Name: Email:

Contact Number:

|                | REALTH<br>REPUBLIC OF SOUTH AFRICA | Quotation Advert   |
|----------------|------------------------------------|--|
| Opening Da     | te:                                | 2021-12-02   |
| Closing Date   | e:                                 | 2021-12-09   |
| Closing Tim    | e;                                 | 11:00  |
| INSTITUTI      | ON DETAILS                         |  |
| Institution N  | ame:                               | St Mary's Marianhill   |
| Province:      |                                    | KwaZuiu-Natal  |
| Department     | or Entity:                         | Department of Health   |
| Division or s  | section:                           | Central Supply Chain Management  |
| Place where    | goods / services is required       | No.1 Hospital road, Abbot Francis Monastry, Marianhill 3610  |
| Date Submit    | ted                                | 2021-12-02   |
| ITEM CAT       | EGORY AND DETAILS                  |  |
| Quotation N    | umber:                             | ZNQ:<br>SMM/253/22   |
| Item Catego    | ry:                                | Goods  |
| item Descrip   | otion:                             | VARIOUS INFANT FEEDS   |
| Quantity (if s | supplies)                          | as per specification   |
|                | ORY BRIEFING SESSIO                | make the management of the man |
| Select Type:   |                                    |  |
| Date:          |                                    | Not Applicable   |
| Time:          |                                    |  |
| Venue:         |                                    |  |
| QUOTES CA      | N BE COLLECTED FROM:               | FOR SAFETY PRECAUCTION NO QUOTATION WILL BE AVAILABLE TO COLLECT ON SITE DUE TO COVID-19. QUOTES MAY BE DOWNLOADED   |
|                |                                    |  |

031 717 1111

Sanele.Kweyama@kznhealth.gov.za

| Finance Manager Name:      | Mr. S Mthwthwa                 |
|----------------------------|--------------------------------|
| Finance Manager Signature: | No late que will be considered |

STANDARD QUOTE DOCUMENTATION OVER R30 000.00 YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: ST MARY'S DISTRICT HOSPITAL MARIANHILL DATE ADVERTISED: 02/12/2021 CLOSING DATE: 09/12/2021 CLOSING TIME: 11:00 FACSIMILE NUMBER: \_\_\_\_\_ E-MAIL ADDRESS: Sanele.Kweyama@kznhealth.gov.za PHYSICAL ADDRESS: No.1 Hospital Road, Abbot Francis Monastry, Marianhill 3610 QUOTE NUMBER: ZNQ/SMM/253/22 DESCRIPTION: VARIOUS INFANT FEEDS CONTRACT PERIOD...... VALIDITY PERIOD 60 Days (if applicable) CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO. UNIQUE REGISTRATION REFERENCE DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS) No.1 Hospital Road, Abbot Francis Monastry, Marianhill 3610 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 CODE......NUMBER...... FACSIMILE NUMBER CODE ......NUMBER......NUMBER..... CELLPHONE NUMBER E-MAIL ADDRESS VAT REGISTRATION NUMBER (If VAT vendor) ...... YES NO 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]

|                         |                              | FOR QUOTATIONS  |                | BER: ZNQ/SMM/25           | 3/22        | •        |
|-------------------------|------------------------------|---|----------------|---------------------------|-------------|----------|
| DESCRIPT                | TION: VAH                    | IOUS INFANT FEEDS   |                |                           |             | ••••     |
| SIGNATUF<br>[By signing | RE OF BIDDEI<br>this documen | t, I hereby agree to all terms and conditions]                | DATE.          |                           |             |          |
| CAPACITY                | / UNDER WHI                  | CH THIS QUOTE IS SIGNED                                       |                |                           |             |          |
| Item No                 | Quantity                     | Description   | Brand & model  | Country of manufacture    | Price<br>R  | С        |
|                         |                              | SUPPLY OF:  |                |                           |             |          |
|                         | 168 UNITS                    | 400G POWDER STARTER FORMULA FOR                               |                |                           |             | _        |
|                         |                              | INFANTS (WHEY DOMINANT)                                       |                |                           |             |          |
|                         | 160 UNITS                    | LOW LACTOSE, LOW PROTEIN FEED WITHOUT FIBREPROVIDING          |                |                           |             | +        |
|                         | 100 01113                    | 0.75KCAL/ML FEED FOR SEVERLY MALNOURISHED                     |                |                           |             |          |
| ***                     |                              |   |                |                           |             |          |
|                         | 960 UNITS                    | READY TO USE STARTER FORMULA FOR INFANTS (WHEY DOMINANT)      |                |                           |             | 1        |
|                         |                              | (WHE I DOWNANT)   |                |                           |             |          |
|                         | 72 UNITS                     | DISACCHARIDE-FREE FORMULA FOR INFANTS                         |                |                           |             |          |
| N                       |                              |   |                |                           |             |          |
|                         |                              | COMPULSORY SAMPLE REQUIRED -                                  |                |                           |             |          |
|                         |                              | FAILURE TO SUBMIT WILL DISQUALIFY YOUR OFFER                  |                |                           |             |          |
|                         |                              |   |                |                           |             |          |
|                         |                              | REFER TO ATTACHED DETAILED SPECIFICATION                      |                |                           |             |          |
|                         |                              | REFER TO ATTACHED DETRICED OF EGIT TO ATTACH                  |                |                           |             |          |
|                         |                              |   |                |                           |             | $\dashv$ |
|                         |                              |   |                |                           |             |          |
|                         |                              |   |                |                           |             |          |
|                         |                              |   |                |                           |             |          |
|                         |                              |   |                |                           |             | _        |
| VALUE A                 | DDED TAX @                   | 15% (Only if VAT Vendor)                                      |                |                           |             |          |
|                         |                              | RICE (VALIDITY PERIOD 60 Days)                                |                |                           |             |          |
|                         |                              | Does The Article  | Conform To     | The S.A.N.S. / S.A.B      | .S.         |          |
| Does This               |                              | With The Specification? Specification? State Delivery Period, |                | eek                       |             |          |
|                         |                              |   |                |                           |             |          |
| Enquiries               | s regarding th               | e <u>quote</u> may be directed to: Enquirles                  | regarding tech | nnical information may be | directed to | ):       |
| Contact P               | erson: Mr. S                 | Kweyama Tel: 031.717.1111                                     | orooni Me T∩   | Goge Tel: 031             | 717 100f    | 3 :      |
| E-Mail Ad               | ldress: Sanele               | e.Kweyama@kznhealth.gov.za Contact Pe                         | arson: .###:A. |                           |             | ••••     |

