### Quotation Advert

Opening Date:

18/01/2023

Closing Date:

06/02/2023

Closing Time:

11:00

INSTITUTION DETAILS

Institution Name:

King Edward VIII Hospital

Province:

KwaZulu-Natal

Department of entity:

Department of Health

Division or section:

Central Supply Chain Management

Place where goods/ service is required:

ST Aidans Hospital

Date Submitted:

17/01/2023

ITEM CATEGORY AND DETAILS

Quotation number:

ZNQ: KEV392/22 Re Advertised

Item Category:

Services

Item Description:

Kitchen Equipment Servicing: Quotation attached to the advert please print it and bring it with you for site briefing session so it can be signed and stamped failer to do so will result

to disqualification.

Quantity (if supplies):

Click here to enter text.

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type:

Compulsory Site Meeting

Date:

26/01/2023

Time:

10H00

Venue:

ST Aidans Hospital

QUOTES CAN BE COLLECTED FROM:

Quotes attached to the advert

QUOTES SHOULD BE DELIVERED TO:

Tender Box King Edward Hospital situated in the Admin

Block Off Sydney Road

ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:

Name:

Mr N Tsaulwayo/ Mr Eugen Allerston

Email:

Click here to enter text.

Contact number: 031 360 3707/ 060 470 6665

Finance Manager Name: Mrs .V. Mtantato Finance Manager Signature

### STANDARD QUOTE DOCUMENTATION OVER R30 000.00

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: KING EDWARD VIII HOSPITAL
DATE ADVERTISED: 2023-01-18 CLOSING DATE: 2023-02-06 CLOSING TIME: 11:00
FACSIMILE NUMBER: 031 205 6722 E-MAIL ADDRESS:
PHYSICAL ADDRESS: Gate 5 Francios Road Congella
QUOTE NUMBER: ZNQ / KEV / 392 / 2022 - 2023
DESCRIPTION: Kitchen Equipment Servicing (Re-Advertised)
CONTRACT PERIOD
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.
UNIQUE REGISTRATION REFERENCE
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS)
Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted for consideration.
The quote box is open from 08:00 to 15:30.
QUOTATIONS MUST BE SUBMITTED ON THE OFFICIAL FORMS - (NOT TO BE RETYPED)
THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2011, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.
THE FOLLOWING PARTICULARS MUST BE FURNISHED  (FAILURE TO DO SO MAY RESULT IN YOUR QUOTE BEING DISQUALIFIED)
NAME OF BIDDER
POSTAL ADDRESS
STREET ADDRESS
TELEPHONE NUMBER CODENUMBER FACSIMILE NUMBER CODENUMBER
CELLPHONE NUMBER
E-MAIL ADDRESS
VAT REGISTRATION NUMBER (If VAT vendor)
HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SBD 6.1)  [A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMES& QSEs) MUST BE SUBMITTED TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]

OFFICIAL	DD105 D 1 00				THE WEY LOOP	1 2005 0	005
					ZNQ/KEV / 392		8800
DESCRIPT	TION: Kitcher	n Equipment Servicing (Re-Adver	lised)				
[By signing	this documer	nt, I hereby agree to all terms and o	conditions]				
CAPACITY	UNDER WH	ICH THIS QUOTE IS SIGNED					******
Item No	Quantity	Description		Brand & model	Country of manufacture	Price R c	
	10 units	Kitchen Equipmen	t Servicing	model	manaractaro	K	C
		20 Vo					
							+
		Compulsory site briefing to atten	d faieler to so will result t			+	-
		to disqualifica					
					3	-	
							+
		2)			-0		
		4	e .				
	10 units Kitchen Equ			-			
							+
							1
and the second s	And the second s						
TOTAL QL	JOTATION PI	RICE (VALIDITY PERIOD 60 Days	3)				
Does This	Offer Comply	With The Specification?	Does The Article Specification?		The S.A.N.S. /	S.A.B.S.	
		with the openication?	State Delivery Period,		eek		
			T				

Enquiries regarding the quote may be directed to:

Contact Person: Mr. N. Tsaulwayo Tel: 031 360 3707

E-Mail Address: .....

Enquiries regarding technical information may be directed to:

Contact Person: Mr. Eugene Tel: 031 309 3274

### BIDDER'S DISCLOSURE

### 1. PURPOSE OF THE FORM

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

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

### 2. BIDDER'S DECLARATION

- 2.1. Is the bidder, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest<sup>1</sup> 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.

Identity Number	Name of State Institution
	Identity Number

- 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

- 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 consortium<sup>2</sup> 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

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

<sup>2</sup> 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.

### GENERAL CONDITIONS OF CONTRACT

### 1. AMENDMENT OF CONTRACT

1.1. Any amendment to or renunciation of the provisions of the contract shall at all times be done in writing and shall be signed by both parties.

### 2. CHANGE OF ADDRESS

2.1. Bidders must advise the Department of Health (institution where the offer was submitted) should their address (domicilium citandi et execulandi) details change from the time of bidding to the expiry of the contract.

