

Finance Manager Signature:	
	FAME.
Finance Manager Name:	Мге И.ИП.СОВЕИ!
ContactNumber:	8218/001879797978
Emall:	er wan Atleadard Madah irem I
	WR L Doko
iemsM	J
ENGUIRIES REGARDING THE ADVER	RT MAY BE DRECTED TO:
QUOTES SHOULD BE DELIVERED TO:	57 Cnr of Elliot St and The Avenue Road, Kok
QUOTES CAN BE COLLECTED FROM:	Are downloadable from KZNHealth website
Venue:	
ime:	
· nme	
Select Type: Date :	NOT APPLICABLE
	1 2015 A) QH
CONSOLEANS BRIEFING SESSION I	
COMPULSORY BRIEFING SESSION /	TOW STIP
сомьпгеова выеыме аеггюм и	
сомьпгрова выеыме деррюм у	Servicing Kitchen equipment
itemDescription:	Servicing Kitchen equipment
itemDescription:	
Quotation Number: lem Category:	Services Servicing Kitchen equipment
Quotation Number: lem Category:	Servicing Kitchen equipment
ITEM CATEGORY AND DETAILS Quotation Number: Item Category:	Services Servicing Kitchen equipment
ITEM CATEGORY AND DETAILS Quotation Number: 17 CATEGORY AND DETAILS	Servicing Kitchen equipment
Date Submitted Guotation Number: TEM CATEGORY AND DETAILS TEM CATEGORY AND DETAILS	Servicing Kitchen equipment
Place where goods / services is required Date Submitted Guotation Number: Item CATEGORY AND DETAILS Item Category:	27/09/2022 Servicing Kitchen equipment
Quotation Number: item Category: temDescription:	EGUMH Workshop Services Services
Province: Department or Entity: Division or section: Date Submitted Quotation Number: Item CATEGORY AND DETAILS Item Category:	Department of Health Central Supply Chain Management Z7/09/2022 Servicing Kitchen equipment
Institution Name: Province: Department or Entity: Date Submitted Mee where goods / services is required Mee Submitted Mee Submitted Mee Submitted Mee Submitted	Servicing Kitchen equipment Services 27/09/2022 EGUMH Workshop
Institution Name: Province: Department or Entity: Date Submitted Mee where goods / services is required Mee Submitted Mee Submitted Mee Submitted Mee Submitted	Department of Health Central Supply Chain Management Z7/09/2022 Servicing Kitchen equipment
INSTITUTION DETAILS Ineffution Name: Division or section: Division or section: Date Submitted Unotation Number: Unotation Number:	E.G & USHER MEMORIAL HOSPITAL Department Supply Chain Management Z7/09/2022 EGUMH Workshop Services Services
INSTITUTION DETAILS Institution Name: Province: Division or section: Date Submitted Place where goods / services is required Quotation Number: United Submitted	Servicing Kitchen equipment Central Supply Chain Management Department of Health Department of Health EGUMH Workshop Department of Health EGUMH Workshop EGUMH Workshop EGUMH Workshop

