

Quotation Advert

Opening Date

27/08/2024

11:00

Closing Date

02/09/2024

Closing Time

INSTITUTION DETAILS

Institution Name

Eshowe Hospital

Province

KwaZulu-Natal

Department of entity:

Department of Health

Division or section :

Central Supply Chain Management

ESHOWE DISTRICT HOSPITAL

Place where goods/ service is required:

Date Submitted

2024/08/27

ITEM CATEGORY AND DETAILS

Quotation number :

ESW/158/24-25

Item Category

Goods

Item Description

Major service to five standby generation for the clinics

Quantity (if supplies):

PER QUOTE

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type

Date

Time

Click here to enter text.

Venue

QUOTES CAN BE COLLECTED FROM:

Eshowe District Hospital/KZN websites

QUOTES SHOULD BE DELIVERED TO:

Eshowe hospital tender box OR email to

Quotations.Eshowe@kznhealth.gov.za

ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:

Name

Ntombela N/Zulu S

Email

Nomathemba.Ntombela2@kznhealth.gov.za

Contact number

0354734597/4664

Finance Manager(Acting) Name:

Mrs PG Biyela

Finance Manager(Acting Signature



| YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: ESHOWE HOSPITAL |
|--|
| FACSIMILE NUMBER: 0354749439 E-MAIL ADDRESS: Quotations. Eshowe@kznhealth.gov.za |
| PHYSICAL ADDRESS: 40 KANGELA STREET ESHOWE |
| QUOTE MUMBER: ZNQ / ESW / 158 / 24-25- VALIDITY (*ERIOD: 90 DAYS |
| DATE ADVERTISED: 27/08/2024 CLOSING DATE: 02/09/2024 CLOSING TIME: 11:00 |
| DESCRIPTION: MAJOR SERVICE TO FIVE STANDBY GENERATORS FOR THE CLINICS |
| CONTRACT PERIOD (IF APPLICABLE): ONCE OFF |
| DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS): 40 KANGELA STREET, ESHOWE 3815 |
| |
| ENOURIES REGARDING THE QUOTE MAY BE DIRECTED TO: CONTACT PERSON: N NTOMBELA TELEPHONE NUMBER: 035 473 4594 |
| E-MAIL ADDRESS: Nomathemba Nfombela2@kznhealth.gov.za |
| ENQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO: |
| CONTACT PERSON: December 7. July 63 and 1. July 64 |
| E-MAIL ADDRESS: BONGA.ZURUQUKZNRESHID.GOV.ZS Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted for consideration. |
| SECTION 2 PURCHES LIGHT CHARGES are Desirable Distances from the Country of the C |
| The quote box is open from 08:00 to 15:30. |
| QUOYATIONS 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, 2022, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT. |
| THE FOLLOWING PARTICULARS OF BIDDER MUST REFURNISHED (FAILURE TO DO SO MAY RESULT IN YOUR QUOTE BEING DISQUALIFIED) |
| NAME OF BIDDER: |
| E-MAIL ADDRESS: |
| POSTAL ADDRESS: |
| STREET ADDRESS: |
| TELEPHONE NUMBER: FACSIMILE NUMBER: |
| CELL'PHONE NUMBER: SARS PIN: |
| VAT REGISTRATION NUMBER (If VAT vendor): |
| CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO. M A A A A |
| UNIQUÉ REGISTRATION REFERENCE: |
| |



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| QUOTE NUMBER | t ZNO | , ESW | , 15B | 24-25 | | | | | |
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| Promotion of Soul | h African Own | red Enterprises | l ., | | | | | 20 | |
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| | | | AS PER SPE | CIFICATION | ATTACHED | | | | |
| · · | | <u> </u> | PLEASE ATT | FACH THE FF | DOCUMENTS | | | | |
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| VALUE ADDED | TAX @ 15% | Only If VAT | Vendar) | | | | | | — |
| TOTAL QUOTA | TION PRICE | (VALIDITY P | ERIOD 90 Days) | | | | | | |
| IS THE PRICE | FIRM? | | SPECIFICATION? | | 47 | | | Y | 'ES / NO 'ES / NO 'ES / NO |
| STATE DELIVE | RY PERIOD | (E.G. 3 DAYS | , 1 WEEK) | | | | | | |
| NAME OF BIOD | XER: | | | | StGNATURE OF BI | DDER: | ve paron to all fa- | and possible se | 1 |
| | | | | | (Ey signing this doc | uident, i hefet | | | |
| CAPACITY UNI | DER WHICH | THIS QUOTE | IS SIGNED: | | | | DATE: | | <u>-</u> |