# **DECLARATION OF INTEREST**

- 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 quote (includes a price quotation, advertised competitive quote, limited quote or proposal). In view of possible allegations of favouritism, should the resulting quote, 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 authorised representative declare his/her position in relation to the evaluating/adjudicating authority where
  - the bidder is employed by the state; and/or

any municipality or municipal entity;

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 quote(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 quote.

| 2.                        | In order to g         | ive effect to   | the abo             | ve, the follo                     | owing question                                   | nnaire mus                        | st be o                                 | complete                            | d and subm                  | itted with the  | quole.           |             |           |           |
|---------------------------|-----------------------|---|---------------------|-----------------------------------|--|-----------------------------------|---|-------------------------------------|-----------------------------|-----------------|------------------|-------------|-----------|-----------|
| 2.1.                      | Full Name             | of bidder/rep   | oresenta            | tive                              |  |                                   |   |                                     |                             |                 |                  |             |           | •••••     |
| 2.2.                      | Identity Nu           | mber:   |                     | ,                                 |  | tructoo                           | 2.4.                                    | Compar                              | ny Registrat<br>Tozonco Mun | ion Number:     |                  |             | ••••      |           |
| 2,3.                      | Position shareholde   |   | in (ne              | Compar                            | ny (director                                     | , uusiee                          | 2.6.                                    | VAT Re                              | gistration N                | umber:          |                  |             |           |           |
| 2.7.                      | The names             | of all direct   | ors / tru           | stees / sha                       | reholders / mated in paragr                      | embers, th                        | eir ind                                 |                                     | •                           |                 | erence nun       |             | d, if app | olicable, |
| 2.8                       | Are volunt            | persai num<br>anv nerson                                | connect             | ed with the                       | bidder presei                                    | ntly employ                       | ved by                                  | the stat                            | e?                          |                 | [,,,             |             | S         | NO        |
| 2.8.                      | 1 If so furnis        | h the followi   | na partic           | culars:                           |  |                                   |   |                                     |                             |                 |                  | <del></del> |           |           |
|                           | Name of per           | rson / directe  | or / trust          | ee / shareh                       | older/ membe                                     |                                   |   | ************                        |                             |                 |                  | *ho         | bidde     | r is      |
|                           |                       | of state  |                     |                                   | at which   | ,                                 |   |                                     | •                           |                 |                  | the         |           | :1 15     |
|                           | employed:             | occupie   |                     | in                                | the s  | tate                              | insti                                   | itution:                            |                             |                 |                  | An          | y         | other     |
|                           | particulare:          |   |                     |                                   |  |                                   |   |                                     |                             |                 |                  |             |           |           |
| 2.8.2                     | 2. If you are         | presently e   | mploye              | d by the sta                      | ate, did you ol                                  | btain the a                       | pprop                                   | riate autl                          | nority to und               | ertake remu     | nerative w       | ork outsic  | le empl   | loyment   |
|                           | in the pul            | blic sector?  |                     |                                   |  |                                   |   |                                     |                             |                 |                  | YE          | <u> </u>  | NO        |
| 2.8.2                     | 2.1. If yes,          | did you attac   | ch proof            | of such aut                       | thority to the                                   | quote docu                        | ment<br>ult in i                        | ?<br>Iho dicau                      | alification o               | the quote !     |                  |             |           |           |
| ( <u>Note: 1</u><br>2.8.2 |                       | omit proot oi   | ch roac             | <i>ithority, Wil</i>              | i <u>ere applicabl</u><br>-submission c          | e, <i>may resi</i><br>of such oro | of.                                     | ne usqu                             | annication of               | trie quote./    |                  |             |           |           |
| 2.0.2                     | z.z.<br>Did vou ot    | Volir spolise   | an reason           | of the con                        | npany's direct                                   | ors / truste                      | es / s                                  | hareholo                            | lers / memb                 | ers or their s  | spouses co       | nduct bu    | siness    | with the  |
|                           | state in the          | previous tw   | elve mo             | nths?                             |  |                                   |   |                                     |                             |                 |                  | Y           | S         | NO        |
| 2.9.                      | 1 If so fur           | ish narticula   | ars.                |                                   |  |                                   |   |                                     |                             |                 |                  | بط اممیدام  | , tha at  | toto and  |
