Quotation Advert

Opening Date:

30/01/2023

Closing Date:

07/02/2023

Closing Time:

11:00

INSTITUTION DETAILS

Institution Name:

Othobothini CHC

Province:

KwaZulu-Natal

Department of entity:

Department of Health

Division or section:

Central Supply Chain Management

Place where goods/

Othobothini CHC D850 Road next to Msiyane High School Jozini 3969

service is required:

Date Submitted:

27/01/2023

ITEM CATEGORY AND DETAILS

Quotation number:

ZNQ: OTH/192/22-23

Item Category:

Services

Item Description

PEST CONTROL SERVICE

Quantity (if supplies):

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type:

Compulsory Site Meeting

Date:

02/02/2023

Time:

10:00AM

Venue:

QUOTES CAN BE COLLECTED FROM:

OTHOBOTHINI CHC DURING SITE MEETING

QUOTES SHOULD BE DELIVERED TO:

OTHOBOTHINI CHC, QUOTATION BOX/EMAIL TO

othobothini.quotations@gmail.com

ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:

Name:

MR Z.V MTHIYANE

Email:

Othobothini.quotations@gmail.com

Contact number: 035 572 9002

Finance Manager Name:

Miss NP DUBE Finance Manager Signature

SPECIFICATION FOR THE PEST CONTROL SERVICE AT OTHOBOTHINI COMMUNITY HEALTHCARE CENTRE AND THE FIVE ATTACHED CLINICS (JOZINI CLINIC, MAKATHINI CLINIC, OPHONDWENI CLINIC, NONDABUYA CLINIC, GWALIWENI CLINIC)

This quotation calls for a competent month to month service of pest control at the Othobothini CHC and its five attached clinics for a period of one year.

REQUIREMENTS:

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- The contractor will be requested to visit the CHC and the five clinics to view the area and structures.
- The contractors are also advised to be present at the site meeting in case of anything that might be discussed outside the specification.
- The competent workman skilled in their trades shall carry out all work.
- During the progress of work the contractor shall carefully clean up after his/her men and shall leave the area and the portion of the building clean and free from debris.
- The contractor must provide proof or license for conducting pest control services:
 - 1. Valid certificate of pest control from Department of Agriculture/_P Number certificate.
 - 2. Valid certificate with SA Pest Control Association.
 - 3. Letter of Good Standing with the Compensation (COIDA)
 - 4. Companies must be registered on CSD
 - 5. Letter of Good Standing from the Department of Labour.
- The chemicals used must be SABS approved and authorised to be used for hospital environment.
- The contractor will be required to conform to the security and other regulations imposed by the Health Services Department and in addition are to provide suitable means of identification of all workman employed on his/her work to the approval of the CHC and its five clinics.
- The contractor is also advised to comply with Health and Safety regulations while performing duties on the CHC and its 5 clinics premises
- No variation will be entertained for non-compliance with paragraph one (1) of this document.

NOTE: The contractor will also provide service to the CHC and its 5 clinics staff residence.