BIDDER'S DISCLOSURE

1 PURPOSE OF THE FORM

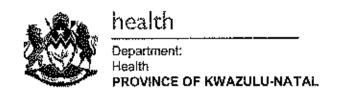
Any person (astural or juristic) may make an offer or offers in terms of this invitation to bid. In line with the principles of transparency, accountability, impartiality, and elities as ensistined in the Constitution of the Republic of South Africa and further expressed in various pieces of tegislation,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

Where a person's are fisted in the Register for Tender Defaulters and I or the List of Restricted Suppliers, that person will automatically be disqualified from the 3id process.

| ž 2.1. | BIDDER'S DECLARATION Is the bidder, or any of its directors / to enterprise, employed by the state? | zsloca / shareholdera / members / parkn | ers or any person having a cor | ধানো ng interest ¹ in গৈ c | YES / NO |
|------------------|---|---|--|---|--------------------------------|
| 2.t.1. | If so, furnish carrieulars of the names | individual (dentity numbers, and, if oppi ny parson having a controlling Interest i | cable, state employee numbers | s of sale proprietor/ directors | / (pustees / |
| | FULL NAME | IDENTITY NUMBER | NA! | HE OF STATE INSTITUTION | 1 |
| | | | | | |
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| | | | | - propurine inclidukan? | YES (NO |
| 2,2, | Do you, or any person connected with | the bidder, have a relationship with any | person who is amproyed by in | E bigging ingulation | 120 1 110 |
| 2.2.1. | If so, furnish padiculæs: | | | | |
| 2.3. | Does the bidder or any of its directors enterprise have any interest in any other | / trastees / shareholders / members / pr en releited exterprise whether or not the | nthers or say person having a y are bidding for this contract? | controlling interest in the | YES I NO |
| 2.3.1. | If so, turnish particulars: | | | | |
| 3 . | DECLARATION | | | | |
| | t, the condensigned (name) the following statements that I certify to | o be true and complete in every respect | | itting the accompanying bid, I | do hereby make |
| 3.1. | have read and I randerstand the cont | ents of this disclosure; | | | |
| 3.2. | I understand that the secompanying b | ld will be disquelified if this disclosure is anying bid independently from, and with | tound not to be true and comp | riele in avary respect; on, apraement or arrangemen | nt with any |
| 3.3. | I he coder has arrived at the accomp competitor. However, communication | between parlners in a joint venture or c | onsortium ² will not be construe | d as colpisive bidding. | |
| 3,4, | In addition, there have been no const specifications, prices, including the ho submit the file, bidding with the intent relates. | Nations, communications, agreements of ds, tactors or formulas used to calculati on not to win the bid and conditions or o | or arrangements with any comp e prices, market allocation, the felivery particulars of the produ | ether regarding the quality, q intention or decision to subm lots or services to which this i | et or not to aid invitation |
| 3.5. | The terms of the accompanying bid in time of the citical bid opening or of the | eve not boon, and will not be, disclosed a awarding of the contract. | | | |
| 3.6. | relation to this procurement process p histilution; and the bidder was not inv | mmunications, agreements of affainger rior to and during the bidding process o dived in the drafting of the specifications | except to provide clarification or sor terms of reference for this i | n the 1920 submilliad where so aid. | ledrates på rae |
| 3.7. | I am aware that, in addition and withouse auspicious will be reported to the | uf prejudice to any exhar romedy provid Conspecifion Consmission for investigativ and or may be reported to the National With the public sector for a period not ex- | ed to combat any restrictive pro on and possible imposition of a Prosecuting Authority (NPA) fo | actices related to bids and co dministrative paneliles in tem x criminal investigation and o | ns of section 59 r may be |
| I CERT | INFY THAT THE INFORMATION FURN | SMED IN PARAGRAPHS 1, 2 and 3 At | OVE IS CORRECT. | | |
| I ACCE PREVE | EPT THAT THE STATE MAY REJECT! ENTING AND COMBATING ABUSE IN | THE BID OR ACT AGAINST ME IN TER THE SUPPLY CHAIN MANAGEMENY | RMS OF PARAGRAPH 6 OF P SYSTEM SHOULD THIS DEC | FMA SOM INSTRUCTION 03 LARATION PROVE TO BE F | 3 OF 2021/22 ON ALSE. |
| | NAME OF BIDDER | SIGNATURE | POSITION | AC DA | TE |

^{1.} The power, by one person or a group of persons holding the majority of the equity of an exterpoise, alternatively, the personal having the deciding vote or power to industric critic direct the course and decisions of the enterprise.

² Joint venture or Consortium means an especiation of persons for the perpose of conducing that expendse, property, capital, affords, skill and anomicage in an exclusiy for the execution of a conduct.



THE SERVICING, REPAIR AND MAINTENANCE OF FIXED MECHANICAL PLANT, EQUIPMENT AND INSTALLATIONS INSTALLED IN KWAZULU-NATAL PROVINCIAL ADMINISTRATION BUILDINGS AND INSTITUTIONS FOR THE DEPARTMENT OF HEALTH

| <u>ZNQ</u> | | | | | |
|--------------------------------|-------------------------|--|--|--|--|
| QUOTATION DOCUMENT CONTENTS | | | | | |
| PART ONE | : | INVITATION TO QUOTE | | | |
| PART TWO | : | PARTICULAR SPECIFICATION | | | |
| PART THREE | : | TECHNICAL SPECIFICATIONS | | | |
| PART FOUR | : | QUOTATION FORM | | | |
| PART FIVE | : | OFFICIAL ONSITE BRIEFING CERTIFICATE | | | |
| PART SIX | : | DECLARATION OF INTEREST | | | |
| PART SEVEN | : | EXECUTION PLAN | | | |
| NAME OF INSITUTION | : | ESHOWE DISTRICT HOSPITAL | | | |
| SERVICE | : | MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC. | | | |
| CONTRACTORS NAME | : | | | | |
| BID AMOUNT (Vat incl.) | : | R (Vat incl.) | | | |
| BRIEFING DATE | : | | | | |
| CLOSING DATE | : | | | | |
| CENTRAL SUPPLIERS DA | ATABAS | E SUPPLIER NO : | | | |
| UNIQUE REGISRATION REFERENCE : | | | | | |
| CIDB CATEGORY | : 2EB AND 2ME AND ABOVE | | | | |
| | , | | | | |

CLIENT

Department of Health

Project Leader: B.Mngomezulu

Telephone: 035 473 4548 Fax : 035 474 9414

Contractors Initials

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

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THE SERVICING, REPAIR AND MAINTENANCE OF FIXED MECHANICAL PLANT, EQUIPMENT AND INSTALLATIONS INSTALLED IN KWAZULU-NATAL PROVINCIAL ADMINISTRATION BUILDINGS AND INSTITUTIONS FOR THE DEPARTMENT OF HEALTH

NAME OF INSITUTION

: ESHOWE DISTRICT HOSPITAL

SERVICE

: MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC.

PART ONE

INVITATION TO QUOTE

STANDARD BID SPECIFICATION

INVITATION

YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF KING CETSHWAYO HEALTH DISTRICT OFFICE ON BEHALF OF ESHOWE DISTRICT HOSPITAL

| BID NUMBER | : | <u>ZNQ</u> |
|------------------------|---|--|
| SITE INSPECTION DATE | : | |
| TIME | : | |
| CLOSING DATE | : | ···- |
| TIME | : | ···· |
| DESCRIPTION OF SERVICE | : | SERVICING STANDBY GENERATOR AND CLEANING OF DIESEL |

CONTRACT PERIOD

ONCE OFF

VALIDITIY PERIOD

60 DAYS

BID DOCUMENTS TO BE PLACED IN A SEALED ENVELOPE, THE FRONT OF THE ENVELOPE BEING CLEARLY ENDORSED WITH THE BID NO. SERVICE TYPE AND DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)

ESHOWE DISTRICT HOSPITAL 40 KANGELA STREET ESHOWE 3815

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

The bid box is available on the following days and times: Monday to Friday 08H00 - 15H00

ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS - (NOT TO BE - TYPED)

THIS BID IS SUBJECTED TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATION, 2011, THE GENERAL CONDITIONS OF CONTRACT (GCC), IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.

| Contractors | Initials | |
|-------------|----------|------|

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

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THE SERVICING, REPAIR AND MAINTENANCE OF FIXED MECHANICAL PLANT, EQUIPMENT AND INSTALLATIONS INSTALLED IN KWAZULU-NATAL PROVINCIAL ADMINISTRATION BUILDINGS AND INSTITUTIONS FOR THE DEPARTMENT OF HEALTH

NAME OF INSITUTION : ESHOWE DISRICT HOSPITAL

SERVICE

: MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC.

PART TWO

PARTICULAR SPECIFICATION

- 1. General Requirements
- 2. Site and Mode of Procedure
- 3. Scope of Contract

1. GENERAL REQUIREMENTS

Tenderers are to make special note of the following:

The whole Service shall be in accordance with the Occupational Health and Safety Act 85/1993 and all regulations framed therein shall be carried out to the satisfaction of the Department of Health at **ESHOWE DISTRICT HOSPITAL**

Competent workmen skilled in their trade shall carry out all work. Quality shall be of the best standard practice and all workmanship will be subject to the approval of the Department of Health.

The work shall at all times, for the duration of the contract, be carried out under the supervision of a skilled and competent representative of the Contractor, who will be able and authorized to receive and carry out instructions on behalf of the Contractor. A sufficient number of workmen shall be employed at all times to ensure satisfactory progress of the work.

All apparatus, component parts, fittings and materials employed in the execution of the Contract shall be new and unused and shall be the latest type or pattern of the particular manufacture employed. S.A.N.S. mark bearing items shall be used wherever possible.

The minor repairs must be guaranteed against defective parts and workmanship for a period of twelve (12) months after the date of issue of the Completion Certificate. This period shall run concurrently with the maintenance period.

Rates are to include for commissioning and testing of the complete installation and handing over in working order ready for use.

Tenderers are advised to visit the site and acquaint themselves fully with the site conditions and nature and full extent of work involved prior to submitting their tender. Claims on the grounds of insufficient information in such respects or otherwise will not be entertained by the Administration.

The Administration reserves the right to make emergency repairs to keep the equipment in operation without voiding the Contractor's Guarantee, nor relieving the Contractor of his responsibility during the guarantee period when, after proper notice, the Contractor fails to attend to such emergency repairs. All costs incurred by the Administration under these circumstances will be for the account of the Contractor.

2. SITE AND MODE OF PROCEDURE

The work contained in this contract will be carried out on the site of the existing ESHOWE DISTRICT HOSPITAL

The Bidder is advised that the existing premises will be occupied throughout the period of the contract, and that the minimum amount of disruption to services is of the utmost importance.

Damage to the existing buildings - Bidders to note that any damages done or occurring to any of the buildings will be repaired at the expense of the contractor/ Bidder.

SATISFACTORY INSTALLATION

The whole of the Service shall be carried out in accordance with the South African Bureau of Standards Code of Practice for the application of National Building Regulations, the KZNPA Standard Preambles to all Trades, the KZNPA General Electrical Specification, ICASA, Telecommunications regulations, the South African Bureau of Standards Code of Practice for the Wiring of Premises SABS 0142 and the Occupational Health and Safety Act and Regulations 85/1993 as amended.

Copies of the KZNPA Standard Preambles to all Trades and the KZNPA General Electrical Specification are available at the office of the Secretary for Health – KwaZulu-Natal and can be obtained on request.

CERTIFICATE OF COMPLIANCE

On completion of the service, a copy of the "Structural Compliance Certificate" must be submitted to the office of the Secretary for Health: Kwa-Zulu Natal. (N/A)

GENERAL

The Bidders / Contractors will be responsible for all masonry/civil work associated with the minor repairs and making good of all work related to the installation. The patching and painting must be to the satisfaction of the KwaZulu-Natal Department of Health

3. SCOPE OF CONTRACT

 CONTRACTOR TO PROVIDE REGULAR PREVENTATIVE MAINTENANCE SERVICING STANDBY GENERATOR AND CLEANING OF DIESEL EMERGENCY REPAIRS ESHOWE DISTRICT HOSPITAL

CONDITIONS OF CONTRACT AND PRELIMINARIES

PERIOD OF CONTRACT

Twelve Months (12) as the Contract Period for the completion of the Work from date of Site handover. The awarded contract must resume work after Seven (7) working days, after receiving an official order from the Department

CONTRACT GUARANTEE:

The Successful Bidder will NOT be required to submit a contract guarantee.

GUARANTEE PERIOD

The guarantee period for the completion of the Structural / Mechanical / Electrical work and all materials must be a minimum of Twelve (12) Calendar Months from the date of first delivery.

| Contractors | Initials | | | | <i>.</i> |
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PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

THE SERVICING, REPAIR AND MAINTENANCE OF FIXED MECHANICAL PLANT, EQUIPMENT AND INSTALLATIONS INSTALLED IN KWAZUŁU-NATAL PROVINCIAL ADMINISTRATION BUILDINGS AND INSTITUTIONS FOR THE DEPARTMENT OF HEALTH

NAME OF INSITUTION : ESHOWE DISTRICT HOSPITAL

SERVICE

: MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC.

PART THREE

TECHNICAL SPECIFICATION

4. TECHNICAL SPECIFICATION

GENERAL

This TECHNICAL SPECIFICATION shall be read in conjunction with all other sections of the SPECIFICATION and cognisance shall be taken of the clauses relevant to this particular installation, whether any specific clauses are referred to or not.

1. GENERAL

- 1.1 This Contract is to provide regular Preventative Maintenance Service and Emergency Repairs to the Equipment owned by Eshowe District Hospital
- 1.2 The Purpose of contract is to ensure that the Autoclaves are maintained timeously and kept in a safe Working order.

2. SPECIFIED EQUIPMENT

The following Eshowe District Hospital equipment will be maintained

- 2.1 Volvo Generator
- 2.2 Mallerri Generator

3. PREVENTATIVE MAINTENANCE SERVICING

- 3.1 Contractor will provide regular services on a 6 months interval on the specified equipment. This is in Accordance with the procedures contained in the Maintenance Schedule.
- 3.2 Services including preventative maintenance, emergency repairs and major service these items will be Be attended to separately and when required by legislation under the current occupational Health and Safety Act and on instruction by Eshowe District Hospital.

4. EMERGENCY REPAIRS

Contractor will ensure that all emergency call-out are treated as a priority and will be attended to as soon as possible within 24 hours when being notified by Eshowe District Hospital.

5. COST OF MAINTENANCE

5.1 The equipment will be serviced every 6 months for major service as per manufactures equipment standard.

6. GUARANTEE

6.1 All materials supplied by Contractor are guaranteed for 6 months.

7. EFFECTIVE DATE AND PERIOD OF AGREEMENT

| 7.1 This agreement will be effective from the | and will be for a period of 12 months. This |
|---|---|
| Agreement may be cancelled by either party giving the | other 90 days' notice. |

8. BREACH

- 8.1 Should either party hereto breach or fail to comply with any term or condition of this agreement, then the non-defaulting party shall be entitled:-
- 8.1.1 To enforce specific performance of the provisions of this agreement
- 8.1.2 To cancel this agreement (either as an alternative to a claim for specific performance or upon the abandonment of such a claim)
- 8.2 Provided the non-defaulting party has first given the defaulting party written notice to rectify such breach or failure within 7 (seven) days after receipt of such notice, and the defaulting party has failed to comply therewith. Written notice of any such cancellation shall be given to the defaulting party and such cancellation shall take effect on the giving of such notice.
- 8.3 The exercising by any party hereto of any right conferred by the foregoing provisions of this clause shall be without prejudice to any claims of such party hereunder then accrued or to any other right or remedy of such party.

9. INDEMNITY

Eshowe District Hospital is against any claims made against Eshowe District Hospital or any of its directors, officers, employees, agents, subcontractors or any other of its personnel, by any third party, arising out of or in connection with this agreement or the services.

10. REQUIREMENT

- 1. CONTRACTOR MUST HAVE PROOF OF EXPERIENCE FOR THIS NATURE OF WORK (PROOF MUST BE SUBMITTED)
- 2. CONTRACTOR MUST HAVE DEM (ORIGINAL EQUIPMENT MANUFACTURER) FOR GENERATOR (PROOF OF REGISTRATION MUST BE SUBMITTED) STANDBY GENERATORS FALLS UNDER SPECIALISED EQUIPMENTS THEREFORE ONLY DEM TO SERVICE AND MAINTAIN GENERATOR
- 3. PROOF OF 5 (FIVE) YEARS EXPIRIENCE AND QUALIFICATIONS MUST BE SUBMITTED TOGETHER WITH THIS DOCUMENT

1. DOCUMENT RECEIVED (YES/ NO)

| DOCUMENTS | RECEIVED (YES/ NO) |
|------------------------|-----------------------|
| Program of Work | |
| Health and Safety Plan | |
| Contractor Organogram | |
| | |

2. Evaluation Criteria

The bidder is to submit the following for Evaluation purpose

| DOCUMENTS | RECEVEIVED (YES / NO) |
|---|--------------------------|
| Proof of CIDB Grading 2 EB and 2 ME AND ABOVE | Mandatory |
| Qualified personnel registration with South African Qualification and Certification Committee, minimum category A. | Mandatory |
| Certificates of qualified personnel (Electrical and Mechanical technician- | Mandatory |
| trade tested). | |

11. PREVENTATIVE MAINTENANCE EVERY THREE MONTHS

- 1... Check fan belt
- 2... Check condition of fan belt
- 3... Check tension of fan belt and adjust if necessary
- 4... Check pulleys of fan belt
- 5. .. Clean radiator air passage & check that the coolant is at the correct level
- 6... Check that oil cooler air passages are clear-clean if necessary
- 7... Check all radiator hoses and clamps
- 8... Check oil level of fuel pump cam box and governor
- 9, .. Check fuel pump drive shaft and couplings
- 10. Check oil level
- 11. Check fuel filters, primary fuel filters/water traps
- 12. Bleed fuel system
- 13. Remove air filter
- 14. Check turbo for free rotation and bearing wear
- 15. Check seal faces of elements, air cleaner hoses and clamps for dust ingress
- 16. Fit new or clean air filter (washable paper air filters to be washed 3 times before discarding)
- 17. Check jacket water heater is operating
- 18. Check that all gauges are in position and secure
- 19. Check battery charger
- 20. Check log volts
- 21. Check log amps
- 22. Check battery water-top up if necessary
- 23. Check battery cable lugs, clean and tighten as required
- Start engine and run on load for 20 minutes and record the following (obtain permission before proceeding)
- 25. Check voltage
- 26. Check amperage
- 27. Check Hz
- 28. Check oil pressure
- 29. Check water temperature
- 30. Check oil temperature
- 31. Listen for unusual noises
- 32. Check for oil and water leaks and repair if necessary
- 33. Check alternator coupling and terminals
- 34. Blow dust out of alternator/ generator
- 35. Check all air vents on alternator/generator are clean and secure
- 36. Check fuel tanks
 - a) Drain off water
 - b) Check level control switch
 - c) Check electric pump
 - d) Check hand pump
 - e) Check low level fuel alarm
 - f) Check low fuel alarm
 - g) Check engine cut out alarm

Submit report for Preventative Maintenance to Maintenance Manager

| - 4 | 1 |
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Note to Contractors:

- 4.1. Servicing on all equipment to be completed within 7 days from receiving an official order.
- 4.2. Original service schedules to be signed on a daily basis, by technician and Completed schedules must be left with the maintenance manager onsite.
- 4.3. Please take note that during the servicing of equipment, these service schedules replaces the normal Job cards.
- 4.4. This office to be notified in advance to arrange for an onsite inspection after completion of the Servicing so as to finalize the payment. No payment will be done should incomplete service Schedules are handed in on completion.
- 4.5 No additional work to be done on servicing order, a detailed quotation for after service repairs must be Submitted whereby if approved a separate order will be issued to cover the repairs
- 4.6 Contractors to attach proof of experience for the similar nature of work.

SERVICE SCHEDULES

4.6 SERVICE SCHEDULES FOR MAJOR SERVICE OF GENERATORS MUST BE COMPLETE ONSITE DURING THE ACTAUL SERVICING OF STANDBY GENERATOR AS PER MANUFACTURERS RECOMMODATIONS. AND MUST BE HANDED OVER TO CHIEF ARTISAN AFTER COMPLETION OF SERVICES

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

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THE SERVICING, REPAIR AND MAINTENANCE OF FIXED MECHANICAL PLANT, EQUIPMENT AND INSTALLATIONS INSTALLED IN KWAZULU-NATAL PROVINCIAL ADMINISTRATION BUILDINGS AND INSTITUTIONS FOR THE DEPARTMENT OF HEALTH

NAME OF INSITUTION

: ESHOWE DISTRICT HOSPITAL

SERVICE

: MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC.

PART FOUR

QUOTATION FORM: (LABOUR, SUBSISTENCE, TRAVEL AND TRANSPORT TO BE ALLOWED FOR IN THE FINAL PRICE OFFER)

- 1. Preamble to Schedule of Prices
- 2. Official Quotation Documents
 - Schedule of Prices Materials, Components/Ancillary Parts and Sub Contract work

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Contractors initials

SCHEDULE OF PRICES: PREAMBLE TO THE SCHEDULE OF PRICES

- All prices shall be quoted in the currency of the Republic of South Africa and will be fixed. Only where
 exchange rates have been stated in the quotation document, as at two weeks (14 days) prior to closing
 date of this quotation, will such exchange rate fluctuation be taken into account in the variation of the
 cost of the imported items/equipment.
- The Tenderer shall enter a price against each item in the schedule of prices. If the Tenderer fails to enter a price against any item in the schedule of prices the relevant cost of such item shall be regarded as being covered by other prices in the schedule of prices.
- 3. The prices quoted against each item of these schedules shall cover the full inclusive cost of everything required for the execution of the work under the item plus an apportionment of any cost involved in meeting the obligations and liabilities imposed by the conditions of contract and in complying with the specifications.
- 4. The prices quoted for the supply of plant and equipment shall include for all handling, loading, transporting and off-loading required for the delivery of the plant and equipment to the site, including in the case of off-site storage for double handling at the store.
- 5. The prices quoted for erection and installation shall include for all handling, loading, transporting and off-loading, to take plant and equipment to place on site where required, erection, installation, painting, commissioning, operating, testing, adjusting, handling over in proper working order and guarantee for a period of 12 months, all as specified.
- The tendered rates and amounts must exclude Value Added Tax (VAT) but must include all levies, other taxes and duties on items to which they apply. Separate provision has been made in the Summary of Schedule of Prices for the purpose of VAT.
- 7. Amounts allowed for contingencies will be spent in part or as a whole at the sole discretion of the Department of Health's "Representative".
- 8. The Schedule of Prices shall be completed and signed in **black ink**. Corrections must be done by deleting, re-writing and initialing next to the amendment.
- Electrical and Mechanical work is not measured according to the Standard Procedures of Building Work.
- 10. Itemized list of Materials/ Spares Parts/Equipment showing unit cost, contractors mark up and subtotal.
- 11. Vat and Grand Total.
- 12. The Contractor's attention is drawn to the following, which under no circumstances will be acceptable and will result in the automatic disqualification of the quotation.
 - Use of correcting fluid i.e. Tippex on the quotation documents.
 - Faxed quotations
 - Photocopies of quotations

Contractors Initials

SCHEDULE OF PRICES: WORK TO BE DONE AND SCHEDULE OF PRICES:

| TEM | DESCRIPTION | UNIT | QTY | RATE/ UNIT | AMOUNT |
|----------|--|--|----------|---------------|--------|
| | NOTE: All rates for items contained in this Schedule of Prices must be computed excluding the applicable Sales Tax. | | | | |
| | All rates quoted shall be inclusive of transport, Labor. Profit and the cost to obtain Material or Equipment and necessary Certificates. | | | | |
| | The Administration reserves the right to Negotiate prices in the Bill of Quantities | | 7 | | |
| | Bidders are advised that the buildings will be occupied during the duration of this contract. | | | | |
| | PLEASE NOTE: Sizes given are for quotation purposes only, Contractor responsible for final measurements. | or o | | | |
| | PROPRIETARY ARTICLES: All equipment and material used in this contract shall be that which is specified or other approved. | | | | |
| | CONTRACT GUARANTEE: The Bidders must allow for all charges in connection with acquiring the Contract guarantee, which is to be furnished. | 171 | | | |
| | INSTITUTION: ESHOWE DISRICT HOSPITAL | | | | |
| | SERVICE SERVICING OF STANDBY GENERATORS | | <u> </u> | | |
| l | MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC. | | 200 | В | D |
| 2 | Issue service certificate | Item Item | 05 01 | R R | R |
| 3 | 3 Months Preventative maintenance and issuing of Report | ; Item | 01 | R | R |
| <u>_</u> | PROVISIONAL SUMS | 1 | 1 | 1 | |
| 4 | Allow 20% for any after service Repairs on major service | Item | 01 | R | R |

SCHEDULE OF PRICES
LABOUR, SUBSISTENCE, TRAVEL AND TRANSPORT REPLACEMENT

| 6.3.1 | LABOUR | TOTAL HOURS | RATE/HR | AMOUNT |
|---------------------|---|----------------|--|-------------|
| a) | Artisans | | R | R |
| b) | Apprentice 1st Year 2nd Year 3rd Year 4th Year | | R R R R | R R R |
| c) | Semi-skilled | ,,,,,,,, | R | R |
| d) | Unskilled | | R | R |
| 6,3.2 | SUBSISTENCE | TOTAL DAYS | RATE / 24HR DAY | |
| а) | Artisans | | R | |
| b) | Apprentice | | R | |
| c) | Semi-skilled | | R | |
| d) | skilled | | R | |
| 6,3.3 | TRAVEL | TOTAL Km | RATE/Km | |
| 6,3.3.1 a) b) | From contractor's premises to sitetrips (skilled) @km per triptrips (Semi-skilled) @km per trip | | Petrol Diesel Delete as applicable R R | R |
| 6.3.3.2 a) b) | From accommodation to sitetrips (skilled) @km per triptrips (semi-skilled) @km per trip | | R R | R |
| 6.3.4 | TRANSPORT | TOTAL Km | RATE | |
| b) | Cranage to and on site @ sub contract rate | R | x 1.10 | R |

| SUB-TOTAL (B) | R |
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PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

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THE SERVICING, REPAIR AND MAINTENANCE OF FIXED MECHANICAL PLANT, EQUIPMENT AND INSTALLATIONS INSTALLED IN KWAZULU-NATAL PROVINCIAL ADMINISTRATION BUILDINGS AND INSTITUTIONS FOR THE DEPARTMENT OF HEALTH

NAME OF INSITUTION

: ESHOWE DISTRICT HOSPITAL

SERVICE

: MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC.

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Contractors Initials

PART FIVE

OFFICIAL ONSITE BRIEFING ATTENDANCE CERTIFICATE

CERTIFICATE OF TENDERER'S ATTENDANCE AT COMPULSORY PRE-TENDER BRIEFING MEETING

| NAME OF INSITUTION | : ESHOWE DISTRICT HOSPITAL |
|-------------------------------|---|
| SERVICE | : MAJOR SERVICE 05 STANDBY GENERATORS TO THE CLINIC |
| | |
| CLOSING DATE | : |
| TENDER NUMBER | : <u>ZNQ</u> |
| This is to certify that I | |
| A representative of (Tendere | r) |
| of Address: | |
| | |
| | ······································ |
| Telefax No.: | |
| Attended the Pre-Tender Bris | efing Meeting on (date) |
| And at the following venue (n | nark in appropriate block): |
| ESHOWE DISTRICT HOSPITAL | |
| TENDERER'S REPRESENT | ATIVE |
| EMPLOYER'S REPRESENT | TATIVE |
| DEPARTMENTAL STAMP: | |
| | |

PART SIX

DECLARATION OF INTEREST (Bidder to complete)

1. Any legal person, including persons employed by the state¹, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid (includes an advertised competitive bid, a limited bid, a proposal or written price quotation). In view of possible allegations of favoritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorized representative declare his/her position in relation to the evaluating/adjudicating authority where—the bidder is employed by the state; and/or

-the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the bid.

| 2 | In order to give effect to the above, the following questionnaire must be completed and submitted |
|---|---|
| | With the bid. |

| 2.1 | Full Name of bidder or his or her representative: |
|---------|---|
| 2.2 | Identity Number: |
| 2.3 | Position occupied in the Company (director, trustee, shareholder², member): |
| 2.4 | Registration number of company, enterprise, close corporation, partnership agreement or trust: |
| | 141.01-10-m.do-m.a |
| 2.5 | Tax Reference Number: |
| 2.6 | VAT registration Number: |
| 2.6.1 | The names of all directors/trustees/shareholders/members, their individual identity numbers, tax reference numbers and, if applicable, employee/PERSAL numbers must be indicated in paragraph 3 below. |
| 1#State | ' means - |
| | (a) any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999); (b) any municipality or municipal entity; (c) provincial legislature; (d) national Assembly or the national Council of provinces; or (e) Parliament. |
| | sholder* means a person who owns shares in the company and is actively involved in the management of the ise or business and exercises control over the enterprise. |
| 2.7 | Are you or any person connected with the bidder presently employed by the State? YES/NO |
| 2.7.1 | If so, furnish the following particulars: |

| | Name of | ame of person / sector/trustee/shareholder/member: | | | | |
|-------|---|---|--|--|--|--|
| | Name o | Name of state institution at which you or the person connected to the bidder is employed: | | | | |
| | | occupied in the state institution: | | | | |
| | Any oth | er particulars: | | | | |
| 7.2 | | If you are presently employed by the State, did you obtain the appropriate authority to undertake Remunerative work outside employment in the public sector? YES/NO | | | | |
| 7.2.1 | | If yes, did you attach proof of such authority to the bid document? YES/NO | | | | |
| | (Note: F | allure to submit proof of such authority, where applicable, may result in the disqualification of the bid. | | | | |
| 7.2.2 | | If no, furnish reasons for non-submission of such proof: | | | | |
| 3 | Did you conduc | or your spouse, or any of the company's directors / trustees/shareholders / members or their spouses to business with the state in the previous twelve months? YES/NO | | | | |
| 3.1 | | If so, furnish particulars: | | | | |
| | Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this bid? YES/NO | | | | | |
| | 2.9.1 | If so, furnish particulars. | | | | |
| | 2.10 | Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) Between any other bidder and any person employed by the state who may be involved with the Valuation and or adjudication of this bid? YES/NO | | | | |
| | 2.10.1 | If so, furnish particulars. | | | | |
| | 2.11 | Do you or any of the directors/trustees/shareholders/members of the company have any interest in any Other related companies whether or not they are bidding for this contract? YES/NO | | | | |
| | 2.11.1 | If so, furnish particulars: | | | | |
| | | | | | | |
| | | | | | | |

3 Full details of directors/trustees/members/shareholders.

| Full Name | Identity Number | Personal Income Tax Reference Number | State Employee Number/Persal Number | |
|-----------|-----------------|---|--|--|
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| Position | Name of bidder |
|--|--|
| Signature | Date |
| CERTIFY THAT THE INFORMATION FURN I ACCEPT THAT THE STATE MAY REJEC PROVE TO BE FALSE. | VISHED IN PARAGRAPHS 2 and 3 ABOVE IS CORRECT. IT THE BID OR ACT AGAINST ME SHOULD THIS DECLARATION |
| I, THE UNDERSIGNED (NAME) | |

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PART SEVEN

EXECUTION PLAN

- 1.1 The bidder will be required to provide an efficient and effective service. Therefore, The bidder is required to submit proof that he/she has required capacity to execute The contract tendered for successfully. The bidder must references or states his/her Experience as a company to undertake the contract. References of past experience Of owners /employees of new entities must accompany the bid document. Alternatively, the bid must submit a projects execution plan that the company will Utilise to successfully execute the contract in term of Manpower, machinery, process control, infrastructure, etc. (refer to attach as Annexure B)
- 1.2 It is a bid condition that prior to an award of the bid being made and/ or during the Evaluation process, the Department of Health reserves the right to conduct Inspections of the premises of the most acceptable bidder. Therefore premises of The bidder shall be open, at reasonable hours, for inspection by a representative of The Department of Health or organization acting on its behalf.

ANNEXURE B

EXECUTION PLAN

| The bidder must provide an execution plan on how the contract is going to be effected successfully: (Please refer to clause 23). |
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PREVIOUSLY AWARDED AND COMPLETED PROJECTS ON THE SAME NATURE OF WORK

| Employer & contact details | Description of contract | Value of work inclusive of VAT(Rand) | Date started & date of completion | Project numbers |
|---------------------------------------|-------------------------|--|-----------------------------------|--------------------|
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