| 2.10                      | ), Do you, or         | any person  | connec              | ted with th                       | ie bidder, hav                                   | re any rela                       | itionsh                                 | nip (tamii<br>ta?                   | ly, friend, ot              | ner) with a p   | person em        | pioyea by   | / the st  | ate and   |
| 2.40                      | who may b             | e involved v  | viin ine e          | evaluation a                      | and or adjudic                                   | auonoiun                          | is quu                                  | ile i                               |                             |                 |                  | _ YE        | E\$   _   | NO        |
| 2.10                      | Are vou o             | r anv berso   | n conne             | cted with                         | the bidder, av                                   | ware of an                        | y rela                                  | ationship                           | (family, frie               | nd, other) b    | etween an        | y other b   | oidder a  | and any   |
|                           | person em             | ployed by th  | e state v           | who may be                        | e involved wit                                   | h the evalu                       | ıation                                  | and or a                            | djudication :               | of this quote   | ?                | Y           | ES        | NO        |
| 2.11                      | 1 If en furr          | sich narticula  | are:                |                                   |  |                                   |   |                                     |                             |                 |                  | thar rala   | tod cor   | moonloc   |
| 2.12                      | 2. Do you or          | any of the  | director:           | s / trustees                      | s / shareholde                                   | ers / mem                         | bers (                                  | or the co                           | mpany nav                   | e any intere    | Still ally c     | YI          | ES        | NO        |
| 2.42                      | whether of            | not they are  | are,<br>S Dignilliñ | j ior tals co                     |  |                                   |   |                                     |                             |                 |                  | <u> </u>    |           | 110       |
|                           |                       |   |                     |                                   | bers / sharel                                    |                                   |   |                                     |                             |                 |                  |             |           |           |
| 3.<br>NB:                 | The Depa              | rtment Of h   | dealth v            | vill validate<br>eir details :    | e details of<br>are up-to-date<br>aed over as no | directors<br>and verifi           | ed or                                   | ı CSD. If                           | the Departi                 | nent cannot     | validate th      | ie intorm   | iation c  | on CSD,   |
| 4                         | DECLAR                | RATION  |                     |                                   |  |                                   |   |                                     |                             |                 |                  |             |           |           |
| I, T<br>FU                | HE UNDEI<br>RNISHED   | RSIGNED<br>IN PARAC                                     | (NAM)<br>BRAPH      | E)<br>S 2.                        |  |                                   |   |                                     |                             | CERTIFY         | THAT T           | HE INF      | ORMA      | ATION     |
|                           | CCEPT TH<br>OVE TO BI |   | TATE                | MAY RE.                           | JECT THE (                                       | QUOTE (                           | )R A                                    | CT AG                               | AINST ME                    | E SHOULD        | THIS DE          | ECLARA      | ATION     | 1         |
| <br>Nan                   | ne of bidder          |   | •••                 | Signature                         |  |                                   | • | osition                             |                             |                 | Date             |             |           | ••        |
| ¹"Sta<br>a)               | constitutional        | or provincial<br>I institution with<br>of No. 1 of 1999 | in the me           | nt, national or<br>aning of the l | or provincial pub<br>Public Finance M            | lic entity or<br>Management       | c)<br>d)<br>e)                          | provincia<br>national a<br>Parliame |                             | e national Cour | ncil of province | es; or      |           |           |

"Shareholder" means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

# SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

#### 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 executandi) 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 OF THIS QUOTATION.
- 3.4. The price quoted must include VAT (if VAT vendor). However, it must be noted that the Department reserves the right to evaluate all quotations excluding VAT as some bidders may not be VAT vendors.
- 3.5. 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.
- 3.6. 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.
- 3.7. 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.
- 3.8. Offers must comply strictly with the specification.
- 3.9. Only offers that meet or are greater than the specification will be considered.
- 3.10. Late offers will not be considered.
- 3.11. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six months.
- 3.12. Used/ second-hand products will not be accepted.
- 3.13. A bidder not registered on the Central Suppliers Database or whose verification has failed will not be considered.
- 3.14. All delivery costs must be included in the quoted price for delivery at the prescribed destination.
- 3.15. 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.
- 3.16. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 3.17. In the event of a bidder having multiple quotes, only the cheapest according to specification will be considered.
- 3.18. Verification will be conducted to identify if bidders have multiple companies and are cover-quoting for this bid.
- 3.19. 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 feminine 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 is incomplete in any respect, the said supplier meets all specification requirements and is lowest to quote, 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.
- 4.6. 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 ofter will be rejected. All testing will be for the account of the bidder.

