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AdvertQuote

HEALTH	U-NATAL PROVINCE Quotation Advert	
Opening Date:		h
Closing Date:	2021-09-07	
Closing Time:	2021-09-14	
_	11:00	
INSTITUTION DETAIL	LS	
Institution Name:	Greytown hospital	~
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / ser	vices is required GREYTOWN HOSPITAL (SCM)	
Date Submitted	2021-09-07	ŗ.
ITEM CATEGORY AN	ID DETAILS	
Quotation Number:	ZNQ:	A DESCRIPTION OF THE PROPERTY
	GTW:18/09/2021	Mark and the second second
Item Category:		
Item Category: Item Description:	Goods SUPPLY AND DELIVER OFFICE CHAIRS,VISITOR CHAIR WI PLASTIC CHAIRS AND SWIVEL CHAIRS	ITH NO ARM
Item Description: Quantity (if supplies)	SUPPLY AND DELIVER OFFICE CHAIRS, VISITOR CHAIR WI PLASTIC CHAIRS AND SWIVEL CHAIRS 231 UNITS	ITH NO ARM
Item Description: Quantity (if supplies) COMPULSORY BRIEF	SUPPLY AND DELIVER OFFICE CHAIRS,VISITOR CHAIR WI PLASTIC CHAIRS AND SWIVEL CHAIRS	ITH NO ARM
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STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000.00 YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT GREYTOWN HOSPITAL DATE ADVERTISED: 07/09/2021 CLOSING DATE: 14/09/2021 E-MAIL ADDRESS BONGUKWANDA DLAMINI@KZNHEALTH GOV ZA FACSIMILE NUMBER: 031 413 9431 PHYSICAL ADDRESS: GREYTOWN HOSPITAL, BELL STREET GREYTOWN 3250 ZNQ NUMBER: GTW:18/09/2021 DESCRIPTION: SUPPLY AND DELIVER OFFICE CHAIRS, VISITORS CHAIRS WITH NO ARMS, PLASTIC CHAIRS, SWIVEL CHAIRS **VALIDITY PERIOD 60 Days** CONTRACT PERIOD (if applicable) CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO. UNIQUE REGISTRATION REFERENCE DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS) 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..... **CELLPHONE NUMBER** E-MAIL ADDRESS VAT REGISTRATION NUMBER (If VAT vendor) YES NO 1 HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SBD 6.1)

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

OFFICIAL PRICE PAGE FOR QUOTATIONS			ZNQ NUMBER: GTW:18/09/2021				
		AND DELIVER OFFICE C	HAIRS, VISITORS CHAIR				
SIGNATUR	E OF BIDDER	R					
[By signing	this document	t I hereby agree to all terms a	ind conditions]				
CAPACITY UNDER WHICH THIS QUOTE IS SIGNED							
Item No	Quantity	Description		Brand & model	Country of manufacture	Price R	С
		SLIPPLY A	ND DELIVER				
	4 UNITS		IRS WITH ARMS				\top
	10 UNITS		RS WITH NO ARMS				\top
	195 UNITS	PLASTI	C CHAIRS				\neg
	22 UNITS	SWIVE	L CHAIRS				
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VALUE A	DDED TAX @	15% (Only if VAT Vendor)					
TOTAL Q	UOTATION P	RICE (VALIDITY PERIOD 6) Days)				
		With The Specification?			A.N.S. / S.A.B.S. Specif	ication?	
Is The Price Firm?			State Delivery Per	iod E.G. E.G. 1day	, IWEEK		

Enquiries regarding the quote may be directed to:	
Contact Person S DLAMINI Tel: 031 413 9225 E-Mail Address BONGUKWANDA, DLAMINI@KZI	

