



KWAZULU-NATAL PROVINCE

HEALTH
REPUBLIC OF SOUTH AFRICA

PROJECT NO. : ZNB 5783/2022-H

DESCRIPTION OF SERVICE : APPOINTMENT OF A MULTI-DISCIPLINARY PROFESSIONAL TEAM FOR THE REPLACEMENT OF RAINWATER GOODS, CEILINGS, ELECTRICAL WORKS, ASBESTOS AND CORRUGATED IRON ROOFS AT TOWNHILL HOSPITAL

DISCIPLINE : MULTI-DISCIPLINARY TEAM LED BY AN ARCHITECT

**DEPARTMENT OF HEALTH
CENTRAL SUPPLY CHAIN MANAGEMENT DIRECTORATE
Private Bag X9051
Pietermaritzburg 3200**

PLEASE NOTE THAT THIS BID IS SUBJECT TO TREASURY REGULATIONS 16A ISSUED IN TERMS OF THE PUBLIC FINANCE MANAGEMENT ACT, 1999, THE KWAZULU-NATAL SUPPLY CHAIN MANAGEMENT POLICY FRAMEWORK AND THE GENERAL CONDITIONS OF CONTRACT PRESCRIBED BY PROVINCIAL TREASURY.

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SECTION A INVITATION TO BID

DESCRIPTION:

APPOINTMENT OF A MULTI-DISCIPLINARY PROFESSIONAL TEAM FOR THE REPLACEMENT OF RAINWATER GOODS, CEILINGS, ELECTRICAL WORKS, ASBESTOS AND CORRUGATED IRON ROOFS AT TOWNHILL HOSPITAL.

Project Number : ZNB 5783/2022-H
Closing Date : 29 November 2022
Closing Time : 11:00
Advert date : 21 October 2022

Compulsory Briefing : Yes
Date : 09 November 2022
Time : 10:00
Venue : 35 Hyslop Road, Townhill Office Park (inside Townhill Hospital) – Block 1
Boardroom 2 and 3, Townhill, Pietermaritzburg, 3200
Bid Validity period : 84 days

THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM

BID DOCUMENTS MAY BE POSTED TO:

HEAD: DEPARTMENT OF HEALTH
CENTRAL SUPPLY CHAIN MANAGEMENT DIRECTORATE
PRIVATE BAG X9051
PIETERMARITZBURG,
3200

OR

DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS):

SUPPLY CHAIN MANAGEMENT
OLD BOYS SCHOOL
310 JABU NDLOVU STREET
PIETERMARITZBURG
3201

Bidders should ensure that bids are delivered timeously to the correct address. If the bid is late, it will not be accepted for consideration.

The bid box is generally open 24 hours a day, 7 days a week.

**ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS – (NOT TO BE RE-TYPED)
THIS BID 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 BID BEING DISQUALIFIED)

NAME OF BIDDER:

POSTAL ADDRESS:

Code:

STREET ADDRESS:

Code:

TELEPHONE:

Code:

Number:

CELL PHONE :

Code:

Number:

FACSIMILE NUMBER:

Code:

Number:

E-MAIL ADDRESS:

VAT REGISTRATION NUMBER:

SIGNATURE OF BIDDER:

DATE:

CAPACITY UNDER WHICH THIS BID IS SIGNED:

ANY ENQUIRIES REGARDING THE BIDDING PROCEDURE MAY BE DIRECTED TO:

Department : KZN - DEPARTMENT OF HEALTH
Contact Person : Junitha Sookraj
Tel : (033) 815 8369
E-mail address : junitha.sookraj@kznhealth.gov.za

ANY ENQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO:

Department : KZN - DEPARTMENT OF HEALTH
Contact Person : Takalani Netshipale
Tel : (083) 287 5951
E-mail address : Takalani.Netshipale@kznhealth.gov.za

SECTION B

SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF FORMS

PLEASE NOTE THAT THIS BID IS SUBJECT TO TREASURY REGULATIONS 16A ISSUED IN TERMS OF THE PUBLIC FINANCE MANAGEMENT ACT, 1999, THE KWAZULU-NATAL SUPPLY CHAIN MANAGEMENT POLICY FRAMEWORK AND THE GENERAL CONDITIONS OF CONTRACT.

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.
2. Under no circumstances, whatsoever may the bid forms be retyped or redrafted. Photocopies of the original bid documentation may be used, but an original signature must appear on such photocopies.
3. The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated.
4. Bid submitted must be complete in all respects.
5. Bid 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 bid documents.
6. Each bid shall be addressed in accordance with the directives in the bid documents and shall be lodged in a separate sealed envelope, with the name and address of the bidder, the bid number and closing date indicated on the envelope. The envelope shall not contain documents relating to any bid other than that shown on the envelope. If this provision is not complied with, such bids will be rejected as being invalid.
7. A specific box is provided for the receipt of bids, and no bid found in any other box or elsewhere subsequent to the closing date and time of bid will be considered.
8. No bid sent through the post will be considered if it is received after the closing date and time stipulated in the bid documentation, and proof of posting will not be accepted as proof of delivery.
9. No bid submitted by telefax, telegraphic or other electronic means will be considered.
10. Bid documents must not be included in packages containing samples. Such bids will be rejected as being invalid.
11. Any alteration made by the bidder must be initialled.
12. Use of correcting fluid is prohibited and will render the bid invalid.
13. 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.

SECTION C

REGISTRATION ON THE CENTRAL SUPPLIERS DATABASE

1. In terms of the Public Finance Management Act (PFMA), 1999 (Act No 1 of 1999) Section 38 (1) (a) (iii) and 51 (1) (iii) and Section 76 (4) of PFMA National Treasury developed a single platform, The Central Supplier Database (CSD) for the registration of prospective suppliers including the verification functionality of key supplier information.
2. Prospective suppliers will be able to self-register on the CSD website: www.csd.gov.za
3. Once the supplier information has been verified with external data sources by National Treasury a unique supplier number and security code will be allocated and communicated to the supplier. Suppliers will be required to keep their data updated regularly and should confirm at least once a year that their data is still current and updated.
4. Suppliers to provide their CSD supplier number and unique security code to organs of state to view their verified CSD information.

CSD NUMBER

**SECTION D
DECLARATION THAT INFORMATION ON CENTRAL SUPPLIER DATABASE IS
CORRECT AND UP TO DATE**

(To be completed by bidder)

This is to certify that I

.....
(name of bidder / authorised representative)

Who represents

.....
(state name of bidder)

Am aware of the contents of the Central Supplier's Database with respect to the bidder's details and registration information, and that the said information is correct and up to date as on the date of submitting this bid.

In addition, I am aware that incorrect or outdated information may be a cause for disqualification of this bid from the bidding process, and/or possible cancellation of the contract that may be awarded on the basis of this bid.

.....
Name of bidder

.....
Signature of bidder or authorised representative

.....
Date

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.
- 3.4 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.

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.

3.5 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.

3.6 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.

Signature

Date

Position

Name of Bidder

SECTION F

FORM OF OFFER AND ACCEPTANCE

1. Offer

The Employer, identified in the acceptance signature block, has solicited offers to enter into a contract for the procurement of:

An Entity to provide a multi-disciplinary team of experienced and skilled professional consulting services with an Architect as Lead Consultant

For the project: REPLACEMENT OF RAINWATER GOODS, CEILINGS, ELECTRICAL WORKS, ASBESTOS AND CORRUGATED IRON ROOFS AT TOWNHILL HOSPITAL

The bidder, identified in the offer signature block, has examined the documents listed in the Tender Data and addenda thereto as listed in the returnable schedules, and by submitting this offer has accepted the conditions of tender.

By the representative of the bidder, deemed to be duly authorized, signing this part of this form of offer and acceptance, the bidder offers to perform all of the obligations and liabilities of the Service Provider under the Contract including compliance with all its terms and conditions according to their true intent and meaning for remuneration to be determined in accordance with the conditions of Contract identified in the Contract Data.

2. Price

The offered price for the multi-disciplinary team with an Architect as Lead Consultant, inclusive of value added tax, is

R (in figures)

and,

Rand (in words)

This offer may be accepted by the Employer by signing the acceptance part of this form of offer and acceptance and returning one copy of this document to the bidder before the end of the period of validity stated in the Tender Data, whereupon the bidder becomes the party named as the Service Provider in the conditions of Contract identified in the Contract Data.

3. This offer is made by the following Legal Entity: **(please cross out the block that is not applicable)**

	or	
Company or Close Corporation		Natural person or Partnership
Registration number:		Identity number:
Income Tax Reference number:		Income Tax Reference number:

and who is (if applicable):

Trading under the name and style of:

.....

and who is:

.....

Represented herein, and who is duly authorised to do so, by:

.....

In his/her capacity as:

Note: A resolution / power of attorney, signed by all the directors / members / partners of the legal entity must accompany this offer, authorising the representative to make this offer.

4. **Signed for the bidder:**

.....
Name of representative

.....
Signature

.....
Date

5. Witnessed by:

.....
Name of representative

.....
Signature

.....
Date

6. Domicilium Citandi Et Executandi

The bidder elects as its domicilium citandi et executandi in the Republic of South Africa, where any and all legal notices may be served, as (physical address):

Street address::

.....
.....
.....

Code:

Postal address

.....
.....
.....

Code:

Telephone:

Code: Number:

Cell phone :

Code: Number:

Facsimile number:

Code: Number:

E-mail address:

.....

.....
Banker:

.....
Branch:

7. Acceptance

By signing this part of this form of offer and acceptance, the Employer identified below accepts the bidder's offer. In consideration thereof, the Employer shall pay the Service Provider the amount due in accordance with the conditions of Contract identified in the Contract Data. Acceptance of the bidder's offer shall form an agreement between the Employer and the bidder upon the terms and conditions contained in this agreement and in the Contract that is the subject of this agreement.

8. The terms of the Contract

The terms of the Contract are contained in:

Part C1 Agreements and Contract Data, (which includes this agreement) Part C2 Pricing Data

and;

Documents or parts thereof, which may be incorporated by reference into Parts C1 to C2 above.

Deviations from and amendments to the documents listed in the Tender Data and any addenda thereto as listed in the tender schedules as well as any changes to the terms of the offer agreed by the bidder and the Employer during this process of offer and acceptance, are contained in the schedule of deviations attached to and forming part of this agreement. No amendments to or deviations from set documents are valid unless contained in this schedule.

The bidder shall within two weeks after receiving a completed copy of this agreement, including the schedule of deviations (if any), contact the Employer's agent (whose details are given in the Contract Data) to arrange the delivery of any bonds, guarantees, proof of insurance and any other documentation to be provided in terms of the conditions of Contract identified in the Contract Data. Failure to fulfil any of these obligations in accordance with those terms shall constitute a repudiation of this agreement.

Notwithstanding anything contained herein, this agreement comes into effect, if sent by registered post, 4 days from the date on which it was posted, if delivered by hand, on the day of delivery, provided that it has been delivered during ordinary business hours, or if sent by fax, the first business day following the day on which it was faxed. Unless the bidder (now Service Provider) within seven working days of the date of such submission notifies the Employer in writing of any reason why he cannot accept the contents of this agreement, this agreement shall constitute a binding contract between the Parties.

9. Signed for the Employer:

.....
Name of representative

.....
Signature

.....
Date

Street address:

.....
.....
.....

Code:

Telephone: Code: Number:

Facsimile number: Code: Number:

10. Witnessed by:

.....
Name of representative

.....
Signature

.....
Date

11. Schedule of Deviations

1	Subject	.....
	Details	....................
2	Subject	.....
	Details	....................
3	Subject	.....
	Details	....................
4	Subject	.....
	Details	....................
5	Subject	.....
	Details	....................

By the duly authorised representatives signing this agreement, the Employer and the Tenderer agree to and accept the foregoing schedule of deviations as the only deviations from and amendments to the documents listed in the tender data and addenda thereto as listed in the tender schedules, as well as any confirmation, clarification or changes to the terms of the offer agreed by the Tenderer and the Employer during this process of offer and acceptance.

It is expressly agreed that no other matter whether in writing, oral communication or implied during the period between the issue of the tender documents and the receipt by the tenderer of a completed signed copy of this Agreement shall have any meaning or effect in the contract between the parties arising from this agreement.

SECTION G

SPECIFICATIONS, SCOPE, EVALUATION

AN ENTITY TO PROVIDE A MULTI-DISCIPLINARY TEAM OF EXPERIENCED AND SKILLED PROFESSIONAL CONSULTING SERVICES WITH AN ARCHITECT AS LEAD CONSULTANT

1. Project Description:

Replacement of rainwater goods, ceilings, electrical works, asbestos and corrugated iron roofs at Townhill Hospital

2. Project Background

Townhill Hospital is a specialised (psychiatric) provincial hospital situated in the Msunduzi municipality (Pietermaritzburg), in the UMgungundlovu District, built in the 1880's as an Asylum for mentally ill individuals. It was named Pietermaritzburg Mental Hospital in 1916 and in 1946 the hospital was renamed as Townhill Hospital.

It has 280 authorized beds (425 bed designed capacity). The hospital also has a few unused facilities in the vicinity, as seen below. However the facility rainwater goods, flat roofs and car parking shelters at these unused facilities have been identified to be in an unsatisfactory condition.

The Minister of Labour has, under section 43 of the Occupational Health and Safety Act 1993 (Act No. 85 of 1993), after consultations with the Advisory Council, issued Asbestos Abatement Regulations 2020 section 1. This regulation states that an employer or person, if self-employed, shall ensure that the exposure of a person to asbestos is either prevented or where this is not reasonably practicable, adequately controlled. Control of the exposure shall be regarded as adequate if the level of exposure is:

- a. At or below the Occupational Exposure Limit (OEL) for asbestos; or
- b. Above the OEL for asbestos but the reason has been identified and action is taken, as soon as is reasonably practicable to lower exposure.

Due to the criticalness of Department of Health facilities being used to house Health Care Support Services, the Department has started a programme to replace all asbestos roofs in the Province as part of the 2020/21, 2021/22 and 2022/2023 Annual Implementation Plan.

The reasons for the Department to reach this decision include:

- The age of the buildings currently with asbestos roofs
- The prevalent of wind and storm as a result of global warming
- Prevent of hail
- The need to upgrade roof coverings to a more robust and better specification as a means for preparedness for future storms and hail damages

The above factors have been identified to cause the weakness of the asbestos roofs and increasing the risk of exposure to the occupants of the buildings and the people living nearby these facilities.

An overarching decision was therefore taken to replace all asbestos covering on the Healthcare Institutions in the Province.

Asbestos eradication assessment was conducted by UMgungundlovu Health District Office for the Townhill Office Facilities were identified having asbestos roofs and asbestos eradication was recommended to avoid the risk of unhealthy and unsafe environment.

It was further discovered that the project involves associated roofing work (i.e. ceiling, electrical, roofing and roof beams, filing, painting, etc.).

A resolution was made for infrastructure Development to budget and prioritise for this project in this financial year 2022/2023.

A site conditional assessment was conducted on the 04 January 2022 on the Townhill Hospital premises where the hospital structures, buildings and nurses' homes were examined for the purposes of identifying the following works:

- Removal and Replacement of rain water goods which are in bad condition.
- Removal and Replacement of asbestos roofs on hospital structures.
- Removal and Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab for parking in front of retaining wall.
- Ceilings and electrical repair works where applicable.

3. Site location

The Townhill Hospital is located inside the same vicinity as the Townhill Office Park. The hospital has various facilities for patients and staff, including the Uitsig Building, Impala Building, Workshops, Storage, Outpatients, nurses' homes, matrons' homes, and other facilities. As this is an old hospital, some of the facilities still have asbestos roofing, asbestos rainwater goods, and old corrugated roof sheeting which have to be replaced.