### 7. COMPULSORY SITE INSPECTION / BRIEFING SESSION

| 7.1.        | Bidders who fail to attend the compulsory meeting will be disqual  |   |
|-------------|--|---|
| (i)<br>(ii) | The institution has determined that a compulsory site meeting to be the place of th | spital marianhill                                       |
| 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.

# 9. 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 (hear after 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:
- (i) 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. FAILURE TO COMPLY WITH ABOVE WILL RESULT IN YOUR QUOTE BEING PASSED OVER.

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

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

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

## 1. GENERAL CONDITIONS

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

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

- 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.

### 2. DEFINITIONS

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

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                               |

| _ | DID | DECL | A D A | I TION |
|---|-----|------|-------|--------|

- 5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:
- 6. 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.

| rejevani | DIDOLOI DEDEC Status sevet of contributor.   |                       |    |
|----------|--|-----------------------|----|
| 7.       | SUB-CONTRACTING applicable box)  | (Tick                 | NO |
| 7.1      | Will any portion of the contract be sub-contracted?  | <del></del> -         |    |
| 7.1.1    | If yes, indicate:  |                       |    |
|          | i) What percentage of the contract will be subcontracted% ii) The name of the sub-contractor | (Tick applicable box) |    |
| 8.       | Whether the sub-contractor is an EME or QSE  | (Lick applicable pox) |    |

iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations, 2017:

| Figure 1 Tocal Cities Tropical Control of the Contr | EME   | QSE  |
|--|-------|------|
| Designated Group: An EME or QSE which is at last 51% owned by:   | EIV,E | Ų Ş⊏ |
|  |       | ٧    |
| Black people   |       |      |
| Black people who are youth   |       |      |
| Black people who are women   |       |      |
| Black people with disabilities   |       |      |
| Black people living in rural or underdeveloped areas or townships  |       |      |
| Cooperative owned by black people  |       |      |
| Black people who are military veterans   |       |      |
| OR   |       |      |
| Any EME  |       |      |

| Any QS           | E   |   |
|------------------|---|---|
| DECLA            | RATION WITH REGARD TO COMPANY/FIRM  |   |
| Nam              | e of company/firm:  |   |
| VAT              | registration number:  |   |
| Com              | pany registration number:   |   |
| TYPE             | E OF COMPANY/ FIRM [TICK APPLICABLE BOX]  |   |
| 0<br>0<br>0<br>0 | Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited |   |
| DESC             | CRIBE PRINCIPAL BUSINESS ACTIVITIES   |   |
| СОМ              | PANY CLASSIFICATION [TICK APPLICABLE BO   |   |
| 0<br>0<br>0      | Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.               |   |
| Total            | number of years the company/firm has been in but  | siness:   |
| the B            |   | o so on behalf of the company/firm, certify that the points claimed, ba<br>raphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/   |
| i) ¯             | The information furnished is true and correct;  |   |
| ii)              | The preference points claimed are in accordance v   | with the General Conditions as indicated in paragraph 1 of this form;   |
|                  |   | It of points claimed as shown in paragraphs 1.4 and 6.1, the contract isfaction of the purchaser that the claims are correct;   |
|                  | If the B-BBEE status level of contributor has be contract have not been fulfilled, the purchaser may              | en claimed or obtained on a fraudulent basis or any of the conditi<br>, in addition to any other remedy it may have –   |
| (a)              | disqualify the person from the bidding process;   |   |
| (b)              | recover costs, losses or damages it has incurre   | ed or suffered as a result of that person's conduct;  |
| (c)              | cancel the contract and claim any damages wi<br>arrangements due to such cancellation;                            | nich it has suffered as a result of having to make less favourable  |
| (d)              | who acted on a fraudulent basis, be restricted  | nareholders and directors, or only the shareholders and directors by the National Treasury from obtaining business from any organ after the audi alteram partem (hear the other side) rule has been |
| (e)              | forward the matter for criminal prosecution.  |   |
| 1TIW             | NESSES  |   |
| 1                |   | SIGNATURE(S) OF BIDDERS(S)  DATE:   |
| 2                |   | ADDRESS   |



| PROVINCE OF KWAZULU-NATAL |     |       | مردست |    |
|---------------------------|-----|-------|-------|----|
| Quote Number:             | ZNQ | /Sum/ | 231   | 22 |
| -                         |     | [ {   | CHEL  | )  |