### 3. GENERAL CONDITIONS ATTACHED TO THIS QUOTATION

- 3.1. The Department is under no obligation to accept the lowest or any quote.
- 3.2. The Department reserves the right to communicate in writing with vendors in cases where information is incomplete or where there are obscurities regarding technical aspects of the offer, to obtain confirmation of prices or preference claims in cases where it is evident that a typing, written, transfer or unit error has been made, to investigate the vendor's standing and ability to complete the supply/service satisfactorily.
- 3.3. ALL DECISIONS TAKEN BY THE DEPARTMENT ARE FINAL, INCLUDING THE AWARD OR CANCELLATION OF THIS QUOTATION.
- The price quoted must include VAT (if VAT vendor).
- 3.5. Should a bidder become a VAT vendor after award or during the implementation of a contract, they may not request the VAT percentage from the Department as the service provider made an offer during the period they were not registered as a VAT vendor. The Department is only liable for any VAT from registered VAT vendors as originally stated on the quotation document.
- 3.6. The bidder must ensure the correctness & validity of the quotation:
  - (i) that the price(s), rate(s) & preference quoted cover all for the work/item (s) & accept that any mistakes regarding the price (s) & calculations will be at the bidder's risk
  - (ii) it is the responsibility of the bidder to confirm receipt of their quotation and to keep proof thereof.
- 3.7. The bidder must accept full responsibility for the proper execution & fulfilment of all obligations conditions devolving on under this agreement, as the Principal (s) liable for the due fulfilment of this contract.
- 3.8. This quotation will be evaluated based on the 80/20 points system, specification, correctness of information and/or functionality criteria.
  All required documentation must be completed in full and submitted.
- 3.9. Offers must comply strictly with the specification.
- 3.10. Only offers that meet or are greater than the specification will be considered.
- 3.11. Late offers will not be considered.
- 3.12. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six months.
- Used/ second-hand products will not be accepted.
- 3.14. A bidder not registered on the Central Suppliers Database or whose verification has failed will not be considered.
- All delivery costs must be included in the quoted price for delivery at the prescribed destination.
- 3.16. Only firm prices will be accepted. Such prices must remain firm for the contract period. Non-firm prices (including rates of exchange variations) will not be considered.
- 3.17. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 3.18. In the event of a bidder having multiple quotes, only the cheapest according to specification will be considered.
- 3.19. Verification will be conducted to identify if bidders have multiple companies and are cover-quoting for this bid.
- 3.20. In such instances, the Department reserves the right to immediately disqualify such bidders as cover-quoting is an offence that represents both corruption and acquisition fraud.

### 4. SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS QUOTATION.

- 4.1. Unless inconsistent with or expressly indicated otherwise by the context, the singular shall include the plural and vice versa and with words importing the masculine gender shall include the ferminine and the neuter.
- 4.2. Under no circumstances whatsoever may the quotation/bid forms be retyped or redrafted. Photocopies of the original bid documentation may be used, but an original signature must appear on such photocopies.
- 4.3. The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated.
- 4.4. Quotations submitted must be complete in all respects. However, where it is identified that information in a bidder's response, which does not affect the preference points or price, is incomplete in any respect, the said supplier meets all specification requirements and scores the highest points in terms of preference points and price, the Department reserves the right to request the bidder to complete/submit such information.
- 4.5. Any alteration made by the bidder must be initialled; failure to do so may render the response invalid.
- Use of correcting fluid is prohibited and may render the response invalid.
- 4.7. Quotations will be opened in public as soon as practicable after the closing time of quotation.
- 4.8. Where practical, prices are made public at the time of opening quotations.
- 4.9. If it is desired to make more than one offer against any individual item, such offers should be given on a photocopy of the page in question. Clear indication thereof must be stated on the schedules attached.

4.10. The Department is under no obligation to pay suppliers in part for work done if the supplier can no longer for fulfil their obligation.

### 5. SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

- 5.1. Quotation shall be lodged at the address indicated not later than the closing time specified for their receipt, and in accordance with the directives in the quotation documents.
- 5.2. Each quotation shall be addressed in accordance with the directives in the quotation documents and shall be lodged in a separate sealed envelope, with the name and address of the bidder, the quotation number and closing date indicated on the envelope. The envelope shall not contain documents relating to any quotation other than that shown on the envelope. If this provision is not complied with, such quotations/bids may be rejected as being invalid.
- 5.3. All quotations received in sealed envelopes with the relevant quotation numbers on the envelopes are kept unopened in safe custody until the closing time of the quotation/bids. Where, however, a quotation is received open, it shall be sealed. If it is received without a quotation/bid number on the envelope, it shall be opened, the quotation number ascertained, the envelope sealed and the quotation number written on the envelope.
- 5.4. A specific box is provided for the receipt of quotations, and no quotation found in any other box or elsewhere subsequent to the closing date and time of quotation will be considered.
- 5.5. No quotation/bid sent through the post will be considered if it is received after the closing date and time stipulated in the quotation documentation, and proof of posting will not be accepted as proof of delivery.
- 5.6. Quotation documents must not be included in packages containing samples. Such quotations may be rejected as being invalid.

### 6. SAMPLES

- 6.1. In the case of the quote document stipulating that samples are required, the supplier will be informed in due course when samples should be provided to the institution. (This decreases the time of safety and storage risk that may be incurred by the respective institution). The bidders sample will be retained if such bidder wins the contract.
- (i) If a company's who has not won the quote requires their samples, they must advise the institution in writing of such.
- (ii) If samples are not collected within three months of close of quote the institution reserves the right to dispose of them at their discretion.
- 6.2. Samples must be made available when requested in writing or if stipulated on the document.
- (i) If a Bidder fails to provide a sample of their product on offer for scrutiny against the set specification when requested, their offer will be rejected. All testing will be for the account of the bidder.

### COMPULSORY SITE INSPECTION / BRIEFING SESSION

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

### 8. STATEMENT OF SUPPLIES AND SERVICES

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

### SUBMISSION AND COMPLETION OF SBD 6.1

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

### 10. TAX COMPLIANCE REQUIREMENTS

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

### 11. TAX INVOICE

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

### 12. PATENT RIGHTS

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

### 13. PENALTIES

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

### 14. TERMINATION FOR DEFAULT

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

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.

### GENERAL CONDITIONS

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

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

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

### 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:
  - 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;
- (i) "QSE" means a qualifying small business enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (j) "rand value" means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

### 3. POINTS AWARDED FOR PRICE

### 3.1 THE 80/20 PREFERENCE POINT SYSTEMS

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

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

Ps = Points scored for price of bid under consideration

Pt = Price of bid under consideration Pmin = price of lowest acceptable bid

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

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

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

Part .	TARES	IN PERSON	A 175 A 197	COLL
Pa.	14011	1.00-1.1	ARAT	er visi

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

### B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1

6.1 B-BBEE Status Level of Contributor: = ......(maximum of 20 points)

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

7.	SUB-CONTRACTING	(Tick		
	applicable box)		YES	NO
7.1	Will any portion of the contract be sub-contracted?			

7.1.1 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......

