



health

Department: _____
Health
PROVINCE OF KWAZULU-NATAL

St Mary's Kwamagwaza Hospital, Magwaza Road (8-9 KM)
Private Bag X 808 Melmoth 3835
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St Mary's Kwamagwaza Hospital
Supply Chain Management

Enquiries: Thoba Zulu
Date: 10 May 2022
Tel. no.: 035 450 8258
Ref.no: KMG 08-22-23

INVITATION TO QUOTE

ATT: SERVICE PROVIDER
FROM: KWAMAGWAZA HOSPITAL
RE: URGENT REPAIRS TO DAMAGE BOOM GATE AMD MAIN GATE

You are cordially requested to give all-inclusive quotation for the above mentioned item:

NO.	ITEM DESCRIPTION	QUANTITY	PRICE		COMPLIANT TO SPECIFICATION	
					YES	NO
1	Supply and fit new rail steel wheel 80mm diameter with pin (matching the existing) Ensure that the gate closing freely after fitting Replace the damaged sling/cable that holds the pin					

SCM REQUIRED DOCUMENTS TO BE ATTACHED

DOCUMENTS REQUIRED	YES	NO
1. Signed SBD4		
BBBEE Certificate		

TO BE SIGNED BY THE SUPPLIER UPON COMPLETION:

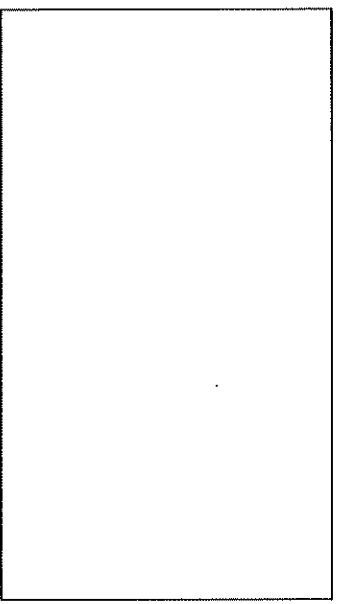
I, the undersigned (initial and surname): _____

Fighting Disease, Fighting Poverty, Giving Hope

Certify that the information furnished above is correct. I also accept that this information will be used in the evaluation process and that my bid/quote may be rejected or accepted based on the information I furnished.

Signature: _____ Position: _____ Date: _____

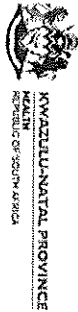
SUPPLIER COMPANY STAMP:



• KINDLY RETURN ALL DOCUMENTATION WHEN REPLYING


SharePoint

Zulu Thoba 



KZN HEALTH

KZN Health Intranet

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AdvertQuote




KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

Quotation Advert

Opening Date: 2022-05-11 

Closing Date: 2022-05-17 

Closing Time: 11:00 

INSTITUTION DETAILS

Institution Name: Kwamagwaza hospital

Province: Kwazulu-Natal


Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required

Date Submitted

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: King 08-22-23 

Item Category: Goods

Item Description: URGENT REPAIRS TO DAMAGE BROOM GATE AND MAIN GATE

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date : 

Time: 


Venue: 


QUOTES CAN BE COLLECTED FROM:


SCM Office, Kwamagwaza Hospital, Melmoth 3835 

Kwamagwaza Hospital, Melmoth 3835 tender box 

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Thoba Zulu 


Email: 

Contact Number: 035 450 8258 

Finance Manager Name:

Mr. Pamokazi

Finance Manager Signature:



No late quotes will be considered

BIDDER'S DISCLOSURE

SBD 4

1. PURPOSE OF THE FORM

Any person (natural or juristic) may make an offer or offers in terms of this invitation to bid. In line with the principles of transparency, accountability, impartiality, and ethics as enshrined in the Constitution of the Republic of South Africa and further expressed in various pieces of legislation, it is required for the bidder to make this declaration in respect of the details required hereunder.

Where a person/s are listed in the Register for Tender Defaulters and/ or the List of Restricted Suppliers, that person will automatically be disqualified from the bid process.

2. BIDDER'S DECLARATION

2.1. Is the bidder, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest¹ in the enterprise, employed by the state? **YES/NO**

2.1.1 If so, furnish particulars of the names, individual identity numbers, and, if applicable, state employee numbers of sole proprietor/ directors / trustees / shareholders / members/ partners or any person having a controlling interest in the enterprise, in table below.

Full Name	Identity Number	Name of State Institution

2.2. Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution? **YES/NO**

2.2.1. If so, furnish particulars:

2.3. Does the bidder or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise whether or not they are bidding for this contract? **YES/NO**

2.3.1. If so, furnish particulars:

3. DECLARATION

I, the undersigned, (name)..... in submitting the accompanying bid, do hereby make the following statements that I certify to be true and complete in every respect:

- 3.1. I have read and I understand the contents of this disclosure;
- 3.2. I understand that the accompanying bid will be disqualified if this disclosure is found not to be true and complete in every respect;
- 3.3. The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However, communication between partners in a joint venture or consortium² will not be construed as collusive bidding.
- 3.4. In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications, prices, including methods, factors or formulas used to calculate prices, market allocation, the intention or decision to submit or not to submit the bid, bidding with the intention not to win the bid and conditions or delivery particulars of the products or services to which this bid invitation relates.
- 3.5. The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening or of the awarding of the contract.
- 3.6. There have been no consultations, communications, agreements or arrangements made by the bidder with any official of the procuring institution in relation to this procurement process prior to and during the bidding process except to provide clarification on the bid submitted where so required by the institution; and the bidder was not involved in the drafting of the specifications or terms of reference for this bid.
- 3.7. I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act No 89 of 1998 and or may be reported to the National Prosecuting Authority (NPA) for criminal investigation and or may be restricted from conducting business with the public sector for a period not exceeding ten (10) years in terms of the Prevention and Combating of Corrupt Activities Act No 12 of 2004 or any other applicable legislation.

I CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 1, 2 and 3 ABOVE IS CORRECT.
 I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 6 OF PFMA SCM INSTRUCTION 03 OF 2021/22 ON PREVENTING AND COMBATING ABUSE IN THE SUPPLY CHAIN MANAGEMENT SYSTEM SHOULD THIS DECLARATION PROVE TO BE FALSE.

.....
Name of Bidder **Signature** **Position** **Date**

¹ The power, by one person or a group of persons holding the majority of the equity of an enterprise, alternatively, the person/s having the deciding vote or power to influence or to direct the course and decisions of the enterprise.
² Joint venture or Consortium means an association of persons for the purpose of combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.



SCOPE OF WORK: URGENT REPAIRS TO BOOM AND MAIN GATE

MANDATORY REQUIREMENTS: 1X completion certificate fitting/ mechanical task any (gates, machinery)

DESCRIPTION OF WORK	QUANTITY	RATE	TOTAL
Repair the main gate by : supply and fit new rail steel wheel 80mm diameter with a pin (matching the existing) ensure that the gate closing freely after fitting Repair boom gate by	1		
Replace the damaged sling / cable that hold the spring.			
Consumables			
TOTAL :			

Compiled by:

Ms Z.H Sifanga
Chief Artisan

11/04/2022
Date