Item Description: 400g POWDER STARTER FORMULA FOR INFANTS (WHEY DOMINANT)

|          | •  |  |   |  |  |
|----------|--|--|---|--|--|
| Depa     | artment/Section: <u>St Mary'</u> :   | s <u>District Hospital: Marianhill</u> Purpose of Iter   | n: PATIENT CARE: INFANT FEEDING               |  |  |
| ١.       | Pre-qualification criteria if  | any:   |   |  |  |
|          | 1.1. Is the item required to Regulatory Body / certification                                     | o have a regulatory body certification (e.g. SABS, SANS, SA<br>n required if yes: ISO : See technical specification attached   | NAS, ISO, CIDB, etc.)? <u>Yes</u> / No:       |  |  |
|          | 1.2. Is a compulsory site inspection / briefing session required? Yes / No if Yes, specify: Date |  |   |  |  |
|          | 1.3. Is local production at if Yes, specify:   | nd content part of the quote? Yes / <u>No</u>  |   |  |  |
|          | 1.4. Provisions of section if Yes, specify: <u>REVISED SCM</u>                                   | n 4(1)(a) of the PPPFA Regulations,2017 if applicable? <u>Yes</u> /<br>DELIGATION OF 2008  | No  |  |  |
|          | 1.5. Liability Cover insura if Yes, specify:   | ance? Yes / <u>No</u>  |   |  |  |
| 2.       |  | on of the required item?   |   |  |  |
| _ist     | specifications to be adver   | tised  | Comment                                       |  |  |
| 1.       | Must be a powder starter   | formula for infants whey dominant  |   |  |  |
| 2.       |  | nts from birth to 6 months of age  |   |  |  |
| 3.       | In 400g resealable tin   |  |   |  |  |
| 4.       | Must produce a Quality s   | tandards certificate   |   |  |  |
| 5.       | Must be meet the specific  | c nutritional needs as a sole source of nutrition for full terr  | n   |  |  |
|          | infants  |  |   |  |  |
| 6.       | Must have a good and st  | able shelf life with at least 6 months before the date of  |   |  |  |
| Ì        | hest before date   |  |   |  |  |
| 7.       | COMPULSORY SAMPL   | E REQUIRED – FAILURE TO SUBMIT WILL  |   |  |  |
|          | DISQUALIFY YOUR OF   | FER  |   |  |  |
| 3.<br>Or | 3.1. Deadline for submissi   | e submitted? Yes / No(select option 3.1 or 3.2) on if Yes: Date 2017 2027 Time11H00 Place ST MARY'S DISTR  | CT HOSPITAL (MARIANHILL)                      |  |  |
|          | 3.2. Specify that samples  | must be made available when requested in writing. Yes  |   |  |  |
| 4.       |  | deliver any or all of the goods or to perform the services within to<br>e to its other remedies under the contract, deduct from the co<br>delayed goods or unperformed services using the current prim | Illact price, as a policity, a com con-       |  |  |
| 5.       | What is the evaluation   | criteria / special terms and conditions to be advertise  | d?  |  |  |
| l isi    | evaluation criteria / speci  | al terms and conditions to be advertised (if applicable)   |   |  |  |
| 1.       | Pre-qualification criteria   | Does the offer meet the pre-qualification criteria?  |   |  |  |
| 2.       | Administrative   | Does the offer comply with stipulated administrative rec   | uirements?                                    |  |  |
| 3.       | Conformance:   | Was the product made or service performed to specific  | ations?                                       |  |  |
| 3.<br>4. | Performance:   | Will/does the product/service fulfil its performance oblig   | ation, in a manner that releases the supplier |  |  |
| ۱۰       |  | from all liabilities under the contract?   |   |  |  |
| 5.       | Features:  | What characteristics does the product or service have?   | (formalistananas) (autorontos)                |  |  |
| 6.       | Reliability:   | How long can a product go between failures and the ne  | ed for maintenance ( (guarantee)              |  |  |
| 7.       | Durability:  | What is the useful life for the product? How will the pro-   | duct hold up under extended use?              |  |  |
| 8.       | Serviceability:  | How easy is it to repair, maintain or support the produc   | t or service? (customer suppoπ)               |  |  |
| 9.       | Ability & Capacity   | The ability and capacity of the vendor to execute the co   | ntract  |  |  |
|          | Proforence points  | Preferential Procurement System (80/20) if applicable  |   |  |  |

| Name of End-user (in full)   | N. Ndiweni   | Name of SCM Rep (in full)   | Mr. NR Mkhize  |
|------------------------------|--------------|-----------------------------|----------------|
| Designation / Rank (in full) | Dietician    | Designation/ Rank (in full) | SCM-Supervisor |
| Signature                    | A            | Signature                   | 1054)          |
| Date                         | 13/10/2021   | Date                        | 18/11/2021     |
|                              | 115.11-10-01 |                             | Page 1 of 2    |