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

100	limited quote or proposal) employed by the state, or declare his/her position in the bidder is employed	lake an offer or offers in terms In view of possible allegation to persons connected with o relation to the evaluating/adju by the state; and/or	ns of favouritism r related to the dicating author	n, should the resulting m, it is required that t ity where-	quote, or part thereof, be the bidder or his/her auti	e awarded horised rep	to persons resentative
4	evaluation and or adju-	nose behalf the bidding docun dication of the quote(s), or who clarant acts and persons who	ere it is known	that such a relationsh	ip exists between the pe	rson or per	elved in the esons for or
2.	In order to give effect to the	e above, the following question	nnaire must be	completed and subm	itted with the quote.		
2.2.	Identity Number: Position occupied in the G	esentative Company (director, trustee, sha	2.5. areholder²):2.6.	Tax Reference Num	ber:		
2.7.	The names of all director	s / trustees / shareholders / m	embers, their i	ndividual identity numb	pers, tax reference numb	ers and, if	applicable,
0.0		rs must be indicated in paragr		4	[TICK	APPLICAL	
	Are you or any person co I.If so, furnish the following	nnected with the bidder preser particulars:	ntiy employed t	y tne state?		YES	NO
	Name of person / director	/trustee / shareholder/ membe					
		t which you or the person con					
		ate institution:ployed by the state, did you of					
2.0.2	in the public sector?	ployed by the state, did you of	rain the approp	mate admonty to dilu	strake remunerative wort	YES	NO
	.1. If yes, did you attach	proof of such authority to the o				153	INO
	Failure to submit proof of s	uch authority, where applicable	e, may result in	the disqualification of	the quote.)		
2.8.2 2.9		reasons for non-submission or or any of the company's direct					
2.0.	state in the previous twel		5107 (100(000)		or their apodees corre	YES	NO
	. If so, furnish particulars						
2.10.	Do you, or any person co	nnected with the bidder, have	any relationship	(family, friend, other)	with a person employed		
2.10.		evaluation and or adjudication				YES	NO
	Are you, or any person co	nnected with the bidder, aware	of any relation	ship (family, friend, ot	her) between any other b	idder and a	any person
- 44		o may be involved with the ev				YES	NO
2.11.	If so, furnish particulars Do you or any of the direct	:tors / trustees / shareholders /	mambare of the	oompany hovo any ir	utoract in any other relate	d sampania	a uhathar
2.12.	or not they are bidding for		HIGHIDGIS OF AR	company nave any n	nerest in any other relate	YES	NO
2.12.		·	***************************************			1.0	1110 1
	The Department Of Healt to ensure that their detail	trustees / members / shareh n will validate details of direct s are up-to-date and verified o ssed over as non-compliant ac	ors / trustees in CSD. If the I	Department cannot va	lidate the information or		
4	DECLARATION						
	IE UNDERSIGNED (N NISHED IN PARAGR	AME) APHS 2.	• • • • • • • • • • • • • • •	***************************************	CERTIFY THAT THI	E INFORM	MATION
	CEPT THAT THE STA VE TO BE FALSE.	TE MAY REJECT THE Q	UOTE OR A	CT AGAINST ME	SHOULD THIS DECI	LARATIO	N
	e of bidder	Signature	_	osition			
40.00-	_ = = =						
a)		ertment, national or provincial public ne meaning of the Public Finance Ma			national Council of provinces; o	r	

^{*}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.

COMPULSORY SITE INSPECTION / BRIEFING SESSION

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

8. STATEMENT OF SUPPLIES AND SERVICES

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

9. SUBMISSION AND COMPLETION OF SBD 6.1

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

10. TAX COMPLIANCE REQUIREMENTS

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

11. TAX INVOICE

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

12. PATENT RIGHTS

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

13. PENALTIES

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

14. TERMINATION FOR DEFAULT

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

15. FAILURE TO COMPLY WITH ABOVE WILL RESULT IN YOUR QUOTE BEING PASSED OVER.

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

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

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

1. GENERAL CONDITIONS

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

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

- 1.5 Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the quote, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.
- 1.6 The purchaser reserves the right to require of a bidder, either before a quote is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

2. DEFINITIONS

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

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

proor	D-DDE	E status level di Contributor.					
7.	SUB-	CONTRACTING	(Tick ap	plicable t	ox)		
7.1	Wil	any portion of the contract be sub-contracted?		YES		NO	
7.1.1	If y	es, indicate:					
	l)	What percentage of the contract will be subcontracted%					