Whether the sub-contractor is an EME or QSE (Tick applicable box)

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 last 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		-3%
Any EME		
Any QSE		

9.	DECLA	RATION WITH REGARD TO COMPANY/FIRE	M			
9.1	Name	of company/firm:				
9.2	VAT	registration number:	***************************************			
9.3	Comp	pany registration number:				
9.4	TYPE	OF COMPANY/ FIRM [TICK APPLICABLE B	oxj			
		Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited				
9.5	DESC	CRIBE PRINCIPAL BUSINESS ACTIVITIES				
8						
9.6	COM					
		Manufacturer Supplier Professional service provider				
9.7	Total	number of years the company/firm has been in	n business:			
9.8	the B	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-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we acknowledge that:				
	i) ·	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;				
	.3 Comp .4 TYPE .3	disqualify the person from the bidding proc	ess;			
	(b)	recover costs, losses or damages it has inc	curred or suffered as a result of that person's conduct;			
9.6 COMF  9.7 Total (9.8 I/we, the Bathe pro ii) 17  iii) Iii iii) Iii iii) Iii iii) Iii (a) (b) (c) (d) (d)		cancel the contract and claim any damage arrangements due to such cancellation;	es which it has suffered as a result of having to make less favourable			
9.3 Company registration number:    TYPE OF COMPANY/FIRM [TICK APPLICABLE BOX]	cted by the National Treasury from obtaining business from any organ					
	(e)	forward the matter for criminal prosecution	•			
	WITI	NESSES				
	1.		SIGNATURE(S) OF BIDDERS(S)			
			DATE:			
9.6	2.		ADDRESS			



Quote Number:

Item Description: Service power factor systems

Department: Substation plants

Purpose of Item: Servicing

### 1. Pre-qualification criteria if any:

1.1. Is the works required to have a regulatory body certification (e.g. SABS, SANS, SANAS, ISO, CIDB, etc.)? Yes : Company to be CIDB 1ME registered SANS 10142 regulations shall apply to this tender SAQA

1.2. Is a compulsory site inspection / briefing session required? Yes / No

1.2. Is a compulsory site inspection / pricing accommodate ST Ardans Hospital if Yes, specify: Date OW/ 11 /2022 Time 11 HOO Place Maintenance ST Ardans Hospital

1.3 Is local production and content part of the quote? Yes / No

if Yes, specify:

1.4. Provisions of section 4(1) (a) of the PPPFA Regulations, 2017 if applicable? Yes

if Yes, specify: Procurement regulations

1.5 Liability Cover insurance? Yes

if Yes, specify: Yes; 3rd party liability cover/insurance

### What is the specification of the required item?

	Foreword	-
a	Safety first requirements: PPE:	
	All contractor staff entering these premises shall do so with hard tip safety shoes on feet and respiratory mask on face.	
	Compile and submit (non-returnable documents) safety file (related to the works below) to the safety officer on receipt of official order number of works with in TWO working days from official order date.	
	Standard conditions of contract form treasury, will apply to this contract.	
	Note: Winning bidder site hand over will only be conducted once e-mail confirmation has been received from safety officer, and will be done by Deputy Director Systems/ Acting Maintenance Manager.	
	Documents required for Site hand over is the following:  I. Advert page copy – Provided by contractor  II. Award page copy – Provided by contractor	
	<ul> <li>III. Complete copy of original tender submitted – Provided by contractor (Copy to be made prior submitting tender)</li> <li>IV. Official Order – Provided by contractor</li> <li>V. Work plan – Provided by contractor</li> </ul>	
	Site hand over certificate Provided by Deputy Director Systems/ Acting Maintenance Manager.	
b	Works to be carried out by Equipment specialists (Primary contractor) only and in compliance of all legislation and regulations applicable to mentioned woks.	
.c	Attach primary contractor trade tested employees comprehensive CV with coloured picture of person	
.d	Attached completed and consecutive daily execution plan of tasks that will be performed as per attach work plan format to tender. (Actual dates in the next column will be completed on the day of site hand over meeting with winning bidder).	



### **END-USER SPECIFICATION FORM**

2.f	Complete in every detail the BOQ – List materials to be used for each equipment	
2.g	Procurer contract exit clause	
	Should a provincial contract become active for this contract in this end user specification, then this contract will become null and void. Contractor will be notified accordingly.	
2.1	Works required:	Serviced: yes/no
2.1.1	Complete k2-002 service schedule for each tilting pan (x3)	Serviced, yes/no
2.12	Complete k3-002 service schedule for each Gas appliances (x1)	
2.1.3	Complete k5-002 service schedule for each Electric range griller (x3)	
2.1.4	Complete k8-002 service schedule for each Brine marino (x1)	
2.1.5	Complete k8-002 service schedule for each food tralley (x8)	
2.1.6	Complete k12-002 service schedule for each Dishwasher (x1)	
2.1.7	Complete k13-002 service schedule for each Extractor canopy (x1)	
2.1.8	Complete K14-001 service schedule for each Electric oil jacketed pot (x1)	
2.1.9	Complete LPG1-001 service schedule for each Lpg gas installations (x1)	
2.1.10	Complete K6-001 service schedule for each Toaster service (x1)	
2.2	Waste management requirements:	
2.2.1	Attach disposable certificate of any old oil, ghries or retrigorant or chemical that was removed quantity if applicable.	and certificate to also show
2.3	After service report requirements:	
2.3.1	Provide an after service report (in word format and email to KEH project leader) on completio requirements and attach copy to invoice	n of the service as below
2.3.2	Following items required:	
2.3.3	Date	
2.3.3	Date Description of works	
2.3.4		alled per unit or machine or
2.3.4	Description of works  Fully detailed model/part numbers and description of items to be repaired, replaced or reinstal equipment.	alled per unit or machine or
2.3.4 2.3.5 2.3.6	Description of works Fully detailed model/part numbers and description of items to be repaired , replaced or reinsta	alled per unit or machine or
2.3.4 2.3.5 2.3.6 2.3.7	Description of works  Fully detailed model/part numbers and description of items to be repaired, replaced or reinstate equipment.  Colour Photographic records/evidence of items to be repaired  Additional works carried out (if any)	alled per unit or machine or
	Description of works  Fully detailed model/part numbers and description of items to be repaired, replaced or reinstatequipment.  Colour Photographic records/evidence of items to be repaired	alled per unit or machine or

### Does a sample need to be submitted? No(select option 3.1 or 3.2)

3.1. Specify that samples must be made available when requested in writing. No

### 4. Penalties to be noted by the suppliers:

4.1. If the supplier fails to deliver any or all of the goods or to perform the services within the period(s) specified in the contract, the purchaser shall, without prejudice to its other remedies under the contract, deduct from the contract price, as a penalty, a sum calculated on the delivered price of the delayed goods or unperformed services using the current prime interest rate calculated for each day of the delay until actual delivery or performance.

