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HOME CORPORATE INFORMATION COMPONENTS DIRECTORY DISTRICT OFFICES HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

AdvertQuote



Quotation Advert

Opening Date: 2022-02-22

Closing Date: 2022-03-01

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Grey's hospital

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: Grey's Hospital

Date Submitted: 2022-02-22

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: GRS 4034/1/22

Item Category: Goods

Item Description: Body Bags White Baby Infant
(SEE ATTACHED SPECIFICATION)

Quantity (if supplies): 50 Units

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date:

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: Departmental Website

QUOTES SHOULD BE DELIVERED TO: Greys Hospital Tender Box / Fax: 033 897 3006

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Sipho Sikithi

Email: No Email / Fax: 033 897 3006

Contact Number: 033 897 3492

Finance Manager Name: Mrs. B.G Andeson

Finance Manager Signature: 

No late quotes will be considered

CARS:4034/1/22

SUPPLY AND DELIVERY OF BODY BAGS FOR VARIOUS INSTITUTIONS

SPECIFICATIONS FOR DISPOSABLE BODY BAGS SIZE INFANT TO X-LARGE

1. SCOPE

1.1 This specification covers the requirements for the material, cut and make of disposable body bags.

2. MATERIALS

The following materials must be used by the manufacturer:

2.1 Cloth

Recycled plastic with a minimum thickness of not less than 180 microns shall be used to make the body bag.

2.2 Colour

The body bag must be white including the handles and the zipper should be black.

2.3 Sewing Thread

Size 25 poly-cotton corespun threads shall be used to sew the zip. It shall have a breaking strength of at least 12 Newton(N) and linear density compatible with the material with which it is used. The body bag should be able to accommodate the body weight of up to 200kg.

2.4 Welding

The plastic panels of the body bag shall be heat bonded together to secure a waterproof joint.

2.5 Slide fastener

P.T.O.

The code must be (A 5 CF) Nylon Zip, together with two DFLLK sliders to accommodate a lockable device. The slide fastener shall be black in color.

2.6 Handles

The body bag must have 6 extra strong carry handles with a tensile strength of up to 200kgs, suitable for handling by 6 people. All handles to be box stitched using poly-cotton corespun polished 25 threads.

3. REQUIREMENTS

WORKMANSHIP - The workmanship must comply with the requirements for workmanship in specification SANS 1270/2007

3.1 Style

The body bag must be the length and width of the specified size, inside facing and a U-shaped zip with two lockable sliders. The zip will be sewn in 15cm from the edges of the upper part of the body bag.

3.2 Make

All sewing must be in accordance with SABS 0101.

All heat welding must be in accordance with SABS specifications.

The body bag shall be leak proof provided the zip is on top.

4. General

NOTE - Unless inconsistent with the text, all measurements are normal.

The body bags must have the following dimensions unless otherwise specified:

Sizes:

Infants Child 500mm x 500mm

Medium 1.5m x 1m

Large 1.8m x 1m

X-Large 2.2m x 1m

DECLARATION OF INTEREST

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

2.1. Full name of bidder/representative.....

2.2. Identity Number: 2.4. Company Registration Number:

2.3. Position occupied in the Company (director, trustee, shareholder²): 2.5. Tax Reference Number:

2.6. VAT Registration Number:

2.7. The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / persal numbers must be indicated in paragraph 3 below. [TICK APPLICABLE]

2.8. Are you or any person connected with the bidder presently employed by the state? YES NO

2.8.1. If so, furnish the following particulars: YES NO

Name of person / director / trustee / shareholder/ member:

Name of state institution at which you or the person connected to the bidder is employed:.....

Position occupied in the state institution:Any other particulars:.....

2.8.2. If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector? YES NO

2.8.2.1. If yes, did you attach proof of such authority to the quote document? YES NO

(Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the quote.)

2.8.2.2. If no, furnish reasons for non-submission of such proof:

2.9. Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses conduct business with the state in the previous twelve months? YES NO

2.9.1. If so, furnish particulars:.....

2.10. Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this quote? YES NO

2.10.1. If so, furnish particulars:.....

2.11. Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this quote? YES NO

2.11.1. If so, furnish particulars:.....

2.12. Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract? YES NO

2.12.1. If so, furnish particulars:.....

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 DECLARATION

I, THE UNDERSIGNED (NAME).....CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 2.

I ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

Name of bidder	Signature	Position	Date
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¹"State" means –

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;
b) any municipality or municipal entity;	d) national Assembly or the national Council of provinces; or
	e) Parliament.

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