4. Detailed Project Scope of Work

As per the site condition assessment that was conducted on the 04 January 2022 on the Townhill Hospital premise, the hospital structures, buildings and nurses' homes were examined for the purposes of identifying the following recommended works:

- Replacement of rain water goods which are asbestos or are in an unsatisfactory condition.

- Replacement of asbestos roofs on the doctor's residence and other residences.
- Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab for parking in front of retaining wall.
- Ceilings and electrical repair works where applicable.



Figure 1: Townhill Hospital Buildings and identified sections with problems

Below is clearer illustration of the findings in each facility, from left to right.



Figure 2: Site findings at the Uitsig building



Figure 3: Site findings at the workshop offices, storage facilities adjacent facilities



Figure 4: Site findings at the Impala building and adjacent parking areas



Figure 5: Site findings at the nurses' homes and matrons' homes



Figure 6: Site findings at residences outside the Townhill Hospital gates

The tables below indicate the components which need to be replaced, the recommended solutions, the quantities and the estimate for each facility. The scope of the works is to include the following recommendations.

Identified work	Recommended works
Replacement of rain water goods which are asbestos or are in an unsatisfactory condition	Install new rainwater gutters and downpipes
Replacement of asbestos roofs on the doctor's residence and other residences	Install new roof sheeting
Replacement of rusted corrugated iron roofs.	Install new roof sheeting
Repairing section of collapsed brick retaining wall.	Construct new brick retaining wall
Water ponding in front of retaining wall	Construct concrete slab or other alternative solution at the water ponding area
Ceilings and electrical works where applicable.	Install new ceiling and electrical works

Please refer to the Project Brief attached as **Appendix D** for the proposed full scope of the project.

5. Project Outcomes:

The project outcome is to provide compliant facility structures, and to promote safer environment to patients, staff and visitors from asbestos, rainwater damage in Health Institutions through the following actions:

- Removal and Replacement of rain water goods which are in bad condition.
- Removal and Replacement of asbestos roofs on hospital structures.
- Removal and Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab or alternative solution for parking in front of retaining wall.
- Successful repair of ceilings and electrical works.

6. Project Objectives:

- The prime objective is to eradicate asbestos roofs in Health Institution to mitigate risk of unhealthy and unsafe environment, efficiently repair the Townhill Hospital facilities that are currently in an unsuitable condition or are broken and require replacement to meet the National Building Regulations and government specifications.
- The second objective is the need to protect the health, welfare and safety of the public and to protect the property from rainwater and asbestos hazards by safely routing and discharging rainwater away from the facilities.

7. Project Success Criteria:

The success of the project will be measured by the compliance of infrastructure buildings that are safe through the following actions:

- Removal and replacement of rainwater goods which are in bad condition.
- Removal and Replacement of asbestos roofs on hospital structures.
- Removal and Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab or alternative solution for parking in front of retaining wall.
- Successful repair of ceilings and electrical works.

8. Statutory Requirements:

Legislation:	All applicable Acts and Regulations pertaining to the Health Environment; OHS Act and Regulations; and All applicable Acts and Regulations for the various Professional Consultancy Services
Norms:	Infrastructure Unit Support Systems (IUSS) guidelines
Standards:	Infrastructure Unit Support Systems (IUSS) guidelines; Standard for Infrastructure Procurement and Delivery Management; Framework for Infrastructure Delivery and Procurement Management (FIDPM) and All applicable standards, regulations and/or specifications of KZN Department of Health
Policies:	All applicable policies of KZN Department of Health
Other Requirements:	Relevant SANS codes All applicable standards, regulations and/or specifications of KZN Department of Health

9. Required Multi-disciplinary Team Composition

The team will be comprised of the following

- Architect including Principal Consultant and Principal Agent Services
- Quantity Surveyor
- Civil/Structural Engineer/Technologist

- Electrical Engineer/Technologist
- Construction Health and Safety Agent
- *Land Surveyor (To be appointed post award)*
- *Geotechnical Engineer/Technologist (To be appointed post award)*

10. Scope of Services required from Team of Professional Service Providers (PSP):

The standard services/deliverables required (for All Construction Stages) from the consultants are as set out in the following government gazettes:

10.1. Architect including Principal Consultant and Principal Agent Services

South African council for the Architectural Profession, Board Notice 122 of 2015, Government Gazette No. 38863, 12 June 2015

10.2. Quantity Surveyor

The South African Council for the Quantity Surveying Professions, Board Notice 170 of 2015, Government Gazette No 391134 of 28 August 2015

10.3. Engineers/Technologists

Engineering Council of South Africa, Board Notice 138 of 2015, Government Gazette No. 39480 of 04 December 2015

10.4. Construction Health & Safety Agent

All roles, responsibilities and deliverables as stated in the South African Council for the Project and Construction Management Professions, Board Notice 167 of 2019 Government Gazette No. 42697 of 13 September 2019 pertaining to the Construction Health and Safety Profession.

10.5. Land Surveyor/Topographical Surveys

The Lead Consultant shall confirm the detailed scope of work that will be required from Land Surveyor. The Land Surveyor shall be procured by the Lead Consultant post award of this contract and shall be paid through the Lead Consultant as a disbursement. The Lead Consultant shall be required to source 3 quotations from Professional Land Surveyors in the area with the lowest quotation being accepted. No additional fees shall be due to the Lead Consultant in respect of this service.

10.6. Geotechnical Engineer/Technologist

The Lead Consultant shall confirm the detailed scope of work that will be required from Geotechnical Engineer/Technologist. The Geotechnical Engineer/Technologist shall be procured by the Lead Consultant post award of this contract and shall be paid through the Lead Consultant as a disbursement. The Lead Consultant shall be required to source 3 quotations from Professional Geotechnical Engineers/Technologists in the area with the lowest quotation being accepted. No additional fees shall be due to the Lead Consultant in respect of this service.

11. Additional items on Services required from Team of Professional Service Providers (PSP):

11.1. Extensive consultation is to take place over all construction stages which will include (but is

not exclusive) consultation with:

- The Facilities
- DOH Districts
- DOH Head Office
- DOH Mental Health
- National DOH
- Local authority
- Other Authorities
- Statutory bodies
- Other Departments

11.2. All consultants will be required to present end of stage deliverables for review and recommendations to the Health Infrastructure Approval Committee according to FIDPM and KZN DOH policies.

11.3. All additional required presentations to be done as may be required

11.4. All approvals to be acquired as may be required

12. Planning and Programming

The Employer is desirous that the project follow the timelines shown below. However, should the bidder feel that these timelines are not achievable then the Bidder must submit a motivation as to why it considers them not achievable and must propose alternative timelines for the Employer's consideration and approval.

PSP Deliverables according to FIDPM stages of work	Duration to produce deliverables from each stage
Stage 2: Concept & Viability Report	3 months
Stage 3: Design Development Report	4 months
Stage 4: Documentation & Procurement	4 months
Stage 5: Works	14 months
Stage 6: Handover	3 months
Stage 7: Project Close Out (up to the end of retention period)	13 months
Total Project time	41 months

The Lead Consultant is required to submit for approval a formal programme listing activities, level of detail, critical path activities and their dependencies, frequency of updating key dates, particulars of phased completion, programme constraints, milestone dates for completion, etc. including the activities to be carried out by the Employer or by others.

13. Software Application for documents

- Programming software shall be the latest version of MS Projects
- Drawing programme software will be the latest version/s of Autodesk AutoCAD and/or Revit
- Quantity surveying software will be the latest version of WinQS

- General software will be MS Office based software and Adobe Acrobat

All documentation that is to be sent to the Client should be in both the required software package file type, as well as in a readable PDF format.

14. Use of Reasonable Skill and Care

The Lead consultant and individual team members are to consist of one or more Registered Professionals as per the relevant Councils. They are required to perform the required service with reasonable skill, care and diligence.

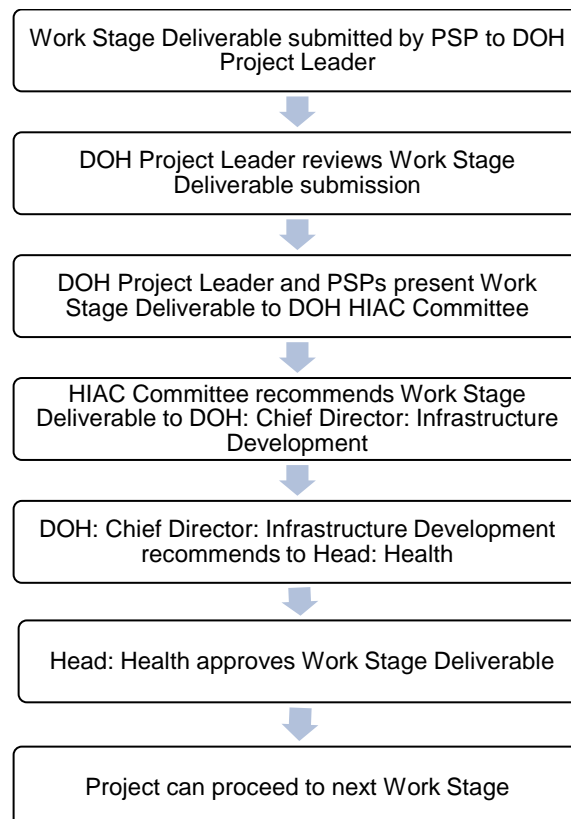
15. Co-operation with Other Service Providers and Affected Parties

The Lead Consultant is required to identify other service providers and affected parties on the project and establish how interactions are to take place.

16. Copyright

Copyright of all documents provided by the Consultant team will vest with the KwaZulu-Natal Department of Health.

17. General Approval Process per Work Stage



18. Access to Land / Buildings / Sites

Arrangements for access to land / buildings / sites and any restrictions thereto shall be the

responsibility of the Employer. However, the Lead Consultant shall be aware of such arrangements and advise the Employer's Project Manager timeously to prevent any delays that may arise due to restricted access.

19. Quality Management

The Bidder shall submit their proposed quality assurance plan and control procedures to fulfil their duties as stipulated in the relevant clauses of the appropriate discipline's Guideline Scope of Services.

20. Format of Communications

These will be made available to the Lead Consultant on award of tender.

21. Key Personnel

Changes to key personnel shall only be effected once authorisation has been obtained from the Employer.

22. Management Meetings and Site Supervision

Project Management meetings to monitor project progress will take place every 14 calendar days.

23. Forms for Contract Administration

Standard forms of contract administration purposes will be made available to the successful bidder upon award.

24. Daily Records

Daily time sheets of all personnel on the project shall be kept by the Lead Consultant and will be made available as and when required to the Employer. Time sheets are to clearly state work performed.

25. Fee Claims and Apportionment of Fees

Receipt and subsequent approval (by Head of Health or designated relevant authority) of all deliverables as stipulated under the relevant Construction Work Stage (Work Stages 2, 3, 4 and 6) of the relevant gazettes as stated in point 10 above and corresponding FIDPM Stages (2 to 7), is a prerequisite for payment of said stage. Only Construction Work Stage 5 will receive interim payments on a quarterly basis based on the proportion of the value of construction work completed at the time of invoice.

Payment of disbursements is based on a proven cost basis only in accordance with the National Department of Public Works, Rates for Reimbursable Expenses. Further clauses relating to the claiming and payment of fees and disbursements are stated in under point 30 and C2. PRICING DATA.

Should deliverables as referenced under the Scope of Services (Section G, Item 10) not be required, fees will be adjusted downwards to align with the reduced scope of work.

Payment of fees shall be apportioned to Construction Work Stages (Stages 2-6) in accordance with the tables below:

Architecture (Principal Consultant and Principal Agent)

Stage 2	15%
Stage 3	20%
Stage 4	30%
Stage 5	27%
Stage 6	8%

Quantity Surveying

Stage 2	5%
Stage 3	7.5%
Stage 4	35%
Stage 5	45%
Stage 6	7.5%

Electrical Engineering

Stage 2	15%
Stage 3	20%
Stage 4	20%
Stage 5	35%
Stage 6	10%

Civil/Structural Engineering

Stage 2	25%
Stage 3	25%
Stage 4	15%
Stage 5	25%
Stage 6	10%

Construction Health and Safety

Stage 2	25%
Stage 3	25%
Stage 4	15%
Stage 5	25%
Stage 6	10%

26. Use of Documents by the Employer

Critical information, which will track the progress of the project, will be recorded and updated by the Lead Consultant on a monthly basis. These will be presented to the Employer as required by the Lead Consultant and other relevant professionals and may include but not be limited to the following documents:

- Progress reports
- Financial control methodology - cost reports and cash flows
- Risk registers including full risk assessments and mitigating action
- Issue registers including full analysis and action plans
- Project programmes

27. Mentorship of Employers Trainees / Interns

From time to time, the Employer may second trainees / interns to the Consultant/s. The Consultant/s shall provide structured mentorship and exposure to seconded trainees / interns. A training / activity schedule shall be prepared for each trainee / intern for the duration of his or her stay on the project. The schedule shall have clear targets and objectives, which will be measured at the end of the training period. The Consultant/s shall allocate a mentor for each trainee / intern who will be responsible for the learning outcomes for the period of secondment.

The mentorship and training falls beyond the Consultant/s obligations in terms of criteria under Section G – Specifications.

A separate training and mentorship agreement will be concluded with the Consultant/s at the time of placing trainees / interns.

28. Project Construction Cost

The estimated project works value is R 8 168 625.00 (Eight Million, One Hundred and Sixty Eight Thousand, Six Hundred and Twenty Five excluding VAT). The estimated project works value is an estimate and not the final value. The tendered PERCENTAGE will be based on the actual project works value upon project completion.

29. Cost and pricing of the project

Professional Fees for the team shall be tendered as a **PERCENTAGE** based on the value of the construction works. The percentage shall then be apportioned by percentage amongst the various professional disciplines. The percentage shall remain fixed for the entire project however the apportionment amongst the various disciplines may change should it be required. Changes to the apportionment are to be agreed by the Professional Team and the Employer is to be duly informed in writing by an official letter from the Principal Consultant, prior to any further payments. Disputes relating to the apportionment of total fees are to be resolved by the Professional Team.

The tendered percentage is to include for any and all surcharges applicable to the project for all professionals and **THE TENDERED PERCENTAGE SHALL REMAIN UNCHANGED FOR THE DURATION OF THE PROJECT**. All other adjustment of fees for each professional discipline will be regulated by the relevant Government Gazette (as stated in point 10 above).

Should deliverables as referenced under the Scope of Services (Section G, Item 7) not be required, fees will be adjusted downwards to align with the reduced scope of work

30. Project Details

30.1. You are requested to quote for the delivery of Lead Consultant Services, Principal Agent Services and the appointment of a Multi-disciplinary team, and their total costs, which should as a minimum consist of:

- Architect (Principal Consultant and Principal Agent)
- Quantity Surveyor
- Civil/Structural Engineer/Technologist
- Electrical Engineer/Technologist
- Construction Health and Safety Agent
- Land Surveyor (Appointed Post Award)
- Geotechnical Engineer/Technologist (Appointed Post Award)

The relevant Guidelines are as per the following:

Architect	South African Council for the Architectural Profession, Board Notice 122 of 2015, Government Gazette No. 38863, 12 June 2015
Quantity Surveyor	The South African Council for the Quantity Surveying Professions, Board Notice 170 of 2015, Government Gazette No. 39134 of 28 August 2015
Civil/Structural and Electrical Engineers/Technologists	Engineering Council of South Africa, Board Notice 138 of 2015, Government Gazette No. 39480, 04 December 2015
Construction Health and Safety	South African Council for the Project and Construction Management Professions, Board Notice 167 of 2019 Government Gazette No. 42697 of 13 September 2019

30.2. Consultants will be expected to attend all necessary meetings with various stakeholders as reasonably required.

30.3. Consultants will be expected to attend a minimum of two (2) site meetings per month during the construction stage. No full time supervision is required for the project and will not be compensated or remunerated for. The Lead Consultants are required to be on site as frequently as and when required per stage throughout the project.