STANDARD QUOTE DOCUMENTATION OVER R30 000.00

HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SAD 6.1) [AB B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMES& GSES) MUST BE SUBMITTED TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]
TODITA TAV II) REGISTRATION NUITARTSIĐER TAV
E-MAIL ADDRESS
СЕГГЬНОИЕ И ЛИВ ЕВ
TELEPHONE NUMBER CODENUMBERPACSIMILE NUMBER CODENUMBER
STREET ADDRESS
POSTAL ADDRESS
WAME OF BIDDER
THE FOLLOWING PARTICULARS MUST BE FURMISHED) (FAILURE TO DO SO MAY RESULT IN YOUR QUOTE BEING DISQUALIFIED)
THIS QUOTE IS SUBJECT TO THE PREFERENTIAL, PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL SPECIAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.
QUOTATIONS MUST BE SUBMITTED ON THE OFFICIAL FORMS $-$ (NOT TO BE RETYPED)
The quote box is open from 08:00 to 15:30.
Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted for consideration.
SHEDDING BID DOCUMENT SHOULD BE DEPOSITED IN THE Tender box situated at the main entrance gate,
EG & USHER MEMORIAL HOSPITAL, 57 CORNER OF ELLIOT AND THE AVENUE ROAD, KOKSTAD. DUE TO FREQUENT LOAD-
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS)
UNIQUE REGISTRATION REFERENCE
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO. M A A A A A A A A A
CONTRACT PERIOD ONCE OFF VALIDITY PERIOD 60 Days SARS PIN
DESCRIPTION: BI-ANNUAL SERVICE OF KITCHEN EQUIPMENT
QUOTE NUMBER: ZNQ / EGU / 61 / 2022 / 2023 -
рнүзіСАГ ADDRESS: 57 Corner of Elliot Street & The Avenue Road, Kokstad 4700
FACSIMILE NUMBER; 039 797 8162 E-MAIL ADDRESS; EGUSHERHOSPITAL®
DATE ADVERTISED. 27 SEPTEMBER 2022. CLOSING DATE: 04 OCTOBER 2022. CLOSING TIME: 11:00
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: EAST GRIQUALAND AND USHER MEMORIAL HOSPITAL

:01				regarding <u>technic</u> Inon: Mr. T.W Hic			: <u>quote</u> may be directed to: Joko Tel: 0397978: Aco@kznhealth.gov.za		Contact Pers
	-			<i>үәәмі 'Хері</i> '' б'ә	імегу Репод,	state ne		- ILIUJ.	epire Price
	.,l				Specifications	S	With The Specification?		
		.8.8.A.8	, .2.N.A.2 9rl	T oT mnotnoO	he Article	T seod			
	-	T T				-(s	SICE (VALIDITY PERIOD 60 Day	AY NOTIATO	ו חואב מחר
							15% (Only if VAV Tendor)		
10.							V 1 3121113. (C) 7007	_ ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
13						40			
!						i			
						:			
						<u> </u>			
				·····					
				· · · · · · · · · · · · · · · · · · ·	····				**************************************
					NOI	TADIFICAT	SEE THE ATTACHED		
		The state of the s				\ <u> </u>	TEED LUGO LANGO	10	00
							STEAM COOKI ELECTRIC RAUGI	02	03
					FIFD		ELECTRIC BOILING PAN	10	10
э		В	manufacture	Іэрош					
	əo	iηq	Country of	Brand &			Description	YiinsuD	item No
i							CH THIS QUOTE IS SIGNED	NDEK WHI	CAPACITY (
		14141112000100		TAO	*************	[snoilibno:	3 t, i hereby agree to all terms and		SIGNATURE I gningis YB]
		* *** * * * * * * * * * * * * * * * * *			() I I I I I I I I I I I I I I I I I I I	ZUIPMENT	INAL SERVICE OF KITCHEN E	л и А-I8 :ИС	DESCRIPTION
	<u>I</u>	nz / G / I	a / ກຄສ <i>້າ</i> ຕິໂ	ole number: Ži	ตก	000	FOR QUOTATIONS OVER R30	RICE PAGE	OFFICIAL P

DIRECTORATE:

នល់ប្រទេសនៃបានប្រជាជាក្រុម <mark>នេះ</mark>

Bag X506, KOKSTAD' 4700

Comer of Elliot street & the Avenue Road, KOKSTAD, 4700

ADVERTISING DATE: 27 SEPTEMBER 2022

RFQ/ZNQ: EGU61/2022/2023

SERVICE PROVIDER TO TENDER FOR SERVICING KITCHEN EQUIPMENT

specification/ checklist. Bidders are invited to submit proposals/Quotations for the KITCHEN EQUIPMENT as per the

TO BE NON RESPONSIVE. MANDATORY DOCUMENTS TO BE SUBMITTED, FAILURE TO DO SO WILL LEAD

work; and Non-compliant will result to elimination factor. pin, Letter of good standing, 1ME CIDB Certificate; Three (03) traceable reference of similar report reflecting banking details, BB-BEE or sworn affidavit Tax clearance certificate or SARS E.G & Usher Memorial Hospital supply chain management will apply. A current CSD summary