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
	1	√
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.	DECLA	RATION 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 BOX	4				
		Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited					
9.5		RIBE PRINCIPAL BUSINESS ACTIVITIES					
 9.6		PANY CLASSIFICATION [TICK APPLICABLE B	OX1				
		Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.					
9.7	Total n	number of years the company/firm has been in b	usiness:				
9.8	I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, 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) T	he information furnished is true and correct;					
	ii) T	he preference points claimed are in accordance	with the General Conditions as indicated in paragraph 1 of this form;				
			sult of points claimed as shown in paragraphs 1.4 and 6.1, the contractor ma atisfaction of the purchaser that the claims are correct;				
		the B-BBEE status level of contributor has beer ave not been fulfilled, the purchaser may, in add	n claimed or obtained on a fraudulent basis or any of the conditions of contractificant to any other remedy it may have –				
	(a)	disqualify the person from the bidding process	3;				
	(b)	recover costs, losses or damages it has incur	red or suffered as a result of that person's conduct;				
	(c)	cancel the contract and claim any damages varrangements 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	shareholders and directors, or only the shareholders and directors if by the National Treasury from obtaining business from any organ after the audi alteram partem (hear the other side) rule has been				
	(e)	forward the matter for criminal prosecution.					
	[]				
		ESSES	SIGNATURE(S) OF BIDDERS(S)				
	1		DATE:				
	2		ADDRESS.				
	1		1 1				

SPECIFICATION

GENERAL INFORMATION REQUIRED

NOTITUTION GREXTOWN HOSPITAL

PRINT NAME CONTACT PERSON WARD / DEPARTMENT : N. R. KHUMALO AN OFICE

SIGNATURE DSIMPONON

TELEPHONE NUMBER : CESTSCOCKTENSION: 27'7

DATE

202

BUR GENORRY VISITORS WITH ARM

PICTURE AHMCHED SEAT WITH ARMS

HEAM BUTH AND GOOD GUALITY

WITNESS

Visitors arm chair

	inealth: Department: Health PROVINCE OF KWAZULU-NATA	ENDAUSERSE	PECIFICATIO	VEORME
Qu	ote Number:			1
Iter	n Description:	VISTORS CA	AIRS	•
De	partment/Section:		Purpose of Item:	
1.	Pre-qualification cri	teria if any:		
	1.1. Is the item required Regulatory Body / cert	ired to have a regulatory body ce	rtification (e.g. SABS, SANS	, SANAS, ISO, CIDB, etc.)? Yes / No:
	1.2. Is a compulsory if Yes, specify: Date :_	r site inspection / briefing session	required? Yes / No Place:	
	1.3. Is local producti if Yes, specify:	ion and content part of the quote	? Yes / No	
	1.4. Provisions of se if Yes, specify:	ction 4(1)(a) of the PPPFA Regula	ations,2017 if applicable? Ye	s / No
	1.5. Liability Cover in	nsurance? Yes / No		
				\
2,	What is the specifica	tion of the required item?		
1.	specifications to be adv	ertised	Co	mment
2.				
3.	SPEC	ATTACHED		
4.				
5.				
ог	. I. Deadline for subm	to be submitted? Yes / No(select of ission if Yes: Date/// es must be made available when re	TimePlace	or No
4. F	enalties to be noted to	by the suppliers:		
	contract, the purch	s to deliver any or all of the good	Is or to perform the services	within the period(s) specified in the act, deduct from the contract price,
	The policy of sin	m_calculated on the belivered him	erot the deleved anode or un	porformed consists well- the con-t
	prime interest rate	calculated for each day of the delay	until actual delivery or perform	nance.
5. V				
List ev	/aluation criteria / speci	criteria / special terms and condi al terms and conditions to be adver	tions to be advertised?	
1. P	re-qualification criteria	Does the offer meet the pre-quali	fication criteria?	
	dministrative	Does the offer comply to stipulate	ed administrative requirements	?
Pi -	onformance:	Was the product made or service	performed to specifications?	
4. P	erformance:	Will/does the product/service fulfil	its performance obligation in	a manner that releases the supplier
5. Fe	eatures:	from all liabilities under the contra What characteristics does the pro	ICI?	
5. R	eliability:	How long can a product go betwe	en failures and the need for m	Cintononos? (cure-t)
-	urability:	What is the useful life for the prod	uct? How will the product hold	un under extended use?
	erviceability:	How easy is it to repair, maintain	or support the product or servi	ce? (customer support)
	oility & Capacity	_ rine ability and capacity of the ver	idor to execute the contract	(capporty
10. Pr	eference points	Preferential Procurement System	(80/20) if applicable	
			5	
Vame (of End-user (in full)	Baldanara	I No.	
-	ation / Rank (in full)	Dry Mane 19	Name of SCM Rep (in full)	T. A. WAMABA
ignatu		BHC suggetimen	Designation/ Rank (in full)	SCAN SUPERVISION
ate		Thrombo	Signature	M
72	rd End-User Specificati	02/09/2021.	Date	2021.09.02

