and/or the legal person on whose behalf the bidding document is signed evaluation and or adjudication of the quote(s), or where it is known on whose behalf the declarant acts and persons who are involved	ion to quote (includes a price quotat sm, should the resulting quote, or pa nem, it is required that the bidder or prity where- d, has a relationship with persons/a m that such a relationship exists bet	art thereof, be awarded to persons his/her authorised representative person who are/is involved in the ween the person or persons for or
2.	In order to give effect to the above, the following questionnaire must	be completed and submitted with the	g quote.
2.1. 2.2. 2.3.	Identity Number: 2	Company Registration Number: Tax Reference Number: VAT Registration Number:	***************************************
2.8.	The names of all directors / trustees / shareholders / members, thei employee / persal numbers must be indicated in paragraph 3 below. Are you or any person connected with the bidder presently employe 1. If so, furnish the following particulars: Name of person / director / trustee / shareholder/ member:	d by the state?	YES NO
	Position occupied in the state institution: If you are presently employed by the state, did you obtain the app in the public sector? If yes, did you attach proof of such authority to the quote docum	ropriate authority to undertake remu	nerative work outside employment YES NO
(Note: I	Failure to submit proof of such authority, where applicable, may result	in the disqualification of the <u>quote.)</u>	
	2.2. If no, furnish reasons for non-submission of such proof Did you or your spouse, or any of the company's directors / trustees state in the previous twelve months? 1. If so, furnish particulars:	s / shareholders / members or their s	spouses conduct business with the YES NO
2.10	Do you, or any person connected with the bidder, have any relations may be involved with the evaluation and or adjudication of this quote 1.1 If so, furnish particulars:	ship (family, friend, other) with a pers	YES NO
2.11	Are you, or any person connected with the bidder, aware of any rela employed by the state who may be involved with the evaluation and the so furnish particulars: 1. If so furnish particulars:	tionship (family, friend, other) betwee or adjudication of this quote?	YES NO
	Do you or any of the directors / trustees / shareholders / members of or not they are bidding for this contract? If so, furnish particulars:		y other related companies whether YES NO
3. NB:	Full details of directors / trustees / members / shareholders. The Department Of Health will validate details of directors / truste to ensure that their details are up-to-date and verified on CSD. If the not be considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and passed over as non-compliant according to the considered and the considered and the considered and the considered and the considered according to the considered and the consi	ne Department cannot validate the 11	nformation on USD, the quote will
4	DECLARATION		
I, T FUI	HE UNDERSIGNED (NAME)RNISHED IN PARAGRAPHS 2.	CERTIFY	THAT THE INFORMATION
	CCEPT THAT THE STATE MAY REJECT THE QUOTE OF OVE TO BE FALSE.	R ACT AGAINST ME SHOULD	THIS DECLARATION
	ne of bidder Signature	Position	Date
"Sta a)	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);	c) provincial legislature; d) national Assembly or the national Cour e) Parliament.	ncil of provinces; or

^{2&}quot;Shareholder" means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

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 disqual (i) The institution has determined that a compulsory site meeting (ii) Date/ Time: Place	NO take place
Institution 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:
 - B-BBEE Status level certificate issued by an authorized body or person;
 - 2) A sworn affidavit as prescribed by the B-BBEE Codes of Good Practice;
 - Any other requirement prescribed in terms of the B-BBEE Act;
- (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

5	RID	DECL	ARAT	ΓΙΟΝ

- 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.

proof of l	-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:	
	i) What percentage of the contract will be subcontracted	
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:

Designated Group: An EME or QSE which is at last 51% owned by:	EME	QSE
,	√	√
Black people		
Black people who are youth		
Black people who are women		
Black people with disabilities		
Black people living in rural or underdeveloped areas or townships		
Cooperative owned by black people		
Black people who are military veterans		
OR		
Any EME		.,
Any QSE		

9.	DECLARATION WITH REGARD TO COMPANY/FIRM					
9.1	Name of company/firm:					
9.2	VAT registration number:					
9.3	Company registration number:					
9.4	TYPE	OF COMPANY/ FIRM [TICK APPLICABLE BO	X)			
		Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited				
9.5	.5 DESCRIBE PRINCIPAL BUSINESS ACTIVITIES					
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
9.6		PANY CLASSIFICATION ITICK APPLICARI F R	(UX)			
5.0	COMPANY CLASSIFICATION [TICK APPLICABLE BOX] Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.					
9.7	Total	number of years the company/firm has been in I	business:			
9.8	the B	I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based of the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we acknowledge that:				
	i)	i) The information furnished is true and correct;				
	ii)	ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;				
	iii)	iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;				
	iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of have not been fulfilled, the purchaser may, in addition to any other remedy it may have —					
	(a) disqualify the person from the bidding proces	ss;			
	(b) recover costs, losses or damages it has incu	irred or suffered as a result of that person's conduct;			
	(c)	 cancel the contract and claim any damages arrangements due to such cancellation; 	which it has suffered as a result of having to make less favourable			
	(d	who acted on a fraudulent basis, be restricted	s shareholders and directors, or only the shareholders and directors ed by the National Treasury from obtaining business from any organs, after the audi alteram partem (hear the other side) rule has been			
	(e) forward the matter for criminal prosecution.				
		NESSES	SIGNATURE(S) OF BIDDERS(S)			
	1.		DATE:			
	2.		ADDRESS			