2002, published in the Gazette on the 18 March 2020. Memorial Hospital will comply with the regulations made under the disaster Management Act, noon on the **04 OCTOBER 2022.** Public opening of tenders – in this regard E.G & Usher The Avenue Road Kokstad 4700. All quotations must be received not later than 11h00 before tender box situate at the main hospital gate "E.G & Usher Memorial Hospital" Ont of Elliot & determinant. Note: Bid document to be directed via hand delivery (or emailed) to the hospital Usher Memorial Hospital reserves the right not to appoint and value for money will be the key attach the above mentioned documentation will result to your bid to be non-responsive. $\mathbb{E} \odot \mathfrak{F}$ report must be attached (supplier number and unique registration reference number) failure to The price quoted must be firm and must be inclusive of VAT for vat vendors, CSD registration

(GOVERNMENT GAZETTE NO 40553 DATED 20 JANUARY 2017). DEFINED IN THE GOVERNMENT SUPPLY CHAIN MANAGEMENT REGULATIONS NO BIDS MILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE AS

and the second 严格 的第三人称 And the same द नक्षीत्रं व पुष्पात्रः $= \sum_{i \in \mathcal{N}} \left(\sum_{i \in \mathcal{N}_i} \left(\sum_{i \in \mathcal{N}_i} \sum_{j \in \mathcal{N}_i} \left(\sum_{i \in \mathcal{N}_i} \sum_{j \in \mathcal{N$

PROVINCE OF KWAZULU-NATAL DEPARTMENT OFPUBLIC WORKS PREVENTIVE MAINTENANCE SCHEDULE

SCHEDULE FOR SCHEDULE FREQUENCY TYPE OF SERVICE SERVICE PROVIDER P.M. SERVICE INSTALLATION NAME TEM 4, က <u>=</u> . INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED Electrical supply cable, conduit including earth continuity and Panel wiring Oven thermostat Indicator lights Control switches Oven door hinges and lubricate Cracks or distortion of heating surfaces Interior of oven Oven door balance Plate levelling screws Size of MCB Total amperage Wall isolator ORDER SIX MONTHLY KITCHEN EQUIPMENT ELECTRIC RANGE/GRILLER (Apply for V.O. as Applicable)
OTHER NON-SPECIFIED TIME
RUNNING REPAIRS DONE TAKEN RUNNING REPAIRS DESCRIPTION OF SPARES USED ۵T۲ QTY. SUBMIT QUOTATION OTHER REPAIRS REQUIRED DESCRIPTION OF OTHER REPAIRS REQUIRED REF CODE REF ORDER NO.: K5-002 EST. TIME REQ. DESCRIPTION OF SPARES REQUIRED QTY.

				K5-002	
				PAGE 2 OF 2	
RUNNING REPAIRS	OTHER	OTHER REPAIRS REQUIRED	IRED		
(Apply for V.O. as Applicable)	SUBMI	SUBMIT QUOTATION			
OTHER NON-SPECIFIED TIME DESCRIPTION OF QTY.	ατγ.	DESCRIPTION OF	EST.	DESCRIPTION OF	QTY.
m		OTHER REPAIRS	TIME	SPARES REQUIRED	
	***************************************	REQUIRED	REQ.		

TEM

INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED

IN ORDER P.M. SERVICE

15.

Check machine for corrosion, treat and touch up with paint

14.