5. What is the evaluation criteria / special terms and conditions to be advertised?

		terms and conditions to be advertised (if applicable)	Comply: yes/no
5.1	CIDB Rating	Company must be CIDB 1ME company registered in the field of this tender	
5.2	Staff qualification	Staff qualification –Electrician artisan Qualification trade tested in electrical engineering and minimum N4 cert	
5.3	Company own employed staff experience attending to	Company employed staff experience – Artisan/s Experience on power factor testing (after trade test)	



### END-USER SPECIFICATION FORM

	the works	employment certified letter/s required)	
.4	Functionality	Functionality - Compile complete bill of material (This is to be done per unit to be serviced on BOQ	
		Quote for all material needed to complete the works on quote form attached to tender (Example, Tender required	
		installation of item to be installed or sealed or painted or	
		<u>cleaned</u> — The BOQ do not reflect the required material (will result in 0 points and disqualification of tender).	
5.5	Works planning	Works planning - Submit execution plan of each consecutive day of what work/task will be done and in which area	
		The day 1 to day 20 (for example) will be utilized to describe each day of planed works.	
		Failure to submit this plan will result in disqualification of tender. Please note a column must be left open on the right.	
		hand side to indicate the actual dates from start to finish, when company has the official order.	
.6	Previous work experience	Letters from three (3) contactable references (not later than 2 years) from current clients/ customers of the contractor where they rate the following four (6) aspects of the bidder	
		and Documentation  • Professionalism	
		Quality of Service     Reporting and/or Completion Certificate Issue	
		Overall impression (would use again)	
		Certificate of Completion     Service Report	

Specificat	ion compiled by:	Specification approved by:	
Name	E. Allerston	Name	
Designation / Rank (in full)	Mechanical Supervisor	Designation/ Rank (in full)	
Signature		Signature	
Date		Date:	1.55

PROVIN	CE OF KWAZULU-NATAL - DEPARTMENT OF	HEALTH	
	NTENANCE, REPAIR OR REPLACEMENT OF KWAZULU-NATAL PROVINCIAL HOSPITAL A		QUIPMENT AND
SUBMIT TO:	FOR ATTE		
INSTITUTION:	ZNQ NO::		
SCOPE OF WORK: (A descripti	on of the work quoted for is required).		
I/We hereby quote for the above wo	rk in accordance with the conditions as specified	in Tender docume	ent.
Materials, component/ancillary parts	: Firm Price. A detailed list of materials etc. sho	wing unit costs sha	all be provided.
A. Quoted for Bought Out Item	s (Excluding VAT)(Carried forward	ĺ	R
Mark Up @ % (Ma	ximum Mark Up = 20% for values R0.00 to R5	(00.000 000	R
B. Quoted for Proprietary Item	(Excluding VAT)(Carried forward		R
C. Quote for Sub-Contract Iten	s (Excluding VAT)(Carried forward)	l s	R
Mark Up @ %			R
be used in pressure vessels and as Actual work shall be carried out by p D. Labour, Travelling, Subsiste	rimary contractor nce and Transport. This price shall be firm in re	spect of	R
materials etc. quoted for.	(Excluding VAT) (Brought forwar	a)	
E. Less credit for redundant m	aterials, parts and equipment if applicable	OUDTOTAL	R( )
		SUBTOTAL	R
		VAT @ %	R
	firm for 90 days from date of the estimate que be measured on completion.	otation and	R
Time required for completion .	weeks from receipt of official order		
NAME OF SERVICE PROVIDER:		ZNQ	/20
CIDB UNIQUE NUMBER		CIDB CATEGORY	, 
PROVINCIAL SUPPLIERS DATABA	ASE REGISTRATION NUMBER:		
SERVICE PROVIDER'S AUTHORIS	SED SIGNATURE:	ZNQ No	
NAME IN BLOCK LETTERS:			******
COMPANY STAMP:	DA	TE	

### SCHEDULE OF PRICES: MATERIALS, COMPONENT/ANCILLARY PARTS AND SUB CONTRACT WORK

The service provider shall add here,  $\underline{ALL}$  materials, components/ancillary parts which are required for the completion of the work quoted for.

In the event that more pages are required, this page may be copied.

ITEM	DESCRIPTION	MANU- FACTURER	/MODEL NO.	QUANTITY	COST		TOTAL COST	
						BOUGHT OUT	PRO- PRIETARY	SUB CONTRAC
				·			8	
					,		5	
								2
							÷	
								a.
							20	
		TOTAL	L COST BOU	L JGHT OUT IT	EMS (A)			
				COST PROPE		ITEMS (B)		
							T ITEMS (C)	