30.4. Disbursements as published in the monthly National Department of Public Works "Rates for Reimbursable Expenses" shall be used as guideline. Discount can also be offered in this regards, but a maximum rate applicable shall be for vehicles up to 2150 cc.

30.5. Please note that total final fees payable will be calculated on final value of contract for "fee purposes" only or final contract cost estimates for "fee purposes" only - whichever may be applicable at the time.

30.6. You are requested to submit your bid using the FEE BASED QUOTE PROFORMA (Appendix A, Table 1), stamped utilizing your official company stamp and duly signed by the Registered Lead Professional who will be dedicated to this project and is based at the office address where the project is intended to be awarded.

31. Conditions Of Appointment

31.1. The Entity must have within their employment or display their ability to have access to the professional consultants as listed in paragraph 30.1 above. The Lead Consultant and

Architectural services cannot be outsourced and must be provided in-house by the bidding entity. Bidders are to provide a letter outlining the services to be provided in-house by the bidding entity, as well as letters of agreement securing Professional Services for those professional disciplines to be provided by others. Outsourced services agreement letters are to be signed by the bidder and the Principal of the outsourced firm and be on the bidder's official company letterhead. Furthermore, Form A must be completed confirming the firm and Registered Professional assigned to the project for each service/discipline.

- 31.2.** Upon project award, Consultants may only amend the list of the required Lead Professionals upon written replacement request to the Client. The replacement request will only be reviewed should the new Lead Professional be at the same level of qualification as the previously supplied name or better.
- 31.3.** Registered Professionals listed as the Lead Professional for each Professional discipline on the project (as per Form A) must play an active and visible role on the project. Lead Professionals must attend a minimum of 70% of all meetings. Failure to comply with this condition will constitute a breach of this contract.
- 31.4.** Consultants must submit all returnable documents as listed on Appendix B herein. Failure to submit all the requested documents will result in the bid not being considered.

32. Evaluation Criteria

The evaluation of bids will be conducted in three (3) phases:

PHASE 1: Responsiveness

- Correctness of bid document
- Compliance with SCM regulations (registration with Central Suppliers Database (CSD), Tax compliance, other prescripts requirements and submission of all documentation and information as per Appendix G)

PHASE 2: Eligibility and Quality/Functionality Evaluation

Eligibility Criteria

In order to be eligible to be awarded this bid, the following criteria MUST be satisfied:

- The professional multi-disciplinary team must consist of:
 - Professional Registered Architect (Lead Consultant/Principal Agent)
 - Professional Registered Quantity Surveyor
 - Professional Registered Civil/Structural Engineer/Technologist
 - Professional Registered Electrical Engineer/Technologist
 - Professional Registered Construction Health and Safety Agent

All Professionals are to be registered with the applicable South African regulating body/council for their Professional discipline. All Professional Leads must be Registered Professionals or Registered Professional Technologists. All Registered Professionals must be in good-standing with their respective council and their membership must be valid. ALL PROFESSIONAL LEADS MUST HAVE A MINIMUM OF 3 YEARS POST PROFESSIONAL REGISTRATION EXPERIENCE. THE PROFESSIONAL LEAD FOR CONSTRUCTION HEALTH AND SAFETY AGENT MUST HAVE A MINIMUM OF 1 YEAR POST PROFESSIONAL REGISTRATION EXPERIENCE.

Proof of Registration for each discipline shall be attached under the appropriate cover page provided under Appendix H. Failure to attach the valid Proof of Registrations in the provided designated

sections will render the bid non-responsive and result in the bid being excluded from further consideration.

- Proof of all the relevant valid Professional Indemnity Insurance must be provided as per the list below:
 - Architectural: R 2,0 million
 - Civil, Structural Engineering: R 2,0 million
 - Electrical: R 1,0 million
 - Quantity Surveyor: R 1,0 million
 - Health and Safety: R 1,0 million
 - Other: R 1,0 million

Proof of valid Professional Indemnity Insurance for each discipline shall be attached under the appropriate cover page provided under Appendix H. Failure to attach the valid Proof of Professional Indemnity Insurance in the provided designated sections will render the bid non-responsive and result in the bid being excluded from further consideration. Should the Lead Consultant have Professional Indemnity Insurance large enough to cover all disciplines, the insurance attachments should indicate all covered disciplines and be inserted under all the respective discipline sections.

Professional Indemnity Insurance for all Professionals is to remain valid and in force for the full duration of the project and for the minimum amounts stated above. Failure to provide proof of valid and compliant Professional Indemnity Insurance Policies for all consultants, at any stage during the project when requested, will result in termination of services and damages claimable.

All eligibility criteria returnables should be tabbed, labelled and included in the designated areas as per the instructions below.

Eligibility criteria	Documentation to be provided
<p>1. The professional multi-disciplinary team must consist of:</p> <ul style="list-style-type: none"> • Registered Professional Architect (Select one (1) Lead Consultant/Principal Agent as the main bidder) • Registered Professional Quantity Surveyor • Registered Professional Civil/Structural Engineer/Technologist • Registered Professional Electrical Engineer/Technologist <p>with a minimum of 3 years post professional registration experience.</p> <ul style="list-style-type: none"> • Registered Professional Construction Health and Safety Agent <p>with a minimum of 1 year post professional registration experience.</p>	<p>TAB LABEL: G-1</p> <p>Valid Proof of Registration (registered with the applicable South African regulating body/council for their Professional discipline) for each Professional Lead Member per discipline shall be attached under the appropriate cover page provided under Appendix H.</p> <p>Completed Form A (Appendix E)</p>

Eligibility criteria	Documentation to be provided
2. Proof of all the relevant valid Professional Indemnity Insurance must be provided as per the list below: <ul style="list-style-type: none"> • Architectural: R 2,0 million • Civil, Structural Engineering: R 2,0 million • Electrical: R 1,0 million • Quantity Surveyor: R 1,0 million • Health and Safety: R 1,0 million • Other: R 1,0 million 	TAB LABEL: G-2 Proof of valid Professional Indemnity Insurance for each discipline complying with the minimum amounts stated shall be attached under the appropriate cover page provided under Appendix H

ELIGIBILITY SUMMARY TABLE

NB: For Evaluation Committee use only

			Specific Project Eligibility Criteria			
			Professional Registration		Indemnity Insurance	
			Number of Years Post Registration Experience	Eligibility (Yes/NO)	Indemnity Amount Provided (R million)	Eligibility (Yes/NO)
Project Multi-disciplinary Team	1	Registered Professional Architect (Lead Consultant/Principal Agent)				
	2	Registered Professional Civil/Structural Engineer/Technologist				
	3	Registered Professional Quantity Surveyor				
	4	Registered Professional Electrical Engineer/Technologist				
	5	Registered Professional Construction Health and Safety Agent				
Comments:						

Quality/Functionality Criteria

Each bid is required to meet the minimum qualifying evaluation score of **70%** as per criteria below. All functionality/quality returnables should be tabbed, labelled and included in the designated areas as per the instructions below.

Evaluation criteria	Documentation to be provided
<p>1. Bidder to demonstrate Technical Competency and relevant Experience relating to general building and roofing works with a value of over R3 million in the past 10 years per discipline (5 disciplines i.e. Architectural, Quantity Surveying, Civil/Structural Engineering, Electrical Engineering, Construction Health and Safety)</p>	<p>TAB LABEL: H-1 - 75 points (see below for points breakdown)</p> <p>1.1 Bidder to complete one (1) Curriculum Vitae (CV) for the allocated Lead Professionals per discipline. The required CVs may be from different firms, one firm allocated per one or more discipline. The following conditions must be met to receive points in this category:</p> <p>1.1.1. CVs must be filled and submitted on the provided template and inserted under the provided cover pages as Appendix I. Please refer to Appendix F for the CV template. Documents requested in 1.1.4. are compulsory and are to be inserted under the provided cover pages as Appendix I.</p> <p>1.1.2. CVs to be provided for the Lead Professionals per discipline for a MINIMUM total of 5 CVs. Each Lead Professional's experience must align to their allocated discipline.</p> <p>1.1.3. CVs provided must align with the information submitted in Form A (Appendix E).</p> <p>1.1.4. Completion certificates per project MUST be provided to obtain points for the Lead Professional per discipline for their past project experience (Maximum 3 projects and relevant to the Lead Professional per discipline and must align with project experience stated on the CV). Their past experience is not required to be from their current bidding Lead Professional firms. Past projects may be referenced from the Lead Professional's former employer(s).</p> <p>1.2. Contractor award letters OR signed final account summaries OR signed reference letters from the client; clearly stating the project value, project start date and end date MUST be provided to prove value of projects. Maximum 3 projects and relevant to the Lead Professional per discipline and must align with project experience stated on the CV). Their past experience is not required to be from their current bidding Lead Professional firms. Past projects may be referenced from the Lead Professional's former employer(s).</p> <p>Documents requested in 1.1.4 and 1.2. are compulsory and are to be inserted under the provided cover pages as Appendix I.</p> <p>Only the first 3 stated past projects per professional CV will be evaluated as per the CV template. Failure to meet the requirements of points 1.1.1 to 1.1.3 above will result in 0 points being awarded per CV submitted.</p> <p><u>Allocation of points will be as follows:</u></p> <p>- 3 points will be awarded per completed compliant CV per discipline for each Lead Professional.</p>

Evaluation criteria	Documentation to be provided
	<p>- 0 points will be awarded for incomplete or no CV and completion certificates submitted on the required template and project experience that does not meet the above experience submission criteria.</p> <p><u>AND</u></p> <p>- 12 points will be awarded per past project that is of a general building and roofing works nature, is greater than R6 million in value and has been completed in the past 10 years, provided proof of value is submitted.</p> <p>- 6 points will be awarded per past project that is of a general building and roofing works and is between R6 million and R5 million in value and has been completed in the past 10 years, provided proof of value is submitted.</p> <p>- 3 points will be awarded per past project that is of a general building and roofing works, and is between R3 million and R5 million in value and has been completed in the past 10 years, provided proof of value is submitted.</p> <p>- 0 points will be awarded for per past project that is less than R3 million in value, incomplete or no past project experience documentation submitted, and projects that do not meet the above experience submission criteria.</p>
<p>2. Organogram of Resources Proposed for the Project per Professional Discipline</p>	<p>TAB LABEL: H-2 - 25 points (see below for points breakdown)</p> <p>2. One team organogram displaying the Architect (Principal Consultant) and the Lead Professionals per discipline that falls under the Principal Consultant as part of the Multi-disciplinary team. In addition, an organogram per discipline that sets out the roles of each proposed team member and states the name and Professional Registration Number of the Lead Professional for the Project (Information provided for the Lead Professional member must align with Form A) must be provided. The following conditions must be met to receive points in this category:</p> <p>2.1. One overall team organogram to be provided</p> <p>2.2. Five individual organograms, illustrating the organisation structure for all teams must be provided, 1 for each Professional Discipline i.e. Architectural, Quantity Surveying, Electrical Engineering, Civil/Structural Engineering and Construction Health and Safety.</p> <p>2.3. Organograms must be inserted under the provided cover page as Appendix I.</p> <p><u>Allocation of points will be as follows:</u></p> <p>- 5 points will be awarded for the submission of a team organogram detailing the Architect (Principal Consultant) and all other Lead Professionals per discipline.</p> <p>- 0 points will be awarded for no submission and irrelevant submissions.</p> <p><u>AND</u></p>

Evaluation criteria	Documentation to be provided
	<p>- 4 points will be awarded per organogram per discipline for fully completed organograms that comply fully with the above instructions.</p> <p>- 2 points will be awarded per organogram per discipline for organograms that partially comply with the above instructions.</p> <p>- 0 points will be awarded for no submission and irrelevant submissions.</p>

FUNCTIONALITY SCORING TABLE

NB: For Evaluation Committee use only

			Specific Project Functionality Criteria									
			CV's		Project Experience (Max. of 3 projects)			Multi-disciplinary Team Organogram		Individual Discipline Organogram		
			Maximum Points	Points Allocated	Maximum Points per project	Max Weighted Points	Points Allocated per project	Allocated Weighted Points	Maximum Points	Points Allocated	Maximum Points	Points Allocated
Project Multi-disciplinary Team	1	Registered Professional Architect (Lead Consultant/Principal Agent)	3		12	36 x 5 /3		5		4		
					12							
					12							
	2	Registered Professional Civil/Structural Engineer/Technologist	3		12						4	
					12							
					12							
	3	Registered Professional Quantity Surveyor	3		12						4	
					12							
					12							
	4	Registered Professional Electrical Engineer/Technologist	3		12						4	
				12								
				12								
5	Registered Professional Construction Health and Safety Agent	3		12				4				
				12								
				12								
Sub-Total 1 Points		15			60			5		20		
Sub-Total 2 Points	75				/25					
TOTAL SCORE	/100										

1. Eligible Y/N: _____ 2. Functionality points: _____/100 3. Above 70% threshold Y/N: _____ 4. Bid value: (Rands) _____

PHASE 3: Price and Preference

- Tendered Price
- Evaluation using the Point System

The following special conditions are applicable to the evaluation of this tender:

- The Department reserves the right not to award to the lowest bidder.
- The Department will conduct a detailed risk assessment prior to the award.

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

This preference form must form part of all bids invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (BBBEE) 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.

33. General conditions

33.1. The following preference point system are applicable to this bids:

The 80/20 preference point system will be applicable to this tender

33.2. Points for this bid shall be awarded for:

- Price; and
- B-BBEE Status Level of Contributor.

33.3. The maximum points for this bid are allocated as follows:

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

33.4. Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the bid, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.

33.5. The purchaser reserves the right to require of a bidder, either before a bid is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

34. Definitions

“B-BBEE” means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic Empowerment Act;

“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;

“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 bids, advertised competitive bidding processes or proposals;

“Broad-Based Black Economic Empowerment Act” means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003);

“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;

“functionality” means the ability of a bidder to provide goods or services in accordance with specifications as set out in the tender documents.

“prices” includes all applicable taxes less all unconditional discounts;

“proof of B-BBEE status level of contributor” means:

- B-BBEE Status level certificate issued by an authorized body or person;
- A sworn affidavit as prescribed by the B-BBEE Codes of Good Practice;
- Any other requirement prescribed in terms of the B-BBEE Act;

“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;

“rand value” means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

35. Points awarded for price

The 80/20 Preference Point System

A maximum of 80 points is allocated for price on the following basis:

80/20

$$P_s = 80 \left(1 - \frac{P_t - P_{\min}}{P_{\min}} \right)$$

Where

P_s = Points scored for price of bid under consideration
 P_t = Price of bid under consideration
 P_{\min} = Price of lowest acceptable bid

36. Points Awarded for BBEE Status Level of Contributor

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 BBEE status level of contribution in accordance with the table below:

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

Bid Declaration

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

BBEE Status Level Of Contributor Claimed:

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.

37. Sub-Contracting

Will any portion of the contract be sub-contracted?

(Tick applicable box)

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

37.1.1. If yes, indicate:

- i. What percentage of the contract will be subcontracted % _____
- ii. The name of the sub-contractor _____
- iii. The B-BBEE status level of the sub-contractor _____

iv. Whether the sub-contractor is an EME or QSE

(Tick applicable box)

YES		NO	
-----	--	----	--

v. 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 least 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		

38. Declaration with regard to Company/Firm

38.1. Name of company/firm:

.....

38.2. VAT registration number:

.....

38.3. Company registration number:

.....

38.4. Type of Company/ Firm

(Tick applicable box)

<input type="checkbox"/>	One-person business/sole propriety
<input type="checkbox"/>	Company
<input type="checkbox"/>	Partnership/Joint Venture / Consortium
<input type="checkbox"/>	Close corporation
<input type="checkbox"/>	(Pty) Limited

38.5. Describe principal business activities

38.6. Company classification

(Tick applicable box)

<input type="checkbox"/>	Manufacturer
<input type="checkbox"/>	Supplier
<input type="checkbox"/>	Professional service provider
<input type="checkbox"/>	Other service providers, e.g. transporter, etc.

38.7. Total number of years the company/firm has been in business:

I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the B-BBEE 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. The information furnished is true and correct;
- ii. The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- 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 B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or

any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have –

- disqualify the person from the bidding process;
- recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
- cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;
- recommend that the bidder or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted by the National Treasury from obtaining business from any organ of state for a period not exceeding 10 years, after the audi alteram partem (hear the other side) rule has been applied; and
- forward the matter for criminal prosecution.

Signature/s of Bidder/s
Date
Address:

Signature/s of Witnesses
Witness 1:
Witness 2:

SECTION H
OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE

Bid No:	ZNB 5783/2022-H
Service:	APPOINTMENT OF A MULTI-DISCIPLINARY PROFESSIONAL TEAM FOR THE REPLACEMENT OF RAINWATER GOODS, CEILINGS, ELECTRICAL WORKS, ASBESTOS AND CORRUGATED IRON ROOFS AT TOWNHILL HOSPITAL
Date:	09 November 2022
Time:	10:00
Venue:	35 Hyslop Road, Townhill Office Park (inside Townhill Hospital) – Block 1 Boardroom 2 and 3, Townhill, Pietermaritzburg, 3200

This is to certify that

.....
 (name)

On behalf of

.....
 Visited and inspected the site on

.....
 (date)

And is therefore familiar with the circumstances and the scope of the service to be rendered.

Signature/s of Bidder/s
.....
(Print Name)
.....
Date:

Departmental Representative
.....
(Print Name)
.....
Departmental Stamp (Optional)
.....
Date:

SECTION I

TAX COMPLIANCE STATUS (TCS)

1. The State / Province may not award a contract resulting from the invitation of bids to a bidder who is not properly registered and up to date with tax payments or, has not made satisfactory arrangements with SA Revenue Services concerning due tax payments.
2. The South African Revenue Services (SARS) has phased out the issuing of paper Tax Clearance Certificates. From 18 April 2016, SARS introduced an enhanced Tax Compliance system. The new system allows taxpayers to obtain a Tax Compliance Status (TCS) PIN, which can be utilized by authorized third parties to verify taxpayers' compliance status on line via SARS e-filing.
3. Bidders are required to apply via e-filing at any SARS branch office nationally. The Tax Compliance Status (TCS) requirements are also available to foreign bidders / individuals who wish to submit bids.
4. SARS will then furnish the bidder with a Tax Compliance Status (TCS) PIN that will be valid for a period of 1 (one) year from the date of approval.
5. In bids where Consortia / Joint Venture / Sub-contractors are involved, each party must submit a separate Tax Compliance Status (TCS) PIN.
6. Application for Tax Compliance Status (TCS) PIN can be done via e-filing at any SARS branch office nationally or on the website www.sars.gov.za.
7. Tax Clearance Certificates may be printed via e-filing. In order to use this provision, taxpayers will need to register with SARS as an e-Filer through the website www.sars.gov.za.
8. Tax Compliance Status is not required for services below R 30 000.00 ITO Practice Note Number: SCM 13 of 2007.
9. Kindly either provide an original tax clearance certificate, your tax number or pin number.

TAX NUMBER:

PIN NUMBER:

SECTION J
AUTHORITY TO SIGN A BID

A Companies

If a Bidder is a company, a certified copy of the resolution by the board of directors, personally signed by the chairperson of the board, authorising the person who signs this bid to do so, as well as to sign any contract resulting from this bid and any other documents and correspondence in connection with this bid and/or contract on behalf of the company must be submitted with this bid, that is before the closing time and date of the bid

Authority by Board of Directors

By resolution passed by the Board of Directors on

.....
(date)

.....
(name and whose signature appears below)

has been duly authorised to sign all documents in connection with this bid on behalf of

.....
(Name of Company)

In his/her capacity as:

.....
Signed on behalf of Company:

.....
(print name)

.....
Signature of signatory:

.....
Date:

Witnesses:

1.

2.

B Sole proprietor (one - person business)

I, the undersigned

.....
(name)

Hereby confirm that I am the sole owner of the business trading as

.....
(name)

.....
Signature of signatory:

.....
Date

C Partnership

The following particulars in respect of every partner must be furnished and signed by every partner:

Full name of partner	Residential address	Signature

We, the undersigned partners in the business trading as

.....
(name)

hereby authorized

.....
(name)

to sign this bid as well as any contract resulting from the bid and any other documents and correspondence in connection with this bid and /or contract on behalf of:

.....
(print name)

.....
Signature of signatory:

.....
Date:

.....
(print name)

.....
Signature of signatory:

.....
Date:

.....
(print name)

.....
Signature of signatory:

.....
Date:

D Close Corporation

In the case of a Close Corporation submitting a bid, a certified copy of the Founding Statement of such corporation shall be included with the bid, together with the resolution by its members authorising a member or other official of the corporation to sign the documents on their behalf.

Authority to sign on behalf of the Close Corporation

By resolution of members at a meeting on

(date)

(name and whose signature appears below)

has been duly authorised to sign all documents in connection with this bid on behalf of

(Name of Closed Corporation)

In his/her capacity as:

Signed on behalf of Closed Corporation:

(print name)

Signature of signatory:

Date:

Witnesses:

1.

2.

E Co-Operative

A certified copy of the Constitution of the Co-operative must be included with the bid, together with the resolution by its members authoring a member or other official of the co-operative to sign the bid documents on their behalf.

Authority to sign on behalf of the Co-Operative

By resolution of members at a meeting on

(date)

(name and whose signature appears below)

has been duly authorised to sign all documents in connection with this bid on behalf of

(Name of Co-Operative)

In his/her capacity as:

Signed on behalf of Co-Operative:

(print name)

Signature of signatory:

Date:

Witnesses:

1.

2.

F Joint Venture

If a bidder is a joint venture, a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of the enterprises, authorising the representatives who sign this bid to do so, as well as to sign any contract resulting from this bid and any other documents and correspondence in connection with this bid and/or contract on behalf of the joint venture must be submitted with this bid, before the closing time and date of the bid.

Authority to sign on behalf of the Joint Venture

By resolution/agreement passed/reached by the Joint Venture partners on

.....
(date)

.....
(name and whose signature appears below)

.....
(name and whose signature appears below)

.....
(name and whose signature appears below)

.....
(name and whose signature appears below)

has been duly authorised to sign all documents in connection with this bid on behalf of

.....
(Name of Joint Venture)

In his/her capacity as:

.....
Signed on behalf of Joint Venture:

.....
(print name)

.....
Signature of signatory:

.....
Date:

.....
(print name)

.....
Signature of signatory:

.....
Date:

.....
(print name)

.....
Signature of signatory:

.....
Date:

.....
(print name)

.....
Signature of signatory:

.....
Date:

G Consortium

If a bidder is a Consortium, a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of concerned enterprises, authorising the representatives who sign this bid to do so, as well as to sign any contract resulting from this bid and any other documents and correspondence in connection with this bid and/or contract on behalf of the consortium must be submitted with this bid, before the closing time and date of the bid.

Authority to sign on behalf of the Consortium

By resolution of the members on

.....
(date)

.....
(name and whose signature appears below)

has been duly authorised to sign all documents in connection with this bid on behalf of

.....
(Name of Consortium)

In his/her capacity as:

.....
Signed on behalf of Consortium:

.....
(print name)

.....
Signature of signatory:

.....
Date:

.....
(print name)

.....
Signature of signatory:

.....
Date:

(print name)

Signature of signatory:

Date:

APPENDICES

APPENDIX A - BID PROFORMA

(To be completed by the Lead Consultant)

General Notes -

- Bidders are requested to complete Table 1 and Table 2 of Appendix A. The total fees from Table 1 must be carried to the **FORM OF OFFER**.
- Preference Points and Total Percentage offered take precedence over any additional detailed fee calculations submitted where there is any ambiguity.
- Bidders are to tender a total percentage (to 2 decimal places) for the entire team based on the value of work for fees estimate. This percentage will remain fixed throughout the project and is deemed to include for any surcharges due to alterations works and for Principal Consultant and Principal Agent Fees.
- Disbursements shall be allowed for as stipulated in Table 1 but shall be claimed and paid on a **PROVEN COST BASIS ONLY**. The Land Surveyor and Geotechnical Engineer/Technologist will be paid from the disbursement allowance. Disbursement rates as published in the monthly National Department of Public Works "Rates for Reimbursable Expenses" shall be used for claiming when required.
- The estimated Value of Work for Fees is an estimate and not the final value. The tendered **PERCENTAGE** will be based on the actual project works value determined upon project completion.
- Table below is **NOT** to be modified by Tenderer

TABLE 1

Value of Work	R 8 168 625.00
Total Tendered Fee Percentage for Team (to 2 decimal places)	%
Total Fees for Team	
ADD Allowance for Disbursements	R 308 431.25
Sub-Total 1	
ADD VAT at 15%	
GRAND TOTAL (to be carried to the Form of Offer and Acceptance)	R

COMPANY STAMP:

DATE:

TABLE 2 – APPORTIONMENT OF FEES

Principal Consultant / Principal Agent / Architect	%
Quantity Surveyor	%
Civil/Structural Engineer/Technologist	%
Electrical Engineer/Technologist	%
Construction Health and Safety	%
TOTAL TENDERED FEE PERCENTAGE FOR TEAM (to 2 decimal places)	%

COMPANY STAMP:

DATE:

APPENDIX B – RETURNABLE DOCUMENTS

CHECKLIST OF RETURNABLE DOCUMENTS			
Item No.	Required Documents	Tick	
		Yes	No
Please ensure the following items are fully completed and complied with:			
1.	Bid from the Consultant (Attach Appendix A – Stamped and dated)		
2.	Central Supplier Database Registration with National Treasury (Unique Reference Number & Supplier Number)		
3.	Declaration that information on central supplier database is correct and up to date		
4.	Bidders Disclosure – SBD 4		
5.	Official Briefing Session / Site Inspection Certificate *		
6.	Valid SARS Tax Clearance Pin Number, Tax number or original tax Clearance certificate (Tax clearance certificate to be included under Appendix G)		
7.	Authority To Sign A Bid		
The following documents are to be submitted under Appendix: G			
8.	Proof of Registration with Companies and Intellectual Property Commission (CIPC)		
9.	Original certified copy of BBBEE Certificate		
10.	Proof of Residential Address (Municipality Rates Bills, Telephone Bill, or current lease agreement letter from Ward councillor or affidavit from Commissioner of oaths, if office is in an area where rates are not paid)		
The following documents are to be submitted under Appendix H under the relevant cover pages:			
11.	Proof of Registration with Council / Professional Body for all Lead Professionals (Attach Letter of Good standing with the relevant council if applicable dated during the year of Bid)		
12.	Proof of the relevant professional Indemnity Insurance – Architectural: R 2,0 million Civil/ Structural Engineering: R 2,0 million Electrical Engineering: R 1,0 million Quantity Surveyor: R 1,0 million Health and Safety: R 1,0 million Other: R 1,0 million		
The following documents are to be submitted under Appendix I under the relevant cover pages:			
13.	CVs per Lead Professional including supporting documentation (completion certificates and award letters / signed final accounts / reference letters)		
14.	Organograms for entire team and one for each Professional Discipline Team		

BIDDERS TO NOTE

Submission of the above returnable documents is mandatory. Failure to submit all the requested documents will result in the tender not being considered.

* A letter indicating which discipline's firm attended the brief meeting on behalf of which Lead Architect firm should be appended to the Briefing Session Certificate. The letter should be signed by both the attendee and Lead Architect.

APPENDIX C - CONTRACT DATA

C1. Contract Data

C1.1 Standard Professional Services Contract

The conditions applicable to this Contract are the Standard Professional Services Contract (July 2009) Third Edition of CIDB document 1015, published by the Construction Industry Development Board.

C1.1.1 Data provided by the Employer

Clause	
	<p>The General Conditions of Contract in the Standard Professional Services Contract (July 2009) make several references to the Contract Data for details that apply specifically to this tender. The Contract Data shall have precedence in the interpretation of any ambiguity or inconsistency between it and the General Conditions of Contract.</p> <p>Each item of data given below is cross-referenced to the clause in the General Conditions of Contract to which it mainly applies.</p>
	The Employer is the KZN Department of Health.
3.4 and 4.3.2	The authorised and designated representative of the Employer is the departmental project manager, details of whom are as indicated in the Notice and Invitation to Tender.
1	The Project is for the provision of complete Professional Consultancy (including Lead Consultancy) Services for APPOINTMENT OF A MULTI-DISCIPLINARY PROFESSIONAL TEAM FOR THE REPLACEMENT OF RAINWATER GOODS, CEILINGS, ELECTRICAL WORKS, ASBESTOS AND CORRUGATED IRON ROOFS AT TOWNHILL HOSPITAL
1	The Period of Performance is from inception of this Contract until the Service Provider has completed all Deliverables in accordance with the Scope of Services listed in Section G of the bid document.
1	The Start Date is the date from which this contract is fully signed and accepted by the KZN Department of Health
3.4.1	Communications by facsimile is not permitted.
3.5	The Services shall be executed in the Service Provider's own office and on the Project site as described in Section G. No portion of the work may be performed by a person employed by the State. No portion of the work may be sublet to any other person or persons without the prior written approval of the Employer.
3.6	Omit the following: “... within two (2) years of completion of the Service ...”.
3.12	<p>Period of Performance shall be sub dividable in separate target dates according to the programme to be submitted in terms of SECTION G part 12 hereof.</p> <p>A Penalty amount of R500.00 per day will be applicable per target date, to a maximum equal to R50,000.00, after which the contract may be terminated.</p>
3.15.1	The programme shall be submitted within 14 days of the award of the contract.
3.15.2	The Service Provider shall update the programme at intervals not exceeding 8 weeks.
3.16	Time-based fees are not applicable to this appointment and therefore no adjustments for inflation are applicable.
5.4.1	The Service Provider is required to provide professional indemnity cover as set out in the Professional Indemnity Schedule as per point 12 of Appendix B.

Clause	
5.5	The Service Provider is required to obtain the Employer's prior approval in writing before taking any of the following actions: a) Deviate from the programme (delayed or earlier); b) Deviate from or change the Scope of Services; c) Change Key Personnel on the Service.
8.1	The Service Provider is to commence the performance of the Services immediately after the Contract becomes effective and execution to be as per the programme.
8.4.3 (c)	The period of suspension under clause 8.5 is not to exceed two (2) years.
9.1	Copyright of documents prepared for the Project shall be vested with the Employer.
12.1.	Interim settlement of disputes is to be by mediation.
12.2. / 12.3.	Final settlement is by litigation.
12.2.1	In the event that the Parties fail to agree on a mediator, the mediator is to be nominated by the president of the Association of Arbitrators (Southern Africa).
13.1.3	All partners in a joint venture or consortium shall carry the same professional indemnity insurance as per clause 5.4.1 of the General Conditions of Contract.
13.5.1	The amount of compensation is unlimited.
13.6	The provisions of 13.6 do not apply to the Contract.
15	In respect of any amount owed by the Service Provider to the Employer, the Service Provider shall pay the Employer interest at the rate as determined by the Minister of Finance, from time to time, in terms of section 80(1)(b) of the Public Finance Management Act, 1999 (Act No 1 of 1999).

C1.2.3 Data provided by the Service Provider

Clause	
	Each item of data given below is cross-referenced to the clause in the General Conditions of Contract to which it mainly applies.
1	The Service Provider is the company, close corporation, natural person, consortium, joint venture or partnership named in Form of Offer and Acceptance by the tendering Service Provider.
5.3	The authorised and designated representative of the Service Provider is the Lead Consultant / Professional Architect named on the Project by the Service Provider
5.4.1	<p>Indemnification of the Employer</p> <p>I, the undersigned, being duly authorized by the Service Provider, in terms of the completed resolution</p> <p>.....</p> <p>(Name of authorized person)</p> <p>hereby confirm that the Service Provider known as:</p> <p>.....</p> <p>(Legal name of entity tendering herein)</p>

Clause	
5.4.1	<p>Tendering on the project:</p> <p>.....</p> <p>(Name of project as per Form of Offer and Acceptance)</p> <p>holds professional indemnity insurance cover, from an approved insurer, duly registered with the Finance Services Board, of not less than the amount required as cover relative to the size of project, with the first amount payable not exceeding 5% of the value of indemnity. I further confirm that the Service Provider will keep such professional indemnity fully subscribed. I further confirm that should the professional indemnity insurance, with no knowledge of the Employer, be allowed to lapse at any time or in the event of the Service Provider cancelling such professional indemnity insurance, with no knowledge of the Employer, at any time or if such professional indemnity cover is not sufficient, then the Service Provider,</p> <ul style="list-style-type: none"> i. accepts herewith full liability for the due fulfilment of all obligations in respect of this Service; and ii. hereby indemnifies, and undertakes to keep indemnified, the Employer in respect of all actions, proceedings, liability, claims, damages, costs and expenses in relation to and arising out of the agreement and/or from the aforesaid Service Provider's intentional and/or negligent wrongful acts, errors and/or omissions in its performance on this Contract. <p>I confirm that the Service Provider undertakes to keep the Employer indemnified, as indicated above, beyond the Final Completion Certificate/Final Certificate by the Employer (whichever is applicable) for a period of five (5) years after the issue of such applicable certificate.</p> <p>I confirm that the Service Provider renounces the benefit of the <i>exceptionis non causa debiti, non numeratae pecuniae</i> and <i>excussionis</i> or any other exceptions which may be legally raised against the enforceability of this indemnification.</p> <p>Notwithstanding the indemnification required above, the Employer reserves the right to claim damages from the Service Provider for this Project where the Service Provider neglects to discharge its obligations in terms of this agreement.</p>
	<p>Name:</p> <p>.....</p> <p>Signature:</p> <p>.....</p> <p>Capacity:</p>

Clause			
7.1.2	<p>As an extension of the definitions contained in clause 1 hereof, Key Persons must, for the purposes of this Contract, include one or more of the professionally registered principal(s) of the Service Provider, and/or, one or more professional(s) employed to render professional services, for whom certified copies of certificates or other documentation clearly proving current professional registration with the relevant council, including registration numbers, must be included with the tender as part of the returnable documentation.</p> <p>The Key Persons and their jobs / functions in relation to the Services are:</p>		
	Name	Principal employed and/or professional(s)	Specific duties
	1.		
	2.		
	3.		
	4.		
	5.		
	6.		
	7.		
	8.		
	9.		
10.			
7.2	A Personnel Schedule is not required.		
	<p>If the space provided in the table above is not sufficient to describe the specific duties, this space may be utilized for such purpose</p>		

C2: PRICING DATA

C2.1 Pricing Instructions

C2.1.1 Basis of remuneration, method of tendering and estimated fees

C2.1.1.1 Professional fees for the Multi-Disciplinary Services will be paid on Value basis.

The words “value based” and “percentage based” used in connection with fee types in this document or any documents referred to in this document are interchangeable and are deemed to have the same meaning.

C2.1.1.2 Tenderers are to tender:

A value based fee utilizing the stated estimated project construction value multiplied by a fixed tendered percentage which is then apportioned amongst the multi-disciplinary team.

C2.1.1.3 The amount tendered herein (*Section F – Form of Offer and Acceptance*) is for tender purposes only and will be amended according to the application of the actual cost of construction.

C2.1.1.4 Reimbursable rates for typing, printing and duplicating work shall be in accordance with the conditions laid out under section C2.1.5

C2.1.1.5 Disbursements in respect of all travelling expenses will not be paid for separately except for attending off-site meetings (outside of Townhill Hospital and Townhill Office Park) at the request of the employer where only travelling costs (mileage only) shall be claimable in accordance with the rules set out in C2.1.6.3. Please note that no travelling time and subsistence charges are claimable for any trips taken by the Consultants.

The site must be visited as often as the works require for the execution of all duties on the Project. The Service Provider must be available at 24 hours' notice to visit the site if so required. All costs in this regard will be deemed to be included in the tendered fees as stated in C2.1.1.1

C2.1.1.6 N/A

C2.1.1.7 All fee accounts need to be signed by a principal of the Service Provider and submitted in original format, failing which the accounts will be returned. Copies, facsimiles, electronic and other versions of fee accounts will not be considered for payment.

C2.1.1.8 For all Services provided on a time basis, time sheets giving full particulars of the work, date of execution and time duration, should be submitted with each fee account.

C2.1.1.9 Payments to the Service Provider will be made electronically according to the banking details furnished by the Service Provider. Any change in such banking details must be communicated to the departmental project manager timeously. Fee accounts, correct in all respects, will be deemed submitted when received by the Employer and settled when electronically processed by the Employer. The Employer reserves the right to dispute the whole account, any item or part of an item at any time and will deal with such case in terms of clause 14.3 of the General Conditions of Contract.

- C2.1.1.10 Accounts for Services rendered may be submitted on the successful completion of each stage of work. Interim accounts will only be considered during the construction stage of the works and then not more frequently than quarterly except if otherwise agreed between the authorised and designated representative of the Service Provider and the Employer. Payment of accounts rendered will be subject to the checking thereof by the departmental project manager. The Employer reserves the right to amend the amounts claimed in order to conform to the rates stipulated in this Contract and make payment on the basis of the balance of the account in accordance with clause 14.3 of the General Conditions of Contract.
- C2.1.2 Value based fees
- C2.1.2.1 Fees for work done under a value based fee shall be calculated according to the tendered percentage for fees for the team and apportioned to construction stages (for each professional discipline) as stated in this document.
- C2.1.2.2 Interim payments to the Service Provider
For the purposes of ascertaining the interim payments due, the cost of the works, which shall exclude any provisional allowances made to cover contingencies and escalation, shall be:
- the applicable portion of the net amount of the accepted tender
- C2.1.2.3 Fees for documentation for work covered by a provisional sum
Where a provisional sum is included in the bills of quantities for work to be documented at a later stage, the documentation fee in respect of such work shall be remunerated at the time when the documentation has been completed.
- C2.1.2.4 Time charges for work done under a value based fee (upon approval by Head of Health)
Time charges are reimbursable at rates applicable at the time of the actual execution of the specific service adjustable utilizing the discount for time based fees offered within the tender document. The "Rates for Reimbursable Expenses" as amended from time to time and referred to below, is obtainable on the Website: <http://www.publicworks.gov.za/> under "Documents"; "Consultants Guidelines"; item 1.
- C2.1.2.5 Unless otherwise specifically agreed in writing, remuneration for the time expended by principals in terms of time based fees on a project shall be limited to 5 per cent of the total time expended for time charges in respect of the Project. Any time expended by principals in excess of the 5 per cent limit shall be remunerated at the rates determined in (ii) or (iii) above.
- C2.1.3 Additional Services
- C2.1.3.1 Additional Services pertaining to all Stages of the Project
Unless separately provided for hereunder and scheduled in the Activity Schedule, no separate payment shall be made for the additional services specified in the relevant tariff of fees guide. The cost of providing these services shall be deemed to be included in the value based fee tendered for normal services.
- C2.1.3.2 Occupational Health and Safety Act, 1993 (Act No. 85 of 1993)
No separate payment shall be made. The cost of providing this service shall be deemed to be included in the value based fee tendered for normal services.
- C2.1.3.3 Quality Assurance System
No separate payment shall be made for the implementation of a quality management system. The cost of providing this service shall be deemed to be included in the value based fee tendered for normal services.

- C2.1.3.4 Lead Consulting Engineer/Technologist
No separate payment shall be made for assuming the leadership of an Employer specified joint venture, consortium or team of consulting Engineer/Technologists. The cost of providing this service shall be deemed to be included in the value based fee tendered for normal services.
- C2.1.3.5 Principal Agent of the Client
No separate payment shall be made for assuming the role of principle agent. The cost of providing this service shall be deemed to be included in the value based fee tendered for normal services.
- C2.1.3.6 Environmental Impact Assessment
Not applicable
- C2.1.4 Set off
The Employer reserves the right to set off against any amount payable to the Service Provider, any sum which is owing by the Service Provider to the Employer in respect of this or any other project.
- C2.1.5 Typing, printing and duplicating work
- C2.1.5.1 Reimbursable rates
The costs of typing, printing and duplicating work in connection with the documentation which must of necessity be done, except those which must in terms of the relevant Manual or other instructions be provided free of charge, shall be reimbursable at rates applicable at the time of the execution of such work. The document "Rates for Reimbursable Expenses" as amended from time to time and referred to below, is obtainable on the Website: : <http://www.publicworks.gov.za/> under "Documents"; "Consultants Guidelines"; item 1.
- C2.1.5.2 Typing and duplicating
If the Service Provider cannot undertake the work himself, he may have it done by another service provider which specializes in this type of work and he shall be paid the actual costs incurred upon submission of statements and receipts which have been endorsed by him confirming that the tariff is the most economical for the locality concerned subject to the maximum tariffs per A4 sheet as set out in Table 1 in the "Rates for Reimbursable Expenses".
- If the Service Provider undertakes the work himself, he shall be paid in respect of actual expenses incurred subject to the maximum tariffs per A4 sheet as set out in Table 1 in the "Rates for Reimbursable Expenses".
- Typing and duplicating expenses shall only be refunded in respect of the final copies of the following documents namely formal reports, formal soil investigation reports, specifications, feasibility reports, bills of quantities, material lists, minutes of site meetings and final accounts. The cost of printed hard covers shall only be paid in respect of documents which will be made available to the public such as bills of quantities and specifications or where provision of hard covers is specifically approved.
- The typing of correspondence, appendices and covering letters are deemed to be included in the value based fees and time based fees paid.
- C2.1.6 Travelling and subsistence arrangements and tariffs of charges
Notwithstanding the ruling in C2.1.1.5 above, when the Service Provider is requested in writing by or obtained prior approval in writing from the Employer to attend specific off-site meetings at any of the Employer's offices or any extraordinary meetings on site or elsewhere, he will be remunerated according to the provisions under C2.1.6.1 to C2.1.6.3 herein.

C2.1.6.1 General

The most economical mode of transport is to be used taking into account the cost of transport, subsistence and time. Accounts not rendered in accordance herewith may be reduced to an amount determined by the Employer.

As the tariffs referred to hereunder are adjusted from time to time, accounts must be calculated at the tariff applicable at the time of the expenditure.

Where journeys and resultant costs are in the Employer's opinion related to a Service Provider's mal- performance or failure, in terms of this Contract, to properly document or co-ordinate the work or to manage the Contract, no claims for such costs will be considered.

C2.1.6.2 Travelling time

No travelling time shall be paid on this project.

C2.1.6.3 Travelling costs

Travel costs will only be considered where the Service Provider has been requested to attend an off-site meeting with the destination being further than **50km** (one way) from the Service Provider's office. Travelling costs will be paid in the form of a disbursement for mileage.

Compensation for the use of private motor transport will be in accordance with the Government tariff for the relevant engine swept volume, up to a maximum of 2150 cubic centimetres, prescribed from time to time and as set out in Table 3 in the "Rates for Reimbursable Expenses".

C2.2 Activity Schedule

C2.2.1 Activities

C2.2.1.1 For services where the apportionment of fees is not provided for in SECTION G, proportioning of the fee for normal services over the various stages shall be as set out in the relevant Government Gazetted Tariffs.

C2.2.1.2 The tenderer must make provision for all activities necessary for the execution of the service as set out in the Scope of Services.

APPENDIX D: PROJECT BRIEF



KWAZULU-NATAL PROVINCE

**HEALTH
REPUBLIC OF SOUTH AFRICA**

**KWAZULU-NATAL
DEPARTMENT OF HEALTH
INFRASTRUCTURE DEVELOPMENT**

27 JUL 2022

DIRECTORATE

ENGINEERING AND TECHNICAL SERVICES

Physical Address: Townhill Offices, 35 Hyslop Road, Pietermaritzburg, 3201
Postal Address: Private Bag X9051, Pietermaritzburg, 3200
Tel: 033 940 2519 Email: Takalani.Netshipale@kznhealth.gov.za

www.kznhealth.gov.za

MINOR WORKS & MINOR ENGINEERING INSTALLATIONS BRIEF

**TOWNHILL HOSPITAL: REPLACEMENT OF RAINWATER DRAINAGE GOODS,
CEILINGS, ELECTRICAL WORKS, ASBESTOS AND CORRUGATED IRON ROOFS**

Drafted by: TL Netshipale
Candidate Civil Engineer

Signed:
Date: 27/07/2022

Reviewed by: M Ngcobo
Civil/Structural Engineer:
Engineering and Technical
Support Services

Signed:
Date: 27/07/2022

Recommended by: K Thabethe
Acting Director:
Engineering and Technical
Support Services

Signed:
Date: 27/07/2022

Approved by: S.T. Mhlongo
Chief Director:
Infrastructure Development

Signed:
Date: 28/07/2022

Document Control

Revision Number	Date	Initials

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1. Project Details

1.1. The Facility

- Facility Name : Townhill Hospital
- Facility Number : F002329
- Facility Type : Hospital- Psychiatric
- Facility Owner : Government - Provincial

1.2. Location

- Province: Kwa-Zulu Natal
- District Municipality: Umgungundlovu (DC22)
- Local Municipality: The Msunduzi Municipality
- Ward:25
- Cadastral description:
 - Latitude: -29.590,
 - Longitude: 30.366
- Street address (or directions): 35 Hyslop Road, Pietermaritzburg, 3201
- Postal address: PO Box 400, Pietermaritzburg. 3200
- Telephone number: (033) 341 5500

1.3. The Project / Programme details

- Project Name: Townhill Hospital: Replacement Of Rainwater Goods, Ceilings, Electrical Works, Retaining Wall And Asbestos And Corrugated Iron Roofs At Townhill Hospital
- KZN-DOH Project Number: TOWN020
- Project Code: N/A
- Project Details / Scope: Replacement Of Rainwater Goods, Ceilings, Electrical Works, Retaining Wall And Asbestos And Corrugated Iron Roofs At Townhill Hospital
- Project Type: Infrastructure Development- Projects
- Budget Programme Number: Programme 8
- Budget Programme Name: Health Facilities Programme
- Sub-programme: N/A
- Infrastructure Programme Name: Not Part of the Programme
- Nature of Investment: Upgrading and Additions
- Nature of Investment Sub- status: Upgrading
- IRM Infrastructure Category: DOH- Upgrading
- IRM Infrastructure Type: Secondary

1.4. Project Team

1.4.1. KZN Department of Health

1.4.1.1. Infrastructure Development

- Project Leader: TL Netshipale
- Architect: P. Chowthee, Pr QS
- Quantity Surveyor: L Madonsela, Pr QS
- Electrical Engineer: S Ngema, Pr Eng
- Mechanical Engineer: N/A
- Civil/Structural Engineer: M Ngcobo, Pr Eng
- Occupational Health & Safety: S Ngcobo
- Quality Assurance: N/A
- Organisational Development: N/A
- Monitoring & Evaluation: Z Thwala
- Health Technology: N/A

1.4.1.2. Department of Health – General

Below are the contact details for the district personnel.

Table 1-1: Department of Health – General Contact Details

Name	Designation	Contact Details
Dr MT Zulu	District Director	(033) 897 1000 Thandeka.Zulu@kznhealth.gov.za
Mr J Human	District Engineer	(033) 897 1000 Jan.Human@kznhealth.gov.za

1.4.2. Oversight Team

- **Provincial Champion:** Mr S.T. Mhlongo (Acting Chief Director Infrastructure Development)
- **Provincial Power User:** Ms M De Goede (Director: Infrastructure Planning)
- **Project Sponsor:** Mr S.T. Mhlongo (Acting Chief Director Infrastructure Development)
- **Project Control Group:** Infrastructure Development
- **Project Approver:** Mr S.T. Mhlongo (Acting Chief Director Infrastructure Development)
- **Project Verifier:** Ms M De Goede (Director: Infrastructure Planning)

1.4.3. Stakeholders

Challenge Members include:

- National Department of Health
- Provincial Treasury
- Applicable Municipalities
- Organised Labour
- Local Councillor
- Project Steering Committee
- Special interest groups

1.4.4. Implementing Agent - DoH

- Project Coordinator/Leader: TL Netshipale
- Implementing Agent Champion: ST Mhlongo
- Project Monitor: Zama Thwala
- Professional Service Providers
 - Architect – To be procured
 - Civil/Structural Engineer – To be procured
 - Land Surveyor – To be procured
 - Geotechnical Engineer – To be procured
 - Electrical Engineer – To be procured
 - Occupational Health & Safety: S Ngcobo
 - Other: N/A

2. Project Overview

2.1. Location of site

The Townhill Hospital is located inside the same vicinity as the Townhill Office Park. The hospital has various facilities for patients and staff, including the Uitsig Building, Impala Building, Workshops, Storage, Outpatients, nurses' homes, matrons' homes, and other facilities. As this is an old hospital, some of the facilities still have asbestos roofing, asbestos rainwater goods, and old corrugated roof sheeting which have to be replaced.



Figure 2-1: Townhill Hospital facilities

2.2. Project Background

Townhill Hospital is a specialised (psychiatric) provincial hospital situated in the Msunduzi municipality (Pietermaritzburg), in the Umgungundlovu District, built in the 1880's as an Asylum for mentally ill individuals. It was named Pietermaritzburg Mental Hospital in 1916 and in 1946 the hospital was renamed as Townhill Hospital.

It has 280 authorized beds (425 bed designed capacity). The hospital also has a few unused facilities in the vicinity, as seen below. However the facility rainwater goods, flat roofs and car parking shelters at these unused facilities have been identified to be in an unsatisfactory condition.

The Minister of Labour has, under section 43 of the Occupational Health and Safety Act 1993 (Act No. 85 of 1993), after consultations with the Advisory Council, issued Asbestos Regulations 2001 section 1. This regulation states that an employer or person, if self-employed, shall ensure that the exposure of a person to asbestos is either prevented or where this is not reasonably practicable, adequately controlled. Control of the exposure shall be regarded as adequate if the level of exposure is:

- a. At or below the Occupational Exposure Limit (OEL) for asbestos; or
- b. Above the OEL for asbestos but the reason has been identified and action is taken, as soon as is reasonably practicable to lower exposure.

Due to the criticalness of Department of Health facilities being used to house Health Care Support Services, the Department has started a programme to replace all asbestos roofs in the Province as part of the 2020/21, 2021/22 and 2022/2023 Annual Implementation Plan.

The reasons for the Department to reach this decision include:

- The age of the buildings currently with asbestos roofs
- The prevalent of wind and storm as a result of global warming
- Prevent of hail
- The need to upgrade roof coverings to a more robust and better specification as a means for preparedness for future storms and hail damages

The above factors have been identified to cause the weakness of the asbestos roofs and increasing the risk of exposure to the occupants of the buildings and the people living nearby these facilities.

An overarching decision was therefore taken to replace all asbestos covering on the Healthcare Institutions in the Province.

Asbestos eradication assessment was conducted by Umgungundlovu Health District Office for the Townhill Office Facilities were identified having asbestos roofs and asbestos eradication was recommended to avoid the risk of unhealthy and unsafe environment.

It was further discovered that the project involves associated roofing work (i.e. ceiling, electrical, roofing and roof beams, filing, painting, etc.).

A resolution was made for infrastructure Development to budget and prioritise for this project in this financial year 2022/2023.







A site conditional assessment was conducted on the 04 January 2022 on the Townhill Hospital premises where the hospital structures, buildings and nurses' homes were examined for the purposes of identifying the following works:







- Removal and Replacement of rain water goods which are in bad condition.
- Removal and Replacement of asbestos roofs on hospital structures.
- Removal and Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab for parking in front of retaining wall.
- Ceilings and electrical repair works where applicable.





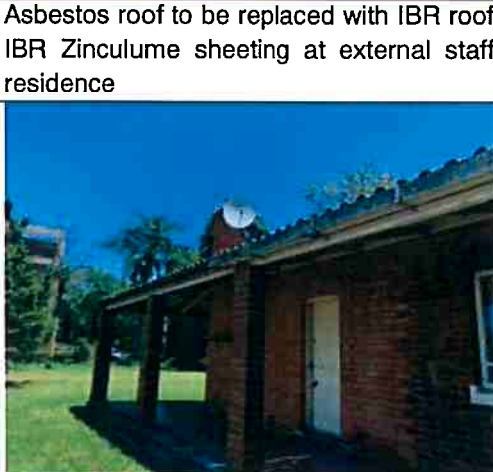



2.3. Current Condition of Townhill Hospital Facilities

Table 2-1 illustrates the current condition of the Townhill Hospital facilities and the sections which require new structural components.

Table 2-1: Site Findings at Townhill Hospital

Facility	Components to be repaired / replaced	
Uitsig buildings	Flat roof with water ponding	Flat roof with leaking sections on roof
		
	Old and rusted corrugated iron roof sheeting to be replaced	Old and rusted corrugated iron roof sheeting partial repair
		
Workshop and storage	Workshop building with no rainwater goods	Asbestos roof on workshop storage
		

Facility	Components to be repaired / replaced	
	Rusted corrugated iron roof sheeting on workshop storage.	Rusted corrugated iron roof sheeting on workshop parking
		
Impala building	Broken brick retaining wall	Water ponding in front of broken retaining wall
		
	Ceiling and electrical works damages inside the facility	Flat roof with various leaking sections
		

Facility	Components to be repaired / replaced	
	Additional roof sheeting required to cover exposed heat pump connections and pipes	Flat roof patching where leaks occurred
		
Other	Parking area requires replacement of rusted corrugated iron roof sheeting	Asbestos rainwater goods at nurses homes to be replaced
		
	Outpatient facility requires rainwater good upgrade	Matrons parking's corrugated roof sheeting is old and rusted
		
	Asbestos roof to be replaced with IBR roof IBR Zinculume sheeting at external staff residence	Rusted corrugated roof sheeting to be replaced at external staff residence
		

- Survey of the site: Not available but will be required in the next stage
- Geo-technical information: Not available but will be required in the next stage
- Climatic conditions (if relevant to the project e.g. mechanical installations)
 - General Climate: N/A
 - Temperature: N/A
 - Rain fall: N/A
 - Wind direction: N/A

3. Strategic Background

3.1. Project Outcome

The project outcome is to provide compliant facility structures, and to promote safer environment to patients, staff and visitors from asbestos, rainwater damage in Health Institutions through the following actions:

- Removal and Replacement of rain water goods which are in bad condition.
- Removal and Replacement of asbestos roofs on hospital structures.
- Removal and Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab for parking in front of retaining wall.
- Successful repair of ceilings and electrical works.

3.2. Project Objective

- The prime objective is to eradicate asbestos roofs in Health Institution to mitigate risk of unhealthy and unsafe environment, efficiently repair the Townhill Hospital facilities that are currently in an unsuitable condition or are broken and require replacement to meet the National Building Regulations and government specifications.
- The second objective is the need to protect the health, welfare and safety of the public and to protect the property from rainwater and asbestos hazards by safely routing and discharging rainwater away from the facilities.

3.3. Project Success Criteria

The success of the project will be measured by the compliance of infrastructure buildings that are safe through the following actions:

- Removal and replacement of rainwater goods which are in bad condition.
- Removal and Replacement of asbestos roofs on hospital structures.
- Removal and Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab for parking in front of retaining wall.

- Successful repair of ceilings and electrical works.

3.4. Project Actions

The various tasks that must be carried out in order to deliver planned results

- Gap Analysis of existing rainwater goods, ceiling, retaining walls, asbestos roofing and roof sheeting and electrical works.
- Functional Analysis.
- Stakeholder engagement with Townhill Hospital management at initiation stage, design and construction stage.
- Stakeholder engagement with facility, the district, and provincial and national programmes
- Project Planning.
- Procuring a Consultant to produce designs, specifications, etc.
- Documentation
- Tender process
- Construction
- Handover & Commissioning
- Training

3.5. Statutory Requirements

3.5.1. Legislation: Minimum applicable

- The South African Constitution
- CIDB
- PPPFA 2017
- EPWP Guidelines
- ECSA Professional Act
- 85 of 1993 Occupational Health and Safety Act
- Hazardous Substances Act (HAS) and Regulations
- National Environmental Management: Air Quality Act (NEM: AQA)
- National Environmental Management Act (NEMA) and Regulations
- National Environmental Management: Waste Act (NEM:WA)
- National Water Act (NWA)
- Occupational Health & Safety Act No. 85 of 1993
- Control of Asbestos at Work Regulations 2002
- National Building Regulations and Building Standard Act 103 of 1977

3.5.2. Policies: Minimum applicable

- KZN Applicable Health Policies such as Structural Installations for KZN DOH Rev. 2013

- KZN Applicable Health Policies: Physical Facilities Planning Policy (April 2001)

3.5.3. Norms and Standards: Minimum applicable

- Department of Labour: Asbestos regulation – Demolition Work.
- Red Book – Guidelines for Human Settlement Planning and Design Volume 1 2005
- SANS 10120-4-DB: Earthworks
- SANS 10120-2-HA: Structural steelwork
- SANS 10120-4 DK: Gabions and pitching.
- SANS 10400: 2020 - South African National Building Regulations
- SANS 10400-L: 2011. The application of the National Building Regulations. Part L, Roofs
- SANS 10400-R: 2012. The application of the National Building Regulations. Part R, Stormwater disposal
- SANS 1200 D: Earthworks
- SANS 1200 DB: Earthworks (Pipe Trenches)
- SANS 1200 GA: Concrete (Small Works)
- SANS 1200 LE: Stormwater Drainage
- SANS 3001-AG23: Civil Engineering Test Methods
Civil Engineering Specifications
- KZN Health Design for Structural Policy Rev. January 2013

3.5.4. Statutory Permissions Required

- Planning and Development Act: May be required
- Environmental Impact Assessment: May be required
- AMAFA approval: Not required
- Municipal Approval: Obtained
- Access to Provincial /National Roads: N/A
- Water Affairs: May be required
- National Water Act: May be required
- National Environmental Management Act: May be required

3.5.5. Other requirements:

- Municipal by-laws

4. Scope of the Project

The scope of the project includes the replacement and repair of structural components in various facilities in the Townhill Hospital premise. The site condition assessment was conducted and the required structural components to be replaced and repaired are identified below.

4.1. Site condition assessment

The findings from the site condition assessment conducted is illustrated in



Figure 4-1: Townhill Hospital Buildings and identified sections with problems

Below is clearer illustration of the findings in each facility, from left to right.



Figure 4-2: Site findings at the Uitsig building



Figure 4-3: Site findings at the workshop offices, storage facilities adjacent facilities



Figure 4-4: Site findings at the Impala building and adjacent parking areas



Figure 4-5: Site findings at the nurses' homes and matrons' homes



Figure 4-6: Site findings at residences outside the Townhill Hospital gates

4.2. Scope of works

As per the site condition assessment that was conducted on the 04 January 2022 on the Townhill Hospital premise, the hospital structures, buildings and nurses' homes were examined for the purposes of identifying the following proposed works:

- Replacement of rain water goods which are asbestos or are in an unsatisfactory condition.
- Replacement of asbestos roofs on the doctor's residence and other residences.
- Replacement of rusted corrugated iron roof sheeting.
- Repairing a section of a collapsed brick retaining wall.
- Constructing of concrete slab for parking in front of retaining wall.
- Ceilings and electrical repair works where applicable.

The tables below indicate the components which need to be replaced, the recommended solutions, the quantities and the estimate for each facility. The scope of the works is to include the following.

Table 4-1: Proposed works for Townhill Hospital repairs

Identified work	Proposed works
Replacement of rain water goods which are asbestos or are in an unsatisfactory condition	Install new Zincolume rainwater gutters and downpipes
Replacement of asbestos roofs on the doctor's residence and other residences	Install IBR Zincolume roof sheeting
Replacement of rusted corrugated iron roofs.	Install IBR Zincolume roof sheeting
Repairing section of collapsed brick retaining wall.	Construct new brick retaining wall
Water ponding in front of retaining wall	Construct concrete slab
Ceilings and electrical works where applicable.	Install new ceiling and electrical works

5. Guidelines for a compliant hospital infrastructure in Kwa-Zulu Natal

As per the Kwa-Zulu Natal Department of Health Policy Document For The Design Of Structural Installations (2013), below is a list of the guidelines for ensuring the compliance of Townhill Hospital infrastructure for installation purposes.

1. Gutters, Downpipes
 - a. The preferred guttering is continuous extruded Aluminium with "Chromodeck" finish with under gutter bracket.
 - b. Gutter brackets are to be fixed through fibre cement fascia board into tilting batten or purlin. If this is not achieved, brackets to be gutter bolted to fascia board.
 - c. Additional under gutter brackets \pm 750mm apart – are to be fitted in snow and hail areas.
2. Fascia boards
 - a. Wherever practicable and particularly in damp, humid areas, the use of Fibre cement fascias and bargeboards is recommended. It is recommended that Fibre cement fascias and bargeboards are not being painted.
3. Ceilings
 - a. Plasterboard Ceilings
 - i. Truss or Rafter suspension
 1. 7mm Plasterboard where specified internally with 75mm Cove cornice and minimum of 4mm fibre cement board externally and to ablution facilities. All sheeting to be fixed at right angles to 49 x 19 x
 2. 0.5mm Furring channels at no greater than 400mm centres or 38 x 50mm brandering at no greater than 400mm centres. Fixing of

sheeting must be at no greater than 150mm apart. Cover strips to be powder coated metal "H" section.

ii. Concrete suspension

1. 7mm Plasterboard where specified internally with 75mm Cove cornice and minimum of 4mm fibre cement board externally and to ablution facilities. All sheeting to be fixed to Fire rated concealed tee grid system consisting of 38 x 40 x 0.35mm Main tees and perpendicular cross tees at 300mm centres. Fixing of sheeting must be at no greater than 150mm apart.

4. Roofs

- a. Timber roof trusses to be supplied with relevant TR1 and TR2 certificates.
- b. Structural steelwork trusses are to be specifically designed and must also be supplied with relevant Engineers Design drawings and certificates.
- c. Roof pitches for metal roof coverings to be a minimum of 10° and for Concrete Roof Tiles a minimum of 17½°. In snowfall area's additional Design Criteria is required from a certificated Structural Engineer.
- d. Flat roofs are not permitted.
- e. Simple and economically design principles must be followed for all roof structures.
- f. All valleys to have a minimum of 50mm wide between roof finish for ease of cleaning.
- g. No box gutters are allowed.
- h. Roof lights must be avoided.
- i. Sufficient gang planks and work platforms are to be provided in the roof space

5. Roof Coverings

- a. The preferred roofing material is Secret fixing type galvanised sheeting with a "Chromodeck" finish of specified colour to upper side.
- b. 0,58mm thick roof sheeting for purlins up to 1,2m c/c spacing and 0,8mm thick roof sheeting for purlins 1,2m to 1,7m c/c maximum spacing.
- c. 0,53mm thick Zincolume coloured metal secret fix roofing sheets is required within 50 kilometres from the coast.
- d. All other area's to be 0,58mm as "Global-Tech" corrosion protection.
- e. "Klip Lock 700" or "Craftlock" roof sheeting. Installed as per manufacturer's instructions.

6. Insulation

- a. "Sisalation" FR 405 or other approved insulation on 3.2mm galvanized straining wires or straining tape to be laid on truss under all metal roof sheeting and concrete tiles in any health facility.
- b. In residential units with Rhino board ceilings, "Aerolite" or 100mm "Isotherm" must be used above solid ceilings. (Not suspended type).

5.1. Standard specifications to be used in the project

- a. Red book – Guidelines for Human Settlement Planning and Design Volume 1 2005.
- b. DoPW Civil Engineering specifications
- c. IUSS Requirements

6. Project / Programme Management and Cost control

6.1. Project Management

6.1.1. IDMS guidelines

NO PROJECT CAN PROCEED UNTIL THE IDMS STAGE HAS BEEN SIGNED OFF BY THE APPROPRIATE PERSON – Please refer to Departmental Infrastructure Standard Operating Procedures (SOPS).

6.1.1.1. FIPDM stages

Stage 1A **PROJECT INITIATIONS:** Project was identified and should appear on the 2022/2023 AIP

Stage 1B **PRE-FEASIBILITY:** This a brief to be presented to HIAC for approval

Stage 2 **CONCEPT REPORT OR FEASIBILITY REPORT**

This phase will be completed by procured PSPs through DoH

Deliverable Concept and viability report approved OR Feasibility report approved

Stage 3 **DESIGN DEVELOPMENT**

This phase will be completed by procured PSPs through DoH

Deliverable Design development report approved

Stage 4 **DESIGN DOCUMENTATION**

This phase will be completed by procured PSPs through DoH

Deliverable Design documents report approved

Deliverable Tender document approved

Stage 5 **WORKS**

Deliverable Works completion certified

- o Sub-deliverable 1 Signed contractual document received
- o Sub-deliverable 2 Site hand over certified
- o Sub-deliverable 3 Construction technical certifications
- o Sub-deliverable 4 Practical completion certified

- Sub-deliverable 5 Retention
- Sub-deliverable 6 Works completion certified

Stage 6 HANDOVER

Deliverable Liability acceptance by End-User

- Sub-deliverable 1 Defects liability
- Sub-deliverable 2 Training concluded
- Sub-deliverable 3 As-built/Manuals received
- Sub-deliverable 4 Commissioning completed
- Sub-deliverable 5 Facility opened

Stage 7 CLOSE OUT

Deliverable: Defects certificates or certificates of final completion issued, Final amount due to the contractor in terms of the contract is certified, Close out report is accepted.

- Sub-deliverable 1 Final completion certificate issued
- Sub-deliverable 2 final accounts signed
- Sub-deliverable 3 Final payments certified
- Sub-deliverable 4 Report complete and submitted for signature
- Sub-deliverable 5 Report approved and signed
- Sub-deliverable 6 Asset verified and captured

6.1.1.2. Project Management Plan / Resource Management

The following Project Management plan is a guideline.

Table 6-1: Proposed Project Plan

ITEM	ELEMENTS
Needs Assessment/Analysis:	Projects has been identified and agreed it will be implemented in-house by DOH.
Implementing Agent Brief:	Herewith is the brief to the IA, which will be the Department of Health through the procurement of a PSP.
Consultancy Brief:	Contractor and Technical consultant to be procured as per this brief and implementation plan: The Consultant team:- Are to manage the project to successful completion within time, cost and to the required specification and to manage project associated risks for minimum impact. Is to manage the project to successful completion within time, cost and to the required specification and to manage project associated risks for minimum impact.

ITEM	ELEMENTS
	<ul style="list-style-type: none"> • Must develop, design, document, manage and close the project in line Stage 2 – 7 of the FIPDM. • Ensure HIAC and ITSC approval is obtained for each stage. • May not proceed with any stage (FIDPM) of the work until the KZN-DOH is satisfied with the stage of the project. • Must clarify any uncertainties, discrepancies, etc. to the satisfaction of KZN-DOH. • Is expected to deliver a well-designed, cost effective, low maintenance facility that will suit the needs of the Townhill Hospital community and KZN-DOH. • Must adhere to the timeframes for the work to be completed as presented
Evaluation and Engagement:	<ul style="list-style-type: none"> • The project may not proceed to any stage until KZN-DOH is satisfied with the current stage (wherever that is) of the project; • KZN-DOH will follow the FIPDM principles for approval and evaluation

6.1.2. Project Risk Plan

Informed decision-making is critical to the success of any project. Crucial to this success is the identification of risks and how they will be managed. The following risks have been identified prior to the projects start. These risks are not all inclusive and will be reviewed as the project progresses.

The following list contains some of the risks identified. However, it is required that the Implementer develops a full risk plan. This is not an inclusive list and must be reviewed at each stage.

Table 6-2: Risk Log

No.	Risks	Risk carrier	Probability (L/M/H)	Consequence (L/M/H)	Mitigation actions
1	Occupants Exposure to Asbestos Fibres	DoH	Medium	Medium	Provide clear and adequate signage during asbestos eradication and associated roofing work. Reduce asbestos fibre deposition.
2	Decanting and theft	DoH	High	High	The facility shall continue to operate at a limit basis and focus on critical care services which will be administered on a mobile unit which will be parked at a strategic location within the facility. The affected building/facility will be

No.	Risks	Risk carrier	Probability (L/M/H)	Consequence (L/M/H)	Mitigation actions
					<p>closed for 72 hours while asbestos is being removed. The construction programme shall be streamlined such that the contractor resume site on Friday and complete eradication by Wednesday the following week. During this time the rest of Health care services will be diverted to nearby Healthcare facilities. An area wide consultation process must take place at least 14 days prior to site handover. In order to achieve a successful consultation process, the relevant stakeholders shall be involved in disseminating information to the community at large. District and local EMS bases must be brought to standby. A minimum of 1 ambulance is to be parked nearby as part of the risk mitigation plan for cases requiring emergency transfer to nearest facilities.</p> <p>Remove and replace a portion of asbestos components to reduce the risks associated with illegal site access, theft and services destruction.</p> <p>Availability and well communicated detail works programme that will allow smooth decanting and facility normal operations is required.</p>
3	Public Inconvenience	DoH	Medium	Medium	Signage during construction and provision of temporary access
4	Poor safety	Contractor	High	High	Contractor to provide proper

No.	Risks	Risk carrier	Probability (L/M/H)	Consequence (L/M/H)	Mitigation actions
	sign boards and barricading				marking/delineators and barricading for any obstructions (warning sign) and avoid using fade/ inappropriate signage to mitigate risks associated.
5	Hazards along facilities	Contractor	High	High	Contractor to ensure good practise of barricading of uncovered sections during excavations, as well as removed and delivered material.
6	Project programme delays	Contractor	High	high	Ensure sufficient planning is in place, as well as accounting for probable delays into the project programme.
7	Discovery of unforeseen services when excavating for concrete slab	Consultant	Medium	Medium	Allow for existing services to be boxed and exposed or re-routed
8	Disturbance from special interest groups	DoH	High	high	Stakeholder engagement with effective communication and stakeholder management plan

6.1.3. Occupational Health and Safety Baseline plan

The project must comply with the requirements of the Occupational Health & Safety Act 85 of 1993 and its Regulations to ensure the following:

- to provide for the health and safety of persons at work and for the health and safety of persons in connection with the use of plant and machinery during the project;
- the protection of persons other than persons at work against hazards to health and safety arising out of or in connection with the activities of persons during the project.

The detailed Health and Safety Specification will be developed and included during Stage 2.

6.2. Communication Plan

The following plan is a guideline to ensure good communication and frequent engagement throughout the project. The following plan is a guideline.

6.2.1. Communication Plan Strategies

In order to ensure good communication, frequent engagement will take place though out the project life cycle. The engagements include:

- Stakeholder engagement meetings
- Planning meetings
- Update meetings
- Report back meetings
- Site meetings
- No media communication except by KZN-DOH Communication

6.2.2. Communication Plan Methodologies

Communication will be done though the following methods:

- Meetings
- Minutes
- Telecommunication
- E-mails
- Reports
- Letters
- Feedback information

6.2.3. Communication Delivery

Communication will be delivered through:

- Telecommunication
- E-mails
- Postal services
- Internal registry services

6.2.4. Communication Personnel

Communication will be between KZN-DOH Infrastructure Development (KZN-DOH ID) and:-

- KZN-DOH Head Office sections
- KZN-DOH Umgungundlovu District
- Townhill Hospital Management
- Consultant
- Contractor

6.2.5. Communication Channels

Communication is expected to take place between:

- KZN-DOH Umgungundlovu and Community

- KZN-DOH ID and Consultant
- KZN-DOH ID and Contractor
- KZN-DOH ID and Townhill Hospital Management

6.3. Project Milestones

The milestones for the project are listed below in Table 6-3.

Table 6-3: Milestones and Tasks

Milestone	Anticipated Completion Date	% Project Complete
PROJECT INITIATION DATE	04/01/2022	0%
STAGE 1B BRIEF (current stage)	31/05/2022	10%
STAGE 2	31/08/2022	15%
STAGE 3&4	31/11/2022	22%
TENDER	01/02/2023	40%
CONSTRUCTION START	01/05/2023	45%
CONSTRUCTION 0 - 25%	01/08/2023	51%
CONSTRUCTION 26 - 50%	01/11/2023	61%
CONSTRUCTION 51 - 75%	01/02/2024	70%
CONSTRUCTION 76 – 100%	01/05/2024	81%
PRACTICAL COMPLETION	31/06/2024	84%
HANDED OVER	10/08/2024	84%
WORKS COMPLETION	31/09/2024	91%
FINAL COMPLETION	01/11/2024	96%
CLOSE OUT	10/08/2025	100%

6.4. Project Cost Breakdown

The project cost is made up of the following elements:

- Infrastructure component
 - Install new Zincolume rainwater gutters and downpipes
 - Install IBR Zincolume roof sheeting
 - Install IBR Zincolume roof sheeting
 - Construct new brick retaining wall
 - Construct concrete slab
 - Install new ceiling and related electrical works

As per the highlighted areas in the figures above, the estimate for the proposed work, for the purposes of determining a budget required for this project, can be seen below. The quantities were measured on site and finalised through desktop studies, and the rates were obtained from previous

projects then escalated to suit escalations to rates for 2023. Where the rates were overestimated, the costs will accommodate any surcharges during the project implementation stage.

Table 6-4: Quantity and cost of replacing flat roof to IBR Zinculume sheeting, ceiling and electrical replacements

No.	Facility	Component	Flat roof repairs to IBR Zinculume roof sheeting	Celling and lighting repairs	25%			
			Quantity	Quantity	Unit	IBR rate	Celling	Amount
1	Uitsig	Building A,B,C,D	680	170	m ²	R 700.00	R 500.00	R 561 000.00
		Building E.F.G.H	680	170	m ²	R 700.00	R 500.00	R 561 000.00
		Walkways and middle building	260	65	m ²	R 700.00	R 500.00	R 214 500.00
2	Laundry	Laundry room				R 700.00	R 500.00	R -
3	Impala	Building ECT, G and H	840	210	m ²	R 700.00	R 500.00	R 693 000.00
		Retaining wall In front of parking area						
TOTAL								R 2 029 500.00

Table 6-5: Quantity and cost of replacing rusted corrugated iron sheeting to IBR Zinculume roof sheeting

No.	Facility	Component	Rusted corrugated iron sheeting to IBR Zinculume roof sheeting			
			Quantity	Unit	Rate	Amount
1	Uitsig	Building A,B,C,D	700	m ²	R 800.00	R 560 000.00
		Building E.F.G.H	700	m ²	R 800.00	R 560 000.00
		Walkways and middle building	-	-	-	-
2	Outside Crèche	Covered Parking	710	m ²	R 800.00	R 568 000.00
3	Workshop	Outer Storage, inner storage and outer parking	650	m ²	R 800.00	R 520 000.00
		Workshop facilities	-	-	-	-
		Storage behind	-	-	-	-
4	Other buildings further behind workshop storage	Block 1	650	m ²	R 800.00	R 520 000.00
		Block 2	650	m ²	R 800.00	R 520 000.00
5	Facilities in front of Townhill Office park	Block 1	-	-	-	-
		Parking 1	180	m ²	R 800.00	R 144 000.00
6	Nurses residences	Nurses homes and walkways	-	-	-	-
		Matron homes	-	-	-	-
		Other homes	-	-	-	-
		Parking	370	m ²	R 800.00	R 296 000.00
7	Residence facilities outside premise	House	-	-	-	-
		Garage	100	m ²	R 800.00	R 80 000.00
		Other house (south side)	380	m ²	R 800.00	R 304 000.00
TOTAL						R 4 072 000.00

Table 6-6: Quantity and cost of replacement of gutters and downpipes

No.	Facility	Component	Gutters and downpipes Installation			
			Quantity	Unit	Rate	Amount
1	Uitsig	Building A,B,C,D	150	m	R 350.00	R 52 500.00
		Building E.F.G.H	150	m	R 350.00	R 52 500.00
		Walkways and middle building	-	-	-	-
2	Laundry	Laundry room	80	m	R 350.00	R 28 000.00
3	Outside Crèche	Covered Parking	220	m	R 350.00	R 77 000.00
4	Workshop	Outer Storage, inner storage and outer parking	240	m	R 350.00	R 84 000.00
		Workshop facilities	200	m	R 350.00	R 70 000.00
		Storage behind	200	m	R 350.00	R 70 000.00
5	Other buildings further behind workshop storage	Block 1	110	m	R 350.00	R 38 500.00
		Block 2	110	m	R 350.00	R 38 500.00
6	Facilities in front of Townhill Office park	Block 1	120	m	R 350.00	R 42 000.00
		Parking 1	60	m	R 350.00	R 21 000.00
7	Outpatients	Block in front	350	m	R 350.00	R 122 500.00
8	Nurses residences	Nurses homes and walkways	450	m	R 350.00	R 157 500.00
		Matron homes	210	m	R 350.00	R 73 500.00
		Other homes	90	m	R 350.00	R 31 500.00
		Parking	90	m	R 350.00	R 31 500.00
9	Residence facilities outside premise	House	70	m	R 350.00	R 24 500.00
		Garage	50	m	R 350.00	R 17 500.00
		Other house (south side)	90	m	R 350.00	R 31 500.00
TOTAL						R 1 064 000.00

Table 6-7: Quantity and cost of replacement of asbestos roof with IBR Zinculume roof sheeting and truss

No.	Facility	Component	Asbestos roof to be replaced with IBR roof sheeting			
			Quantity	Unit	Rate	Amount
2	Laundry	Laundry room	360	m ²	R 1 200.00	R 432 000.00
4	Outside Crèche	Covered Parking	-	-	-	-
10	Residence facilities outside premise	House	300	m ²	R 1 200.00	R 360 000.00
		Garage	-	-	-	-
		Other house (south side)	-	-	-	-
TOTAL						R 792 000.00

Table 6-8: Quantity and cost of constructing a brick retaining wall and parking concrete slab

No.	Facility	Component	Brickwork for retaining wall and parking slab			
			Quantity	Unit	Rate	Amount
3	Impala	Building ECT, G and H				
		Retaining wall In front of parking area	33.75	m ²	R 700.00	R 23 625.00
		Ponding area in front of parking	75	m ²	R 2 500.00	R 187 500.00
TOTAL						R 211 125.00

Table 6-9: Summary of estimate for Townhill Hospital proposed works

No.	Summary	%	Cost
1	Flat roof to IBR roof sheeting, ceiling and lighting repairs		R 2 029 500.00
2	Corrugated iron sheeting to IBR Zinculume roof sheeting		R 4 072 000.00
3	Gutters and downpipes installation		R 1 064 000.00
4	Asbestos roof to be replaced with IBR roof sheeting and truss Zinculume		R 792 000.00
5	Brickwork for retaining wall and parking slab		R 211 125.00
	TOTAL		R 8 168 625.00
	P&Gs	10%	R 816 862.50
	Specialist services	5%	R 408 431.25
	Consultants fees and contingencies	12%	R 980 235.00
	SUB TOTAL		R 10 374 153.75
	VAT	15%	R 1 556 123.06
	TOTAL		R 11 930 276.81

The budgetary allocation for each Infrastructure Component must be closely controlled by the Project Manager and must not be exceeded without prior approval of the CFO and HOD. The departmental Project Leader is responsible for the Commissioning Costs if they are not included in the Infrastructure Budget.

The Project Leader and Project Manager are responsible to ensure that necessary controls are in place and that the budgets are not exceeded without a fully motivated and approved submission to the CFO and HOD. Below is a brief Cost breakdown for the project.

As per the highlighted area in the figures above, the estimate of the proposed work for the purposes of determining a budget required for this project can be seen below.

Table 6-10: Estimated Building Cost

Building Cost (incl. VAT)		
Funding source	Health Facility Revitalisation Grant (HFRG)	
Budgetary Item	Amount	Explanatory Notes
Current Estimated Building Cost	R 8 168 625.00	March 2022
Pre-tender escalation	N/A	Included
Post-tender escalation	N/A	Included
Preliminaries and General (10%)	R 816 862.50	Including decanting of facilities
Specialist Services (5%)	R 408 431.25	
Contingency and fees (12%)	R 980 235.00	N/A
Vat (15%)	R 1 556 123.06	March 2022
Estimated Cost (incl. VAT)	R 11 930 276.81	

6.5. Operations

Below is the estimated Monthly Cashflow (AIP) for the current financial year, including VAT.

Table 6-11: Estimated Monthly Cashflow (AIP) 22/23

Estimated Cashflow for current year (Total Construction cost + Fees, incl. VAT)											
Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar
0	0	0	R150 000	R350 000	R100 000	R100 000	R300 000	R150 000	R150 000	R100 000	R 148 479.69

Table 6-12: Projected Annual Cashflow (U-AMP)

MTEF and beyond	Fees	Construction	Total
Yr 22/23	R 548 479.69	R 1 000 000.00	R 1 548 479.69
Yr 23/24	R 800 000.00	R 4 000 000.00	R 4 800 000.00
Yr 24/25	R 1 187 878.37	R 4 393 918.75	R 5 581 797.12
TOTAL	R 2 348 479.69	R 9 393 918.75	R 11 930 276.81

6.6. Expanded Public Works Programme and Community Participation Goal

The general rule/guideline currently is that all Department of Health Projects in which the Project Brief or FIPDM stage B1 report estimates exceed R7 Million shall be subject to the Expanded Public Works Program (EPWP) aimed at alleviating and reducing unemployment.

Employment statistics will still be required to be submitted for projects below this value for recording and reporting to the EPWP system but all other EPWP guidelines may not be included.

Projects that have initial estimates exceeding R30 Million shall be subject to both Expanded Public Works Program (EPWP) and Contract Participation Goal (CPG). DoPW has issued a guideline document for recruitment of labour.

Requirements for this project are outlined below:

Table 6-13: Project Requirements for specific project cost

EPWP Minimum Requirement	Project Values in Rand and minimum guidelines					
	Up To 5 00 000	Between 500 000 up to 2 million	Between 2 million up to 10 million	Between 10 million up to 30 million	Between 30 million up to R 99 million	From 100 million and above
Reporting	All required	All required	All required	All required	All required	All required
Local Area	10 km radius	10 km radius	Local Municipality	District Municipality 60% Local Municipality	KZN Province 80% District	South Africa
					60% Local Municipality	80% KZN
						60% District
						40% Local Municipality
Branding	Not Required	Site only	Site and Uniform	Site ,Uniform and tender documentation	Site ,Uniform and tender documentation	Site ,Uniform and tender documentation
Recruitment	Managed via Councillor and Hospital Board/Clinic Committee	Managed via Councillor and Hospital Board/Clinic Committee	According to DOPW Recruitment guideline document	According to DOPW Recruitment guideline document	According to DOPW Recruitment guideline document	According to DOPW Recruitment guideline document
PSC	Not Required	Hospital board /Clinic Committee	Hospital board /Clinic Committee	Full PSC,CIDB Guidelines to be followed	Full PSC,CIDB Guidelines to be followed	Full PSC,CIDB Guidelines to be followed
CLO	Not Required	Required	Required	Required	Required	Required
Tender Specification	Not Required	Required	Required	Required	Required	Required

7. Procurement and Delivery Strategy

7.1. Procurement Strategy

A Procurement Strategy is prepared by the Department of Health as part of the annual Infrastructure Programme Management Plan (IPMP). It sets out the Delivery Management Strategy as well as the Procurement and Contracting Arrangements proposed for each project requiring the procurement of Contractors (Works) during the ensuing 3-year period.

7.2. Primary and Secondary Objectives

7.2.1. Primary Objective

- i. Is to have one in-house procurement process and take advantage of scale and uniformity by ensuring DoH is the implementing agent and a Consultant is procured to ensure efficient implementation of the project,
- ii. Is to procure and deliver the required outcome starting from the beginning of the 2022 / 2023 budget and within 24 months from the date of the brief approval at a required standard.

7.2.2. Secondary Objective

- i. Is the socio-economic benefit, which will be achieved through targeted procurement, skills development, and job creation during project construction period.

7.3. Delivery Management Strategy

Since the Delivery Management Strategy is not on IPMP, the following is recommended.

7.3.1. Professional Services

The project will require services of a multi-disciplinary consulting team (Civil, Architect, Geotechnical, etc.) employed by DoH, which will be responsible for design and implementation of the project for rainwater goods, ceilings, electrical works, retaining wall and asbestos and corrugated iron roofs at Townhill Hospital.

The project team In Table 7-1 should be made up of the following disciplines possessing adequate experience in the specific field:

Table 7-1: Project Team Disciplines and roles

Discipline	Experience / Special Requirements
Architecture	Design
Civil Engineer/Geotechnical Engineer	Design and Construction
Quantity Surveyor	Estimates
Electrical Engineer	Electrical Works
Project Manager	Construction and Program Management
Contractor	Construction, Asbestos Removal, Roofing, Ceiling works, General Building and Civil Works

The Contracting Arrangements contained in the Infrastructure Programme Management Plan (IPMP) are as follows:

Table 7-2: Contracting Arrangements for Professional Services

Contracting Arrangements for Professional Services					
Professional services needed	Procurement Strategy / Type of Appointment	Standard Tender Evaluation Method	Contracting strategy	Remuneration of professional service providers	Form of Contract
Full consulting service	PP2B Open procedure	Method 4: Financial offer, quality and preferences	Design by Employer	Percentage contract	CIDB Standard Professional Services Contract

7.3.2. For Construction Works

Table 7-3: The Strategic Arrangements for works

Delivery Management Strategy for Works		
Delivery Mode	Implementer	Estimated Project Control Budget (R.m)
Individual Project	DoH	R 11 930 276.81
Contracting Arrangements for Works		
Contracting strategy	Pricing strategy	Form of Contract
Design by Employer	BOQ	GCC 2015
Procurement Arrangements for Works		
Procurement Procedure	Estimated Bid/Tender Award Date	Comments / Current Stage
Public Open Tender	February 2023	Identified

7.3.3. Updating and Revising the Delivery Management Strategy

Factors emerging during the development of a project may lead to a revision of the Procurement Strategy that was set out in the IPMP. Where a revision is recommended, an in-principle-agreement must be provided by the Project Leader (DOH) and the revision must be highlighted and explained at the next end-of-stage submission (refer FIPDM) and must align with the methodology described in the IPMP.

7.3.4. Implementation Strategy

The implementation strategy will be presented in the next FIPDM stage.

8. External Appointments (PSP's And Contractor)

8.1. Appointment of Contractors or Suppliers

The KZN DOH will enter into a legally binding agreement with the Contractor or Supplier. However, over and above the agreement, the following expectations by KZN-DOH from the Contractor or Supplier are highlighted:

- Effective Time management
- Effective Project Management
- Effective Cost Management
- Effective Resource Management
- Effective Communication

- Adherence/Compliance to all applicable Legislation
- Adherence/Compliance to all applicable policies
- Adherence/Compliance to all applicable norms and standards

8.2. Roles and Responsibilities of the Department of Health

The roles and responsibilities are highlighted below:

- Effective management and co-ordination of all stages of the project
- Effective management and co-ordination to all legislative requirements
- Quality control and compliance.
- Effective manage Procurement preparation processes in terms of the PFMA, SIPDM and Treasury Regulations.
- Contract and project management
- Effective Financial management.
- Effective Time Management
- Manage completion processes and retention periods.
- Manage timeous and complete Close-out of Project including as-built documentation, manuals compliance certificates and related documentation.
- Manage all required reporting, documentation and archiving of documents

9. Signatures

The following Facilities, Programmes and their Managers, Directors or Leaders have been fully advised and have read and understood the contents of this document.

Name: NR HADEBE

Townhill Hospital: CEO

Date: 16/03/2022

Signature: R. Hadebe

Name: MT Zulu

Umgungundlovu: District Manager

Date: 06/04/2022

Signature: MT Zulu

APPENDIX E:
FORM A - SCHEDULE OF TEAM
MEMBERS PROPOSED FOR THE
PROJECT

FORM A

SCHEDULE OF TEAM MEMBERS PROPOSED FOR THE PROJECT

CVs for the Support Professional/Candidate per discipline must not be submitted. Please note that if any of the information disclosed in the table below is found to be dishonest or inaccurate, this may result in the withdrawal of any award already and a repudiation of this agreement. Further appropriate action may also be taken.

PROPOSED TEAM MEMBERS	REGISTERED WITH RELEVANT PROFESSIONAL COUNCIL (YES/NO)	DATE OF REGISTRATION AS A PROFESSIONAL / CANDIDATE	PROFESSIONAL REGISTRATION IN GOOD STANDING (YES/NO)	PROFESSIONAL REGISTRATION NUMBER	YEARS OF POST REGISTRATION EXPERIENCE
Architectural Firm (This is the firm to complete the tender document as the Lead Bidder):					
<ul style="list-style-type: none"> Lead Professional (To be the Lead for discipline): 					
<ul style="list-style-type: none"> Support Professional/Candidate (optional): 					
Quantity Surveying Firm:					
<ul style="list-style-type: none"> Lead Professional (To be the Lead for discipline): 					
<ul style="list-style-type: none"> Support Professional/Candidate (optional): 					

PROPOSED TEAM MEMBERS	REGISTERED WITH RELEVANT PROFESSIONAL COUNCIL (YES/NO)	DATE OF REGISTRATION AS A PROFESSIONAL / CANDIDATE	PROFESSIONAL REGISTRATION IN GOOD STANDING (YES/NO)	PROFESSIONAL REGISTRATION NUMBER	YEARS OF POST REGISTRATION EXPERIENCE
Electrical Engineering Firm:					
• Lead Professional:					
• Support Professional/Candidate (optional):					
Civil/Structural Engineering Firm:					
• Lead Professional					
• Support Professional/Candidate (optional):					

PROPOSED TEAM MEMBERS	REGISTERED WITH RELEVANT PROFESSIONAL COUNCIL (YES/NO)	DATE OF REGISTRATION AS A PROFESSIONAL / CANDIDATE	PROFESSIONAL REGISTRATION IN GOOD STANDING (YES/NO)	PROFESSIONAL REGISTRATION NUMBER	YEARS OF POST REGISTRATION EXPERIENCE
Construction Health and Safety Firm:					
<ul style="list-style-type: none"> Lead Professional (To be the Lead for discipline): 					
<ul style="list-style-type: none"> Support Professional/Candidate (optional): 					

APPENDIX F:

CURRICULUM VITAE TEMPLATE

CURRICULUM VITAE TEMPLATE



1. Personal Details

Name:	
Date of Birth:	
Current Employer:	
Current Position Held:	
Period with Current Employer: (mm-yyyy to mm-yyyy)	
Previous Employer:	
Position Held with Previous Employer:	
Period with Previous Employer: (mm-yyyy to mm-yyyy)	

2. Education (Degrees, Diplomas, BTech and Post Graduate Qualifications ONLY)

Qualification	Year Obtained	Institution

3. Professional Registration/s

Professional Body	Year Obtained	Expiry Date	Category of Professional Registration

4. Relevant Project Experience (Provide a maximum of 3 relevant projects)

Name of Project	Client	Project Start Date	Project End Date	Project Value	Role on Project

APPENDIX G: RETURNABLES – RESPONSIVENESS

APPENDIX H: RETURNABLES – ELIGIBILITY CRITERIA

REGISTERED PROFESSIONAL ARCHITECT CERTIFICATE AND PROFESSIONAL INDEMNITY

**REGISTERED PROFESSIONAL
QUANTITY SURVEYOR CERTIFICATE
AND PROFESSIONAL INDEMNITY**

**REGISTERED PROFESSIONAL
CIVIL/STRUCTURAL
ENGINEER/TECHNOLOGIST
CERTIFICATE AND PROFESSIONAL
INDEMNITY**

**REGISTERED PROFESSIONAL
ELECTRICAL
ENGINEER/TECHNOLOGIST
CERTIFICATE AND PROFESSIONAL
INDEMNITY**

**REGISTERED PROFESSIONAL
CONSTRUCTION HEALTH AND SAFETY
CERTIFICATE AND PROFESSIONAL
INDEMNITY**

APPENDIX I: RETURNABLES – FUNCTIONALITY CRITERIA

LEAD ARCHITECT CV

**LEAD ARCHITECT PROJECT
COMPLETION CERTIFICATES,
LETTERS OF AWARD / SIGNED FINAL
ACCOUNT SUMMARIES / REFERENCE
LETTERS**

LEAD QUANTITY SURVEYOR CV

**LEAD QUANTITY SURVEYOR PROJECT
COMPLETION CERTIFICATES,
LETTERS OF AWARD / SIGNED FINAL
ACCOUNT SUMMARIES / REFERENCE
LETTERS**

LEAD CIVIL/STRUCTURAL ENGINEER/TECHNOLOGIST CV

**LEAD CIVIL/STRUCTURAL
ENGINEER/TECHNOLOGIST PROJECT
COMPLETION CERTIFICATES,
LETTERS OF AWARD / SIGNED FINAL
ACCOUNT SUMMARIES / REFERENCE
LETTERS**

LEAD ELECTRICAL ENGINEER/TECHNOLOGIST CV

**LEAD ELECTRICAL
ENGINEER/TECHNOLOGIST PROJECT
COMPLETION CERTIFICATES,
LETTERS OF AWARD / SIGNED FINAL
ACCOUNT SUMMARIES / REFERENCE
LETTERS**

LEAD CONSTRUCTION HEALTH AND SAFETY AGENT CV

**LEAD CONSTRUCTION HEALTH AND
SAFETY AGENT PROJECT
COMPLETION CERTIFICATES,
LETTERS OF AWARD / SIGNED FINAL
ACCOUNT SUMMARIES / REFERENCE
LETTERS**

TEAM ORGANOGRAM

ARCHITECTURAL DISCIPLINE ORGANOGRAM

QUANTITY SURVEYING DISCIPLINE ORGANOGRAM

CIVIL/STRUCTURAL ENGINEERING DISCIPLINE ORGANOGRAM

ELECTRICAL ENGINEERING DISCIPLINE ORGANOGRAM

CONSTRUCTION HEALTH AND SAFETY DISCIPLINE ORGANOGRAM