Date 13/10/2021
Standard End-User Specification Form

# **END-USER SPECIFICATION FORM**

|                      | Jepanment:<br>Health<br>PROVINCE OF KWAZULU-NATAL  | 7.62 ;   |   |            |                               |  |  |
|----------------------|--|--|---|------------|-------------------------------|--|--|
|                      | ote Number: <u>ZN</u>  | alsum/vor/22   |   |            |                               |  |  |
| iten                 | Description: DISACCHARI  | DE-FREE FORMULA FOR INFANTS X  | 72 units  |            |                               |  |  |
| ,,                   | <u> </u>   |  |   |            |                               |  |  |
| Dep                  | Department/Section: St Mary's District Hospital: Marianhill Purpose of Item: PATIENT CARE: INFANT FEEDING  |  |   |            |                               |  |  |
| 1.                   | Pre-qualification criteria it  |  |   | •          |                               |  |  |
|                      | 1.1. Is the item required t<br>Regulatory Body / certification   | o have a regulatory body certification (<br>on required if yes: ISO : See technical spec | e.g. SABS, SANS, SANAS, IS<br>cification attached for full list | O, CIDB, 6 | etc.)? <u>Yes</u> / No:       |  |  |
|                      | 1.2. Is a compulsory site if Yes, specify: Date  | inspection / briefing session required?  | Yes/ <u>No</u>  |            |                               |  |  |
|                      | 1.3. Is local production a if Yes, specify:  | nd content part of the quote? Yes / No   |   |            |                               |  |  |
|                      | 1.4. Provisions of section if Yes, specify: <u>REVISED SCM</u>   | n 4(1)(a) of the PPPFA Regulations,2017<br>DELIGATION OF 2008                            | 7 if applicable? <u>Yes</u> / No                                |            |                               |  |  |
|                      | 1.5. Liability Cover insuratif Yes, specify:   | ance? Yes / <u>No</u>  |   |            |                               |  |  |
| 2.                   |  | on of the required item?   |   |            |                               |  |  |
|                      | specifications to be adver   |  |   | mment      |                               |  |  |
| 1.                   | -  | haride-free from birth to 12 months fo   | or intants  |            |                               |  |  |
| 2.                   | Must be lactose-free   | nts from 0 to12 months of age  |   |            |                               |  |  |
| 3.<br>4.             | 400g Tin packaging   | its from 6 to 12 months of ago   |   |            |                               |  |  |
| <del>4</del> .<br>5. | Must produce a Quality s   | tandards certificate   |   |            |                               |  |  |
| 6.                   | Must be meet the specific  | nutritional needs as a sole source o   | f nutrition for full term                                       |            |                               |  |  |
| ٠.                   | infants  |  |   |            |                               |  |  |
| 7.                   | Must have a good and stopest before date   | able shelf life with at least 6 months b   | pefore the date of  |            | ·                             |  |  |
| 8.                   | COMPULSORY SAMPL   | E REQUIRED – FAILURE TO SUBM   | IT WILL   |            |                               |  |  |
|                      | DISQUALIFY YOUR OF   |  |   |            |                               |  |  |
| 3.                   | Does a sample need to be   | submitted? Yes / No(select option 3.1 c  | or 3.2)   | STAL /MADI | AMILIE ( A ·                  |  |  |
| _                    | 3.1. Deadline for submission   | on if Yes: Date 25-11-12-17 Time11H00  | Place ST MARY'S DISTRICT HOSP                                   | HAL (WARE  | ANTILL)                       |  |  |
| Or                   | 3.2. Specify that samples r  | must be made available when requested in   | n writing. Yes or   |            |                               |  |  |
| 4.                   | 4.1. 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 conditio  | ons to be advertised?   |            |                               |  |  |
| Lis                  |  | al terms and conditions to be advertis   | ed (if applicable)  |            |                               |  |  |
| 1.                   | Pre-qualification criteria   | Does the offer meet the pre-qualific   |   | -to2       |                               |  |  |
| 2.                   | Administrative   | Does the offer comply with stipulate   | d administrative requirement                                    | nis r      |                               |  |  |
| 3.                   | Conformance:   | Was the product made or service po<br>Will/does the product/service fulfil it            | s performance obligation in                                     | a manne    | er that releases the supplier |  |  |
| 4.                   | Performance:   | from all liabilities under the contract  | ?   | , a maine  |                               |  |  |
| 5.                   | Features:  | What characteristics does the produ  | uct or service have?  |            |                               |  |  |
| 6,                   | Reliability:   | How long can a product go between  | n failures and the need for n                                   | naintenan  | ice? (guarantee)              |  |  |
| 7.                   | Durability:  | What is the useful life for the produc   | ct? How will the product hol                                    | d up unde  | er extended use?              |  |  |
| 8.                   | Serviceability:  | How easy is it to repair, maintain or  | support the product or serv                                     | rice? (cus | tomer support)                |  |  |
| 9.                   | Ability & Capacity   | The ability and capacity of the vend   | or to execute the contract                                      |            |                               |  |  |
|                      |  |  |   |            | ND BULL -                     |  |  |
| Na                   | me of End-user (in full)   | N. Ndiweni   | Name of SCM Rep (in full)                                       | <u></u>    | r. NR Mkhize                  |  |  |
| De                   | signation / Rank (in full)   | Dietician  | Designation/ Rank (in full)                                     | S          | CM-Supervisor                 |  |  |
| Sig                  | Signature Signature  |  |   |            |                               |  |  |

Date

Page 1 of 2



| PROVINCE OF KWAZULU-NATAL | . , , , , , , , , , , , , , , , , , , , |  |
|---------------------------|---|--|
| Quote Number:             | zna/sum/201/22                          |  |
|                           |   |  |