TOTAL AMOUNT (A) (B) (C) TO BE CARRIED FORWARD TO PAGE 1

### D.1 SCHEDULE OF PRICES LABOUR, SUBSISTENCE, TRAVEL AND TRANSPORT REPLACEMENT AND ADDITIONAL EQUIPMENT

D.1.1	LABOUR	No. of	TOTAL HOURS	RAT	E/HR	AMOUNT
a)	Artisans		101 OCST-93110011	R 3	00.00	R
b)	Apprentice					
	1 <sup>st</sup> Year	******		R 1	18.00	R
	2 <sup>nd</sup> Year			R 1	50.00	R
	3 <sup>rd</sup> Year	************		R 1	80.00	R
	4 <sup>th</sup> Year			R2	65.00	R
c)	Semi-skilled			R 14	2.00	R
d)	Unskilled	111111111111		R	75.00	R
D.1.2	TRAVEL		TOTAL Km	RAT	E/Km	
D.1.2.1 a)	From service provider's premises to sitetrips(Driver)			Petrol Delete as	Diesel applicable	
b)	(skilled)  @km per trip trips (Semi-skilled)(Driver)  @km per trip		3	R 7.78	R 7.58	R
D.1.3	ADDITIONAL LABOUR TRAVELLING WITH DR	IVER	TOTAL HOURS	RAT	ΓΕ/HR	AMOUNT
a)	x Additional Artisan/s trips (skilled) @ trip ÷ 80km/hr		(484-84-2020 (1000)	R 3	00.00	R
b)	x Additional Semi-Sk trips (semi) @ per trip ÷ 80km/hr		SECULO SECULO SE	R 1	42.00	R
c)	x Additional Unskilled trips (unskilled) @ trip ÷ 80km/hr		-11-11-11-11-11-11-11-11-11-11-11-11-11	R	75.00	R
d)	x Additional Apprenti trips (semi) @ per trip ÷ 80km/hr		ummummum.	R.,		R
	100	SUBT	OTAL CARRIED F	ORWARD	TO PAGE 4	R

	SUB	TOTAL BROUGHT FORW.	ARD FROM PAGE 3	R
D:1.4	TRANSPORT	TOTAL Km	RATE	
a)	Haulage to site trips			
	@km per trip	2.5 tone	R 9.31	R
	@km per trip	3 tone	R10.80	R
	@km per trip	5 tone	R12.50	R
	@km per trip	7 tone	R14.50	R
	@km per trip	10 tone	R16.80	R
b)	Cranage to and on site @ sub contract rate	R	x 1.10	R

TOTAL AMOUNT CARRIED FORWARD TO PAGE 1 ITEM (D) R .

K2-002 PAGE 1 OF 2

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

KITCHEN EQUIPMENT TILTING PAN/FISH FRYER TYPE OF SERVICE SCHEDULE FOR SCHEDULE FREQUENCY

REF

REF

K2-002

SIX MONTHLY INSTALLATION NAME SERVICE PROVIDER

SER	SERVICE PROVIDER :							ORDER No. :			
P.	P.M. SERVICE		RUNNING REPAIRS	old o city			OTHE	OTHER REPAIRS REQUIRED	JIRED		
TEM	INSTRUCTION: CHECK ADJUST	2	OTHER NON-SPECIFIED TIME	TIME	DESCRIPTION OF	VTO	SUBIN	SUBINIT QUOI A HON	too	DO NOT DE COSTO	210
	CLEAN AS REQUIRED	ORDER	RUNNING REPAIRS DONE	TAKEN	SPARES USED	5	2	OTHER REPAIRS RECUIRED	REQ.	SPARES REQUIRED	2
	Control switch and indicator lamps										70 × 177
2	Electrical supply cable, conduit and sprague including earth continuity										
eó	Condition of panel wiring										
4	All electrical connections for tightness										
ю.	Wall isolator										
9	Size of MCB										
142	Total amperage of elements										
οú	Tilt mechanism – adjust as required										
6	Lid hinges, springs and lubricate										
10.	Lid handle and insulation						6				
5	External appearance and cleanliness										
12	Internal for defects										
13.	Condition of baskets (Fish Fryer)										

7.M. 1 15.	D M SERVICE		ACTION OF THE PERSON NAMED IN CONTRACTOR								
15. 15. 15.			RUNNING REPAIRS (Apply for V.O. as Applicable)	pplicable	_		SUBA	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	JIRED		
4 6 6	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TAKEN	DESCRIPTION OF SPARES USED	OF QTY.		DESCRIPTION OF OTHER REPAIRS REQUIRED	TIME TREO.	DESCRIPTION OF SPARES REQUIRED	S F
19.	Condition of exposed elements (Fish Fryer)										
18.	Clean down										
	Check machine for corrosion: treat and touch up with paint	-									
NAME	NAME OF SERVICEMAN (BLOCK LETTERS):	K LETTE	RS):		SIGNATURE:	URE:					
NAME	NAME/S OF ASSISTANT/S: SEM! SKILLED:	II SKILLE	ED:								
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K3-002 PAGE 1 OF 2

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

SCHEDULE FOR SCHEDULE FREQUENCY INSTALLATION NAME TYPE OF SERVICE

KITCHEN EQUIPMENT GAS APPLIANCES

SIX MONTHLY

K3-002 REF CODE

SERVICE PROVIDER

ORDER No .:

REF

P.M.	P.M. SERVICE		(Apply for as Applicable)	ble)			SUBM	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	UIRED		
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TIME	DESCRIPTION OF SPARES USED	αTY.	ату.	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME	DESCRIPTION OF SPARES REQUIRED	QTV.
	Regulator and priping										
2.	Shuttle valve					-					
100	Flame control										
4	Jers										
40	Clean down					-					
ej.	Check machine for corrosion treat and touch up with paint										

NAME OF SERNAME/S OF AS NAME/S OF AS COMPANY NAME	NAME OF SERVICEMAN (BLOCK LETTERS):  NAME/S OF ASSISTANT/S: SEMI SKILLED:  NAME/S OF ASSISTANT/S: UNSKILLED:  COMPANY NAME (BLOCK LETTERS):  TIME IN:  TIME OUT:  TIME OUT:	TERS): LED: D: TIME ON SITE:	SITE:	SIGNAT	SIGNATURE:	NAME OF RESPONSIBLE OFFICIAL ON SITE:
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K5-002 PAGE 1 OF 2

# PROVINCE OF KWAZULU-NATAL DEPARTMENT OFPUBLIC WORKS PREVENTIVE MAINTENANCE SCHEDULE

TYPE OF SERVICE SCHEDULE FOR SCHEDULE FREQUENCY INSTALLATION NAME

SERVICE PROVIDER

KITCHEN EQUIPMENT ELECTRIC RANGE/GRILLER SIX MONTHLY

K K5-002 REF

ORDER NO .:

REF

P.M.	P.M. SERVICE		(Apply for V.O. as Ap	(S Applicable)			OTHE	OTHER REPAIRS REQUIRED SHRMIT CHOTATION	UIRED	
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TAKEN	DESCRIPTION OF SPARES USED	αTY.	QTY.	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED
100	Control switches					-				
121	Indicator lights									
es.	Oven thermostat									
4	Fanel wiring									
чэ	Electrical supply cable, conduit including earth continuity and sprague									
cri.	Wall isolator									
<u>ا</u>	Total amperage									
80	Size of MCB									
0	Cracks or distortion of neating surfaces									
30.	Plate levelling screws									
Ξ	Oven door hinges and lubricate									
12.	Oven door balance									
13.	Interior of aven									

K5-002

P.M.	P.M. SERVICE		RUNNING REPAIRS	REPAIRS					OTHE	OTHER REPAIRS REQUIRED	UIRED		
			(Apply for V.O. as Applicable)	(.0. as App	olicable)				SUBM	SUBMIT QUOTATION			
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	T, IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	SECIFIED AIRS DONE	TAKEN	DESCRIPTION OF SPARES USED	OF	QTY.	QTY.	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	ату.
4.	Clean down												
5.	Check machine for corrosion, treat and touch up with paint	4											
I CEF	I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT	ED SERVI	CE WAS CAR	RIED OUT						OFFICIAL STAMP:			
NAM	NAME OF SERVICEMAN (BLOCK LETTERS):	CK LETTE	RS):			SIGNATURE:	TURE:						
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NAMI	NAME/S OF ASSISTANT/S: UNSKILLED:	SKILLED:											
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TIME IN:	IN: TIME OUT:	2	TIME ON	ON SITE:		DATE:			Ï				i :
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### ST AIDEN'S PREVENTIVE MAINTENANCE SCHEDULE

SCHEDULE FOR SCHEDULE FOR SCHEDULE FREQUENCY

AUTOMATIC BREAD TOASTER ALAUTOMATIC BREAD TOASTE YEARLY

KEF : K6-001
CODE : K6-00

SN	INSTALLATION NAME :						QUOTE No.:			
SER	SERVICE PROVIDER :						ORDER No.:			
P.M	P.M. SERVICE		REPAIRS NEEDED			OTHE	OTHER REPAIRS REQUIRED	URED		
HEV	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED.	YeseNo	DESCRIPTION OFF REPAIRS TO BE DONE	DESCRIPTION OF SPARES LISED	XIO XIO	O IV	DESCRIPTION OF OTHER REPAIRS REQUIRED	HIME REQ.	DESCRIPTION OF SPARES REQUIRED	ČE
-	GENERALINSPICTION									
Ξ	Clean toaster his defand datisale									
e i	Is all hearing elements finer in ting.									
- 3	Confirm e entant themasticus wardung									
<del>+</del>	Cheek bread teeding grid has no missing or broker links									
4: -	Check bread feeding and sprockets and charm is not worth									
1.6	Cheek all indicator lamps is working									
1.5	Check power cord and plug for breakages									

I CERTIFY THAT THE SPECIFIE	I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT		OFFICIAL STAWIT.
NAME OF SERVICEMAN (BLOCK LETTERS):	OK LETTERS):	SIGNATURE:	
NAME/S OF ASSISTANT/S: SEMI SKILLED:	MI SKILLED:		
NAME/S OF ASSISTANT/S: UNSKILLED:	SKILLED:		
COMPANY NAME (BLOCK LETTERS):	TERS):		NAME OF RESPONSIBLE OFFICIAL ON SITE:
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	, C. F.	KM: TOTAL	SIGNATURE:
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K8-002 PAGE 1 OF 2

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

KITCHEN EQUIPMENT SCHEDULE FOR SCHEDULE FREQUENCY TYPE OF SERVICE

BAIN MARIE/FOOD TROLLEY SIX MONTHLY

K K8-002 REF

REF

INSTALLATION NAME

ORDER No.: SERVICE PROVIDER

P.M.	P.M. SERVICE		RUNNING REPAIRS	olicable			OTHE	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	JIRED		
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	ORDER	OTHER NON-SPECIFIED TIME RUNNING REPAIRS DONE TAKEN	TAKEN	DESCRIPTION OF SPARES USED	QTY.	OTY.	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	QTY.
85	Electrical supply cable/cathyra/ plugtop including earth continuity										
ž.	Control switch										
m	Indicator lights										
4	Wall isolator/switch plug										
ю	Elements and washers										
ω	Panel wiring										
le <sup>2</sup>	Amperage										
တ်	For Bain Marie MCB size										
oi	Steam supply										
10.	Control valve										
11.	Condensate return										
15.	Steam coil										
13.	Steam/condensate leaks										

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

TYPE OF SERVICE SCHEDULE FOR SCHEDULE FREQUENCY

INSTALLATION NAME

SERVICE PROVIDER

KITCHEN EQUIPMENT DISHWASHER

REF

K K12-002

ORDER No .:

REF

P.M.	P.M. SERVICE		RUNNING REPAIRS (Apply for V.O. as Applicable)	plicable)			SUBM	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	JIRED		
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	IN	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TAKEN	DESCRIPTION OF SPARES USED	QTY.	QTY.	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	αТΥ.
-	MECHANICAL										
=	inspectment of the operation and check following:										
1.2	Rinse nozzles intact, clean and in position										
60	Wash arm nozzles intact, clean and in position										
4.1	Revolving arm upper and lower moving freely and not fouling										
5.5	Hood or door lifting mechanism working efficiently										
(O	Overflow plug is efficient										
F:	Pump suction hate cover in position and effective										
£.	Dishwasher basket guide frame in position – check if revolving arms foul underside of basket										
2.	ELECTRICAL										_
2.	Switch on machine and allow tank to fill automatically (ave. 10-15 min) Check:										
2.2	If tank element switches on when water level controlled by a pressure switch)										