Clean down

SIGNATURE:	TOTAL KM:	KM:	10:	KM:	To:	FROM:
		DATE:	SITE:	TIME ON SITE:	TIME OUT:	TIME IN:
NAME OF RESPONSIBLE OFFICIAL ON SITE:):	COMPANY NAME (BLOCK LETTERS):	COMPANY N
				ED:	NAME/S OF ASSISTANT/S: UNSKILLED:	NAME/S OF A
		and the second s		LLED:	NAME/S OF ASSISTANT/S: SEMI SKILLED:	NAME/S OF /
	TURE:	SIGNATURE:		TTERS):	NAME OF SERVICEMAN (BLOCK LETTERS):	NAME OF SE
OFFICIAL STAMP:			RRIED OUT	RVICE WAS CA	I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT	I CERTIFY TH

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF PUBLIC WORKS PREVENTIVE MAINTENANCE SCHEDULE

TYPE OF SERVICE SCHEDULE FOR SCHEDULE FREQUENCY KITCHEN EQUIPMENT ELECTRIC BOILING PAN - OIL JACKETED 6 MONTHLY

> REF CODE

X X14-001

INSTALLATION NAME REF

SEDV	SERVICE DROVIDER							ORDER No.:			
P.M. 0	P.M. SERVICE		RUNNING REPAIRS	nlicable			OTHER	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	RED		
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	N ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TIME	DESCRIPTION OF SPARES USED	QTY. EX SITE STOCK	QTY. EX FIRMS	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	QTY REQ.
	100				1111					- Tourist - Tour	
	Control switches				The state of the s						
2	Indicator lamps										
ώ	Electrical supply cable, conduit and sprague including earth continuity				A THE STATE OF THE						
4.	Condition of panel wiring		and the second s							i www.	
Ċι	All electrical connections for tightness										
Ć.	All isolator		THE PERSON NAMED IN COLUMN TO THE PE								
7.	Size of MCB		1,000					i wake			
œ.	Total element amperage		, production of the state of th								
Ġ	Condition of element gaskets		THE STATE OF THE S							The second secon	
10.	Oil level										
11	Condition of oil		The state of the s								
12	Oil leaks (cold and hot)		17.11		Auros a y			144.00		The state of the s	
13.	Date of last oil change							114444		- And	

P.M. SERVICE	ITEM INSTRU	14. Lid hings	15. Lid hand	16. Lid balance		17. Conditio					
ĬÍ	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	Lid hinges and lubricate	Lid handles and insulation	nce	Condition of liner	Condition of cladding	Water supply and valve for leaks	Drain spout for leaks or obstructions	own	- Constant	Take test sample of oil and submit for analysis
W. T.	N ORDER										
RUNNING REPAIRS (Apply for V.O. as Applicable)	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	sidestay .	THE PROPERTY OF THE PROPERTY O	and the state of t		NAME OF TAXABLE PARTY.			District Dis	and the state of t	
plicable	TIME										
	DESCRIPTION OF SPARES USED			111144477		The state of the s	· · · · · · · · · · · · · · · · · · ·		- National Control of the Control of	- Annual Control of the Control of t	
	QTY. EX SITE STOCK								- Address	# The state of the	
OTHER	QTY. EX FIRMS STOCK										
OTHER REPAIRS REQUIRED SUBMIT QUOTATION	DESCRIPTION OF OTHER REPAIRS REQUIRED	111111111111111111111111111111111111111	- Livery	73-17-1			111111111111111111111111111111111111111			******	
RED	EST. TIME REQ.										
	DESCRIPTION OF SPARES REQUIRED	- Constitution of the Cons		ii AMAAAA		ALLA CALLES CALLES CONTRACTOR CON	WANTED THE PROPERTY OF THE PRO	MANAGEMENT	44477	- Charles	
	QTY REQ.										

K14-001 PAGE 2 OF 3

NB If oil requires to be changed after analysis, the old oil must be returned to the supplier and not disposed of in the sewer or storm water.

REF : K CODE : K1-002

PREVENTIVE MAINTENANCE SCHEDULE DEPARTMENT OF PUBLIC WORKS PROVINCE OF KWAZULU-NATAL

: KITCHEN EQUIPMENT

TYPE OF SERVICE SCHEDULE FOR STEAM COOKING POTS

SERVICE PROVIDER SCHEDULE FREQUENCY P.M. SERVICE INSTALLATION NAME 4, ω Ņ Mali တ Q1 ço ဖွ 12 <u>:</u> <u></u> <u>5</u> 4, $\vec{\omega}$ ठ् INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED CHECK AND ADJUST AS REQUIRED Steam leaks Steam inlet valve Air relief valve Steam traps Water leaks Safety valve Drain spout leaks and obstruction Lid hinges and lubricate Water inlet valve is KwaZulu Natal-Works pressure label fitted and stamped Base for corrosion Inner liner for dents/cracks Lid counter weight and balance Cleanliness of exterior Lid handle and insulation External cladding ORDER (Apply for V.O. as Applicable)
OTHER NON-SPECIFIED TIMI
RUNNING REPAIRS DONE TAK RUNNING REPAIRS TIME DESCRIPTION OF TAKEN SPARES USED QUANTITY
EX
SITE FIRMS
STOCK STOCK DESCRIPTION OF OTHER REPAIRS SUBMIT QUOTATION OTHER REPAIRS REQUIRED REQUIRED REF ORDER No.: EST. TIME REQ. SPARES REQUIRED DESCRIPTION OF REO REO

ZNT2234-55G: 2011-2013

ITEM INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED ORDER RUNNING REPAIRS DONE TAKEN SPARES USED 17. NOTE date of last hydraulic test Hydraulic pressure test every 36 months - As per test program 18. Check machine for corrosion, treat	P.M. S	P.M. SERVICE		RUNNING REPAIRS (Apply for V.O. as Applicable)	able)					OTHER REPAIRS REQ SUBMIT QUOTATION	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	S REQUIRED
ADJUST, CLEAN AS REQUIRED ORDER NOTE date of last hydraulic test Hydraulic pressure test every 36 months - As per test program Check machine for corrosion, treat	TEM	INSTRUCTION: CHECK,	ž	OTHER NON-SPECIFIED	TIME	DESCRIPTION OF	<u>ા</u>	A	QUANTITY	JANTITY DESCRIPTION OF	DESCRIPTION OF EST.	DESCRIPTION OF EST.
NOTE date of last hydraulic test Hydraulic pressure test every 36 months - As per test program Check machine for corrosion, treat		ADJUST, CLEAN AS REQUIRED	ORDER	RUNNING REPAIRS DONE	TAKEN	SPARES USED	D Z		낒	EX OTHER REPAIRS	OTHER REPAIRS TIME	OTHER REPAIRS
							SITE		FIRMS	FIRMS REQUIRED	FIRMS REQUIRED REQ.	REQUIRED
							STC	Š	STOCK STOCK	OCK STOCK	OCK STOCK	OCK STOCK
	17.	NOTE date of last hydraulic test										
		Hydraulic pressure test every 36										
	ò	Check machine for corrosion, treat										

I CERTIFY THAT	I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT	E WAS CARR	ED OUT			OFFICIAL STAMP:
NAME OF SERV	NAME OF SERVICEMAN (BLOCK LETTERS):	₹\$):		SIGNATU	URE:	
NAME/S OF ASS	NAME/S OF ASSISTANT/S: SEMI SKILLED:	9				
NAME/S OF ASS	NAME/S OF ASSISTANT/S: UNSKILLED:					,
COMPANY NAM	COMPANY NAME (BLOCK LETTERS):					NAME OF RESPONSIBLE OFFICIAL ON
TIME IN:	TIME OUT:	TIME ON SITE:	ĪĘ:	DATE:		SITE:
FROM:	TO:	KM:	Т0:	X .	TOTAL KM:	SIGNATURE:

BIDDER'S DISCLOSURE

1.	PURP	OSE OF	THE	FORM
----	------	--------	-----	------

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

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

2	DIDD	EDIC	DECL	AD /	TION
۷.	טטום	EK O	DECL	.нк.	1 HUN

- 2.1. Is the bidder, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest¹ in the enterprise, employed by the state?

 YES/NO
- 2.1.1 If so, furnish particulars of the names, individual identity numbers, and, if applicable, state employee numbers of sole proprietor/directors / trustees / shareholders / members/ partners or any person having a controlling interest in the enterprise, in table below.

Full Name	Identity Number	Name of State Institution

- 2.2. Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution?
 YES/NO
- 2.2.1. If so, furnish particulars:
- 2.3. Does the bidder or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise whether or not they are bidding for this contract? YES/NO
- 2.3.1. If so, furnish particulars:

3. DECLARATION

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

I CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 1, 2 and 3 ABOVE IS CORRECT.

I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 6 OF PFMA SCM INSTRUCTION 03 OF 2021/22 ON PREVENTING AND COMBATING ABUSE IN THE SUPPLY CHAIN MANAGEMENT SYSTEM SHOULD THIS DECLARATION PROVE TO BE FALSE.

'			
Name of Bidder	Signature	Position	Date

¹ the power, by one person or a group of persons holding the majority of the equity of an enterprise, alternatively, the person/s having the deciding vote or power to influence or to direct the course and decisions of the enterprise.

² Joint venture or Consortium means an association of persons for the purpose of combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.

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

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

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

1. GENERAL CONDITIONS

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

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

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

2. DEFINITIONS

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

POINTS AWARDED FOR PRICE 3.

3.1 THE 80/20 PREFERENCE POINT SYSTEMS

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

$$Ps = 80 \left(1 - \frac{Pt - P \min}{P \min} \right)$$
 Where

Ps

Points scored for price of bid under consideration

Pt

Price of bid under consideration

Pmin

price of lowest acceptable bid

POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR 4.

In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for 4.1 attaining the B-BBEE status level of contribution in accordance with the table below:

B-BBEE Status Level of Contributor	Number of points (80/20 system)
1	20
2	18
3	14
4	12
5	8
6	6
7	4
8	2
Non-compliant contributor	0

5	RID	DECL	ARA	ATION

- Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following: 5.1
- B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1 6.
- B-BBEE Status Level of Contributor: =(maximum of 20 points)

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.

7.	SUB-CONTRACTING	(Tick		1
	applicable box)		YES	NO
7.1	Will any portion of the contract be sub-contracted?)
7.1.1	If yes, indicate:			ů.
e ^{rr} -	What percentage of the contract will be subcontracted The name of the sub-contractor	13.32		ion est
8.	iii) The B-BBEE status level of the sub-contractor	 Tick ap	plicable box)	Start Communication (Communication)
	iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise	e in terms of	YES	NO

Preferential Procurement Regulations,2017: Designated Group: An EME or QSE which is at last 51% owned by:	EME	QSE .
	V	
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	MATERIAL	
Any QSE		

9.	DECLARATION WITH REGARD TO COMPANY/FIRM				
9.1	Name of company/firm:	D			
9.2	VAT registration number:				
9.3	Company registration number:				
9.4	TYPE OF COMPANY/ FIRM [TICK APPLICABLE BOX]				
	 □ Partnership/Joint Venture / Consortium □ One person business/sole propriety □ Close corporation □ Company □ (Pty) Limited 				
9.5	DESCRIBE PRINCIPAL BUSINESS ACTIVITIES				
9.6	COMPANY CLASSIFICATION [TICK APPLICABLE BOX]				
9.0	 ☐ Manufacturer ☐ Supplier ☐ Professional service provider ☐ Other service providers, e.g. transporter, etc. 				
9.7	Total number of years the company/firm has been in busing	ness:			
9.8	I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based or the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm fo 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 be required to furnish documentary proof to the satis 	of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may faction of the purchaser that the claims are correct;			
	iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have —				
	(a) disqualify the person from the bidding process;				
	(b) recover costs, losses or damages it has incurred	or suffered as a result of that person's conduct;			
		ch it has suffered as a result of having to make less favourable			
	who acted on a fraudulent basis, be restricted by	areholders and directors, or only the shareholders and directors y the National Treasury from obtaining business from any organ ter the audi alteram partem (hear the other side) rule has been			
	(e) forward the matter for criminal prosecution.	de la destación de la destació			
	WITNESSES 1	SIGNATURE(S) OF BIDDERS(S)			
		DATE:			
	2				