Item Description: READY TO USE STARTER FORMULA FOR INFANTS (WHEY DOMINANT) X 960 units

| Depa | artment/Section: <u>St Mary'</u> :  | s District Hospital: Marianhill Purpose  | of Item: PATIENT CARE: INFANT FEEDING                        |  |  |  |  |
|------|---|--|--|--|--|--|--|
| 1.   | Pre-qualification criteria it   | any:   |  |  |  |  |  |
|      | 1.1. Is the item required to have a regulatory body certification (e.g. SABS, SANS, SANAS, ISO, CIDB, etc.)? Yes / No: Regulatory Body / certification required if yes: ISO: See technical specification attached |  |  |  |  |  |  |
|      | 1.2. Is a compulsory site inspection / briefing session required? Yes / No if Yes, specify: Date Time Place   |  |  |  |  |  |  |
|      | 1.3. Is local production as if Yes, specify:  | nd content part of the quote? Yes / No   |  |  |  |  |  |
|      | 1.4. Provisions of section if Yes, specify: <u>REVISED SCM</u>  | 4(1)(a) of the PPPFA Regulations,2017 if applicable?<br>DELIGATION OF 2008                     | <u>Yes</u> / No  |  |  |  |  |
|      | 1.5. Liability Cover insura if Yes, specify:  | nnce? Yes / <u>No</u>  |  |  |  |  |  |
| 2.   | What is the specification   | on of the required item?   |  |  |  |  |  |
| List | specifications to be adver  | lised  | Comment  |  |  |  |  |
| 1.   | Must be a ready to use st   | arter formula for infants whey dominant  |  |  |  |  |  |
| 2.   |   | ts from birth to 6 months of age   |  |  |  |  |  |
| 3.   |   | e bottle or sealed tetra pak   |  |  |  |  |  |
| 4.   | Must produce a Quality s  | andards certificate  |  |  |  |  |  |
| 5.   | Must be meet the specific   | : nútritional needs as a sole source of nutrition for fi                                       | ull term   |  |  |  |  |
| -    | infants   |  |  |  |  |  |  |
| 6.   | Must have a good and sta  | able shelf life with at least 6 months before the date   | of   |  |  |  |  |
| 1    | best before date  |  |  |  |  |  |  |
| 7.   |   | REQUIRED – FAILURE TO SUBMIT WILL  |  |  |  |  |  |
|      | DISQUALIFY YOUR OF  | ER   |  |  |  |  |  |
| 3.   | Does a sample need to be 3.1. Deadline for submission   | submitted? Yes / No(select option 3.1 or 3.2) on if Yes: Date 1772   Time11H00 Place ST MARY'S | DISTRICT HOSPITAL (MARIANHILL)                               |  |  |  |  |
| Or   | 3.2. Specify that samples r   | nust be made available when requested in writing. Yes  | or   |  |  |  |  |
| 4.   | Penalties to be noted by th   | e suppliers:   |  |  |  |  |  |
|      | 4.4 If the cumplior faile to a  | laliver any or all of the goods or to perform the services W                                   | ithin the period(s) specified in the contract, the purchaser |  |  |  |  |
|      | shall, without prejudice  | e to its other remedies under the contract, deduct from t                                      | he 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.   | i. What is the evaluation criteria / special terms and conditions to be advertised?   |  |  |  |  |  |  |
| List | evaluation criteria / specia  | al terms and conditions to be advertised (if applicab  | le)  |  |  |  |  |
| 1.   | Pre-qualification criteria  | Does the offer meet the pre-qualification criteria?  |  |  |  |  |  |
| 2.   | Administrative  | Does the offer comply with stipulated administrative   | ve requirements?   |  |  |  |  |
| 3.   | Conformance:  | Was the product made or service performed to sp  | ecifications?  |  |  |  |  |
| 4.   | Performance:  | Will/does the product/service fulfil its performance   | obligation, in a manner that releases the supplier           |  |  |  |  |
|      |   | from all liabilities under the contract?   | 1  |  |  |  |  |
| 5.   | Features:   | What characteristics does the product or service t   | nave?  |  |  |  |  |
| 6.   | Reliability:  | How long can a product go between failures and the need for maintenance? (guarantee)           |  |  |  |  |  |
| 7.   | Durability:   | What is the useful life for the product? How will th   | e product hold up under extended use?                        |  |  |  |  |
| 8.   | Serviceability:   | How easy is it to repair, maintain or support the p  | oduct or service? (customer support)                         |  |  |  |  |
| 9.   | Ability & Capacity  | The ability and capacity of the vendor to execute  | he contract  |  |  |  |  |
|      | Preference points   | Preferential Procurement System (80/20) if applic  | able   |  |  |  |  |

| Name of End-user (in full)   | N. Ndiweni | Name of SCM Rep (in full)   | Mr. NR Mkhize  |
|------------------------------|------------|-----------------------------|----------------|
| Designation / Rank (in full) | Dietician  | Designation/ Rank (in full) | SCM-Supervisor |
| Signature                    | 140        | Signature                   | (12)           |
| Date                         | 13/10/2021 | Date                        | 05/11/2021     |
| Standard End-User Specifica  |            |                             | Page 1 of 2    |



| PROVINCE OF KWAZULU-NATAL | ,253,  |  |
|---------------------------|--|--|
| Quote Number:             | ZNQ/Siyon/2024/22  |  |
| <b></b>                   | The state of the s |  |