2.3 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			Annly for V O as Ani	a design			SUE	SUBMIT QUOTATION			1000000
	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	IN	OTHER NON-SPECIFIED TIME RUNNING REPAIRS DONE	TIME	DESCRIPTION OF SPARES USED	JF QTY.		DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	QTY.
	Dial thermometer for temperature										
	Normal main tank temp: 60°C Normal rinse tank temp: 90°C										
	Select a cycle and operate machine										
25	Check wash and rinse cycle are functioning:										
H	Wash cycle: = 120 sec. Rinse cycle: ± 30 sec.										
2.6	While machine is in operation, check water mains connection to solenoid, and all hose connections to and from pump and finse tanks for leaks. In addition check connections to work and rinse aids.										
6	Check machine for corrosion, treat and touch up with paint										
NOTE: I	NOTE: In hard water areas the build up of scale will have to be periodically removed from main and rinse tank elements. Also wash and rinse arms.	d up of sc	ale will have to be perioc	tically rer	noved from m	ain and rinse	s tank elen	nents. Also wash and	d rinse a	rms.	
ICERT	I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OU	D SERVI	CE WAS CARRIED OU	_				OFFICIAL STAMP:	IP:		
NAME	NAME OF SERVICEMAN (BLOCK LETTERS):	K LETTE	RS):		SIGNATURE:	URE:					
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K13-002 PAGE 1 OF 2

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

SCHEDULE FOR SCHEDULE FREQUENCY TYPE OF SERVICE

KITCHEN EQUIPMENT EXTRACT CANOPY

REF

K K13-002

INST	INSTALLATION NAME							. HE			
SER	SERVICE PROVIDER :							ORDER No.:			
P.M.	P.M. SERVICE		RUNNING REPAIRS (Apply for V.O. as Applicable)	policable			OTHE	OTHER REPAIRS REQUIRED	UIRED		
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TIME	DESCRIPTION OF SPARES USED	УТФ.	aTY.	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST.	DESCRIPTION OF SPARES REQUIRED	
-	Remove and clean filters										
2.	Degreese and clean canopy drain and ducting										
69	Check lighting										
4	Check contactor and D/L setting										
ю	Check electrical connections										- 1
9	Check motor fan and blades										
7.	Check mountings										
6	Check sound afternator										
ග	Megger test motor										
10.	Check exhaust cowl										
÷	Compile and submit extraction kitchen canopy compliance certificate that it has been serviced in compliance with relevant sans. ISO codes for kitchen extractor canopies.										1

NAME OF SER	NAME OF SERVICEMAN (BLOCK LETTERS):	NAME OF SERVICEMAN (BLOCK LETTERS):		SIGN	SIGNATURE:	
NAME/S OF AS	NAME/S OF ASSISTANT/S: SEMI SKILLED:	LLED:				
NAME/S OF AS	NAME/S OF ASSISTANT/S: UNSKILLED:	ED:				
COMPANY NA	COMPANY NAME (BLOCK LETTERS):	::				
						NAME OF RESPONSIBLE OFFICIAL ON SITE.
TIME IN:	TIME OUT:	TIME ON SITE:	SITE:	DATE:	iii	
FROM:	TO:	KM:	TO:	KM:	TOTAL KM:	SIGNATURE:

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

YEARLY SCHEDULE FREQUENCY TYPE OF SERVICE SCHEDULE FOR

LIQUID PETROLEUM GAS ALL LP GAS INSTALLATIONS

REF

LPG LPG1-001

REF

INSTALLATION NAME

OTY. DESCRIPTION OF SPARES REQUIRED EST TME REQ. OTHER REPAIRS REQUIRED ORDER No.: SUBMIT QUOTATION
OTY. DESCRIPTION OF
OTHER REPAIRS
REQUIRED OTY. DESCRIPTION OF SPARES USED (Apply for V.O. as Applicable) TAKEN RUNNING REPAIRS OTHER NON-SPECIFIED RUNNING REPAIRS DONE NORDER This test requires a MANOMETER PRESSURE GUAGE TEST KIT with installed and containers are in good Check that containers are correctly Enclosures, brackets and supports Check manifold and pigtails are in INSTRUCTION: CHECK, ADJUST CLEAN AS REQUIRED condition. (Cylinders to be stored good condition where applicable Check that enclosure is properly perishing. Replace if necessary Check all piping for corrosion or damage. Replace if necessary Check that air vents in cylinders to be de-rusted and painted as enclosure are properly placed TESTING LOW PRESSURE Check that warning signs at locked to prevent tampering Check all rubber hoses for anclosure are free of any GENERAL INSPECTION SERVICE PROVIDER upright only) rubber hose P.M. SERVICE abstruction required STAGE ITEM 4. 1.5 1.7 7 2

P.M.	P.M. SERVICE			(S Applicable)	-		SUBN	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	UIRED		
ITEM	INSTRUCTION: CHECK, ADJUST, IN CLEAN AS REQUIRED ORI	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TIME	DESCRIPTION OF SPARES USED	Ω. YT0	ο 	DESCRIPTION OF OTHER REPAIRS REQUIRED	TIME REQ.	DESCRIPTION OF SPARES REQUIRED	1000
2.2	Purge all air from each gas outlet point	W 3									
23	Fit rubber hose of manometer guage onto furthest outlet point and allow 10 minutes for temperature equalization with cylinder valve open.										
2.4	Shut cylinder valve. Shut gas cock at manomelar gauge or damp rubber hose off and allow system to stand for 80 minutes (Pressure reacing should be ± 2.8xPA).										
80 P	After 50 minutes open gas book and note pressure reading. A pressure drop of more than 0.2kPA indicates that there is a leakage in the system.										1
2.6	Using a solution of soapy water and a paint brush test all fittings and connections and leak located and rectify.										
ei	TESTING HIGH PRESSURE STAGE										
- mi	Close off all tow pressure gas cocks and appliances										1
3.2	With main cylinder valve open, check all high pressure valves, fitting and regulator for leaks using a solution of spagy water and paint brush. Rectify any leaks.										
4	TESTING APPLIANCES										
4-	Check operation of each burner or jet on each appliance ensuring operation controls are correctly adjusted to burn a clear flame and lock adjustment.										
4.2	Check that plot flame and flame failure devices are functioning correctly										
4.3	Check all water heaters for water discharge temperature and ensure adjustments are correctly set.										