SPECIFICATION

GENERAL INFORMATION REQUIRED

INSTITUTION	: GREYTOWN HOSPITAL
WARD / DEPARTMENT	:
CONTACT PERSON	•
PRINT NAME	
SIGNATURE	:
TELEPHONE NUMBER	EXTENSION):
DATE	
Insake CHAIRS VISITO	RS NO ARMS.
1) COLOUR- BLUE	
	SOD QUALITY METAL FRAME.
B) UPHOLSTERY TO BE	OF GOOD AND STRONG MATERIAL.
H) GOOD GUALITY AND CO	OMFORTABLE SEATING.
5) WIDE SEAT WIT	
6) SAMPLE TO BE	PROVIDED.
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THE REAL PROPERTY.	
Visitors sidechair	SIGNATURE:
Cat No. 02-03701/O. No. AA 0859636/12. 2001/Standard Printers	WITNESS :

SPECIFICATION GENERAL INFORMATION REQUIRED

MOTITION	: GREYTOWN HOSPITAL	
WARD / DEPARTMENT	:	
CONTACT PERSON	:	
PRINT NAME	:	
SIGNATURE	:	
TELEPHONE NUMBER	(EXTENSION):	
DATE	2	man of the last
DUTY AND WAST CARY A MEIGHT	OF 150 KG-PATIENT.	
	SIGNATURE: CONTROL OF THE SIGNATURE: CONTROL OF THE SIGNATURE CONTROL O	8N)
Cat No. 02-03701/O. No. AA 0658836/12, 2001/Standard Printers	WITNESS : VUL	

Department: Health PROVINCE OF KWAZULU-NATA	- Jenidau	SERISE	EGIFICATIO	dnæøe	M	
Quote Number:	ıL.				1	
· ·	9		_			
Item Description:	JUASTI	è CH	AIRS			
Department/Section:	Pric Purpose of Item:					
1. Pre-qualification cr	_					
1.1. Is the item requ Regulatory Body / cer	ifred to have a regitification required if	ulatory body ce Yes:	rtification (e.g. SABS, SA	NS, SANAS, ISO	, CIDB, etc.)? Yes / No:	
1.2. Is a compulsor	v site inspection / 1	hriefing session	required? Yes / No Place:			
1.3. Is local product if Yes, specify:	ion and content pa	art of the quote	? Yes7 No			
1.4. Provisions of se if Yes, specify:	ection 4(1)(a) of the	PPPFA Regula	ations,2017 if applicable?	Yes / No		
1.5. Liability Cover if Yes, specify:	nsurance? Yes / N	0				
if Yes, specify:	-	· · · · · · · · · · · · · · · · · · ·			1	
2. What is the specifica	ation of the require	d item?			1	
List specifications to be adv	ertised	u itelii i		Comment		
_ 1.				Continent	<u> </u>	
2. 59	1					
4.	<u></u>	17ACF.	00			
5.						
 3.2. Specify that samp 4. Penalties to be noted 4.1. If the supplier fail contract, the purchas a penalty, a si 	les must be made a by the suppliers: is to deliver any or naser shall, without um_calculated on th	vailable when re all of the good prejudice to its o	Time Place equested in writing. Yes Is or to perform the service ther remedies under the composition of the delayed goods or until actual delivery or per	or No	riod(s) specified in the	
			3.4			
List evaluation criteria / spec	rial terms and condi-	erms and condi	tions to be advertised?			
Pre-qualification criteria	Does the offer ma	et the pre-qualit	fication criteria?			
2. Administrative	Does the offer meet the pre-qualification criteria? Does the offer comply to stipulated administrative requirements?					
3. Conformance:	Was the product made or service performed to specifications?					
4. Performance:	Will/does the prod	duct/service fulfil	its performance obligation	, in a manner that	releases the supplier	
5. Features:	T II OI II OII II ODIIILES	under me contra	CI !			
6. Reliability:	How long can a n	roduct an between	duct or service have?			
7. Durability:	How long can a product go between failures and the need for maintenance? (guarantee) What is the useful life for the product? How will the product hald a product and the life for the product?					
5. Serviceability:	What is the useful life for the product? How will the product hold up under extended use? How easy is it to repair, maintain or support the product or service? (customer support)					
Ability & Capacity	The ability and ca	pacity of the ven	dor to execute the contract	Finice: (customer	support)	
10. Preference points	Preferential Procu	rement System	(80/20) if applicable			
	0 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
lame of End-user (in full)	DVI WELL	we 19	Name of SCM Rep (in fu	11)	1.4.	
esignation / Rank (in full)	PHE Sell	NOSTU DE	Designation/ Rank (in ful	1/-//	CARRIER	
ignature	(III)	10	Signature	Jen	SUPERVISOR	
ate	02/09	1200	Date			
tandard End-User Specificat	ion Form	1000		102-6	79. 202/ Page 1 of 1	

SPECIFICATION

GENERAL INFORMATION REQUIRED

: GREYTOWN HOSPITAL

INSTITUTION

WARD/DEPARTMENT: Kwaseye Clow'C	
CONTACT PERSON :	
PRINT NAME : D' R' Mayor	
SIGNATURE : Of Oh	
TELEPHONE NUMBER : 033 417 8961 (EXTENSION):	
DATE	
Insake CHAIRS SWIVEL I-MGH BACK.	7)
D CHAIRS SWIVER MIGH BACK.	
DI HIGHBACK SWIVEN AND TILT.	
3) POLY ARMS AND BASE	-
H LOCK PILT.	
5) COLOUR BLUE.	
6) FITHED WITH GOOD QUALITY WHEELS	
TO GODD QUALITY AND MUST BE DURABLE. 8) SEE PICTURE ARTACHED.	······································
OF THE MANEY.	III
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SIGNATURE:	
WITNESS :	
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nealth E	endausersde			P.M.
Department: Health PROVINCE OF KWAZULU-NATAL				
Quote Number:			34	
Item Description:	Office Comins,	VISITORS CAN	नारें .	
Department/Section: _	PHC	Purpose of Iter	n:	
1. Pre-qualification crite	ria if any:			
	ed to have a regulatory body certification required if Yes:			D, CIDB, etc.)? Yes / No:
1.2. Is a compulsory s if Yes, specify: Date	ite inspection / briefing session re	equired? Yes / No		
1.3. Is local production if Yes, specify:	n and content part of the quote? X	es / No		
1.4. Provisions of sec if Yes, specify:	tion 4(1)(a) of the PPPFA Regulation	ons,2017 if applicable?	Yes / No	
1.5. Liability Cover ins	eurance? Yes / No			
if Yes, specify:		. 3		1
	on of the required item?		0	
List specifications to be adve	rised		Comment	
2.			<u> </u>	
3. SABO	- ATTACKE	-D		
4.				
3.2. Specify that sample4. Penalties to be noted b4.1. If the supplier fails	es must be made available when req y the suppliers: to deliver any or all of the goods aser shall, without prejudice to its off	uested in writing. Yes	or No	period(s) specified in the
as a penalty, a sur	m_calculated on the delivered price: calculated for each day of the delay of	of the delayed goods o	or unperformed s	
	criteria / special terms and conditi		·	
	al terms and conditions to be adverti			
Pre-qualification criteria Administrative	Does the offer meet the pre-qualific		nonte?	
3. Conformance:	Does the offer comply to stipulated administrative requirements? Was the product made or service performed to specifications?			
l. Performance:	Will/does the product/service fulfil i	-		hat releases the supplier
	from all liabilities under the contract	t?		
i. Features:	What characteristics does the product or service have?			
i. Reliability:	How long can a product go between failures and the need for maintenance? (guarantee)			
Durability:	What is the useful life for the product? How will the product hold up under extended use?			
	Serviceability: How easy is it to repair, maintain or support the product or service? (customer support)			
Ability & Capacity				
o. Preference points	2.\11	outzo) ii applicable	G	
lame of End-user (in full)	LN Mauels	Name of SCM Rep (in	full) /- 2	MANLAGA
esignation / Rank (in full)	THE SUBJIVED	Designation/ Rank (in	full) Sca	1 SUPERVISOR
ignature	Molano	Signature		an.
rate	15061140140	Date	02	109/2021
tandard End-User Specifica	tion Form			Page 1 of 1