Item Description: LOW LACTOSE, LOW PROTEIN FEED WITHOUT FIBRE PROVIDING 0.75KCAL/ML FEED FOR SEVERLY

X160 units MALNOURISHED CHILDREN

| MICH   | -NOOKISTIED GINEDIKEK   | X . C - C - C  |  | •                                      |  |  |
|--|---|--|--|--|--|--|
| Dep  | artment/Section: <u>St Mary</u>   | 's District Hospital: Marianhill   | Purpose of Item:                               | PATIENT CARE: INFANT FEEDING           |  |  |
| 1.   | Pre-qualification criteria  | if any:  |  |  |  |  |
|  | 1.1. Is the item required Regulatory Body / certificati   | to have a regulatory body certification on required if yes: ISO : See technical sp | (e.g. SABS, SANS, SANA<br>ecification attached | AS, ISO, CIDB, etc.}? <u>Yes</u> / No: |  |  |
|  | 1.2. Is a compulsory site if Yes, specify: Date   | inspection / briefing session required   | l? Yes / <u>No</u>                             |  |  |  |
|  | 1.3. Is local production a if Yes, specify:   | and content part of the quote? Yes / No  | 1  |  |  |  |
|  | 1.4. Provisions of section if Yes, specify: REVISED SCN   | n 4(1)(a) of the PPPFA Regulations,20<br>I DELIGATION OF 2008                      | 17 if applicable? <u>Yes</u> / No              |  |  |  |
|  |   |  |  |  |  |  |
| 2.   |   | on of the required item?   |  | Comment                                |  |  |
|  | specifications to be adve   | rtised   | Et araddina                                    | Continent                              |  |  |
| 1.   |   | ow lactose, low protein feed without   | TIDITE PROVIDING                               |  |  |  |
|  |   | erely malnourished children  |  |  |  |  |
| 2.   | Must be suitable from bi  |  |  |  |  |  |
| 3.   | in 200ml - 250 ml RTU c   |  |  |  |  |  |
| 4.   | Must produce a Quality  | standards certificate  |  |  |  |  |
| 5.   | Must have a good and s  | table shelf life with at least 9 months  | before the date of                             |  |  |  |
|  | best before date  |  |  |  |  |  |
| 6.   |   |  |  |  |  |  |
| 7.   |   | E REQUIRED – FAILURE TO SUB  | MIT WILL                                       |  |  |  |
|  | DISQUALIFY YOUR OF  | FER  |  |  |  |  |
| 3.   | 3.1. Deadline for submission if Yes: Date   |  |  |  |  |  |
| Or   | 3.2. Specify that samples   | must be made available when requested  | d in writing. Yes or                           |  |  |  |
| 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.   | 5. What is the evaluation criteria / special terms and conditions to be advertised?   |  |  |  |  |  |
| List evaluation criteria / special terms and conditions to be advertised (if applicable) |   |  |  |  |  |  |
| 1.   | 1. Pre-gualification criteria Does the offer meet the pre-qualification criteria?   |  |  |  |  |  |
| 2.   | Administrative Does the offer comply with stipulated administrative requirements?   |  |  |  |  |  |
|  |   |  |  |  |  |  |

| List evaluation criteria / special terms and conditions to be advertised (if applicable)                   |  |  |  |  |  |  |
|--|--|--|--|--|--|--|
| 1.   | 1 Pre-qualification criteria Does the offer meet the pre-qualification criteria? |  |  |  |  |  |
| 2.   | Administrative   | Does the offer comply with stipulated administrative requirements?   |  |  |  |  |
| 3.   | Conformance:   | Was the product made or service performed to specifications?   |  |  |  |  |
| 4 Performance: Will/does the product/service fulfil its performance obligation, in a manner that releases  |  | Will/does the product/service fulfil its performance obligation, in a manner that releases the supplier from all liabilities under the contract? |  |  |  |  |
| 5.   | Features:  | What characteristics does the product or service have?   |  |  |  |  |
| 6. Reliability: How long can a product go between failures and the need for maintenance? (guarantee)       |  | How long can a product go between failures and the need for maintenance? (guarantee)   |  |  |  |  |
| 7. Durability: What is the useful life for the product? How will the product hold up under                 |  | What is the useful life for the product? How will the product hold up under extended use?  |  |  |  |  |
| 8 Serviceability: How easy is it to repair, maintain or support the product or service? (customer support) |  |  |  |  |  |  |
| 9. Ability & Capacity The ability and capacity of the vendor to execute the contract                       |  |  |  |  |  |  |

| Name of End-user (in full)   | N. Ndiweni  | Name of SCM Rep (in full)   | Mr. NR Mkhize  |
|------------------------------|-------------|-----------------------------|----------------|
| Designation / Rank (in full) | Dietician   | Designation/ Rank (in full) | SCM-Supervisor |
| Signature                    | -AAV-3      | Signature                   |                |
| Date                         | 13/10/2011  | Date                        | 18/11/2021     |
|                              | 1 12 10 COC |                             | Page 1 of 2    |