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OFFICIAL STAMP:				OFFICIAL ON OTHER	NAME OF RESPONSIBLE OFFICIAL ON SILE:	SIGNATURE:
	SIGNATURE:				DATE:	KM: TOTAL KM:
I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT	TERS):	LED:	Ö:		TIME ON SITE:	KM: TO:
AT THE SPECIFIED SER	NAME OF SERVICEMAN (BLOCK LETTERS):	NAME/S OF ASSISTANT/S: SEMI SKILLED:	NAME/S OF ASSISTANT/S: UNSKILLED:	COMPANY NAME (BLOCK LETTERS):	TIME OUT:	10:
I CERTIFY THA	NAME OF SER	NAME/S OF AS	NAME/S OF AS	COMPANY NAI	TIME IN:	FROM:

### ANNEXTURE B

MAINTENANCE, REPAIR, UP PROVINCIAL ADMINISTRAT	PGRADING AND REPLA ION HOSPITALS BUILD	CEI	MENT WORKS F S FOR THE DE	OR KWA	AZULU-NATAL IT OF HEALTH	
	JOB SHEET/D	A	Action and the contract of the			
NAME OF SERVICE PROVID	ER:		THE STATE OF STATE	JOI	B No.:	
INSTITUTION:					ZNQ/KM/	
REF No.:	FROM:				START:	
ORDER No.:	TO:			Km	ARRIVE:	
DATE:	FROM:				DEPART:	
PLANT:	TO:			Km	END:	
VEHICLE: STATE PETROL C	R DIESEL:		TOTAL	Km	TOTAL SITE TIME:	
DETAILS OF WORK DONE:					1,50	
OTHER DEFECTS NOTED FO		TY	SPARES USED	) (Add page	es if required) QTY	
	TOTA	AI S				
LABOUR	,,,,,	IN	Io. DAYS UBSISTENCE	NAME/S	OF ARTISAN	
SKILLED: NORMAL TIME	HRS			SIGNAT	URE:	
O/TIME 1.5 x HRS	2 x HRS		2	NAME/S OF ASSISTANTS:		
SEMI SKILLED: NORMAL TIME	HRS			NAME/S:		
APPRENTICE: NORMAL TIME	HRS				NAME/S:	
UNSKILLED. NORMAL TIME	HRS			NAME/S	1	
THE SPECIFIED SERVICE HA		C	PFFICIAL STAME	The second second		

### ANNEXTURE D

CARRY OUT (TYPE OF WORKS).....

NOTE: WORK PLAN IS SUBJECTED TO WEATHER CONDITIONS

				freithtional araign	stacemond	
	Day "A"	Date "B"	Completed	leader signature	STEERING	
	Planed	Actual	Yes/Partially/No			
Date official order was received.						
Weet and handing in of safety file at safety officer	Day 1					
Safety file approval	Day 2					
File opening and pre-bnefing meeting (Prior starting the works)	Day 3					
Meeting minutes signed by company director Department/PLANT	Day 4					
n No.	236					
Description of work to be done (for each day)						
	Day 5					
	Day 6					
	Day 7					
Department/PLANT						
	Day 8					
	Day 9					
	Day 10					
	Day 11					
Department/PLANT						
	Day 12					
	Day 13					
	Day 14					
	Day 15					

Day 16

Equipment No/Room No.		
	Day 17	
	Day 18	
	Day 19	
	Day 20	
	Day 21	
Department/PLANT Equipment No/Room No.		
	Jay 22	
	Day 23	
	Day 24	
	Day 25	
	Day 28	
Department/PLANT Equipment No/Room No.		
	Day 27	
	Day 28	
	Day 25	
	Day 30	
	Day 31	

Company project leader (Block Letters)	Company project leader Signature
Company CEO/Director (BLOCK LETTERS)	Company CEO/Director Signature.

Company dated stamp

K13-002 -

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

TYPE OF SERVICE SCHEDULE FOR SCHEDULE FREQUENCY

KITCHEN EQUIPMENT EXTRACT CANOPY

K K13-002 REF

ORDER No.: REF ٠. INSTALLATION NAME SERVICE PROVIDER

P.M.	P.M. SERVICE		(Apply for V.O. as Ap	0	657		OTHE	OTHER REPAIRS REQUIRED SUBMIT QUOTATION	UIRED		
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TIME	DESCRIPTION OF SPARES USED	QTY.	aTY.	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	ED
÷	Remove and clean filers										
2	Degrease and clean canopy, drain and ducting										
ri	Check lighting						<u>.</u>				
4.	Check confactor and O/L setting						2				
5.	Check electrical connections										
છ	Check motor, fan and blades										
7.	Check mountings										
ဆ	Check sound attenuator								8		
Ġ	Megger test motor										
10	Check exhaust cowl										
E	Compile and submit extraction kitchen canopy compliance certificate that it has been serviced in compliance with relevant sans. ISO codes for kitchen extractor canopies										

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OFFICIAL STAMP:					NAME OF RESPONSIBLE OFFICIAL ON SITE:		SIGNATURE:
	SIGNATURE:					DATE:	KM: TOTAL KM:
WAS CARRIED OUT						TIME ON SITE:	KM: TO:
I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OU	NAME OF SERVICEMAN (BLOCK LETTERS):	NAME/S OF ASSISTANT/S: SEMI SKILLED:	NAME/S OF ASSISTANT/S: UNSKILLED:	COMPANY NAME (BLOCK LETTERS):		TIME OUT:	то:
I CERTIFY THAT 1	NAME OF SERVIC	NAME/S OF ASSIS	NAME/S OF ASSI	COMPANY NAME		TIME IN:	FROM: