

KZN Health Intranet

Search this site	0
Occion and dice	,,,

KZN HEALTH

HOME CORPORATE INFORMATION COMPONENTS

DIRECTORY

DISTRICT OFFICES

HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

AdvertQuote

HEALTH REPUBLIC OF SOUTH AFRICA	Quotation Advert
Opening Date:	2021-06-01
Closing Date:	2021-06-08
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	Grey's hospital ✓
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	Grey's Hospital
Date Submitted	2021-06-01
ITEM CATEGORY AND DETAILS	and the second of the second o
Quotation Number:	ZNQ: GRS 555/05/21 (A)
Item Category:	Goods
	32mm across x 16mm, label printing: top half coloured with drug name printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample.
Quantity (if supplies)	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white,
	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification
COMPULSORY BRIEFING SESSION /	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification
COMPULSORY BRIEFING SESSION / Select Type:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT
Quantity (if supplies) COMPULSORY BRIEFING SESSION / Select Type: Date: Time:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable
COMPULSORY BRIEFING SESSION / Select Type: Date:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable
COMPULSORY BRIEFING SESSION / Select Type: Date : Time: Venue:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable
COMPULSORY BRIEFING SESSION / Select Type: Date : Time: Venue: QUOTES CAN BE COLLECTED FROM:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable
COMPULSORY BRIEFING SESSION / Select Type: Date : Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable Departmental Website Grey's Tender Box
COMPULSORY BRIEFING SESSION / Select Type: Date: Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVER	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable Departmental Website Grey's Tender Box
COMPULSORY BRIEFING SESSION / Select Type: Date: Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVERName:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable Departmental Website Grey's Tender Box RT MAY BE DIRECTED TO:
COMPULSORY BRIEFING SESSION / Select Type: Date: Time: Venue: QUOTES CAN BE COLLECTED FROM: QUOTES SHOULD BE DELIVERED TO: ENQUIRIES REGARDING THE ADVERName: Email:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable Departmental Website Grey's Tender Box RT MAY BE DIRECTED TO: Pearl Msomi
COMPULSORY BRIEFING SESSION / Select Type: Date: Time:	printed in plain font not less than 2.5mm height, lower case letters with the first letter being in upper case. bottom half of label to be white, vellum label 500 labels per roll. label required NB: provide sample. See Continuation sheet for Quantity and Specification SITE VISIT Not Applicable Departmental Website Grey's Tender Box RT MAY BE DIRECTED TO: Pearl Msomi No E-mail

Requisition form for Non-Stock Items (ONE ITEM PER NSI REQUEST – FORM TO BE COMPLETED IN TRIPLICATE) Province of KwaZulu-Natal Department of Health

FORM 13

CONTINUATION SHEET

		REQUIRED GOODS/SERVICES	OODS/SER	VICES		
FULL DESCRIPTION OF ITEM	STOCK	MIN	MAX	MONTHLY	STOCK	
	ON HAND	STOCK	STOCK	USAGE	KEQUIKED	
RELAXANT	0	10 ROLLS	20 ROLLS	5 ROLLS	10 ROLLS	
SEDATIVE	0	10 ROLLS	20 ROLLS	5 ROLLS	10 ROLLS	
REVERSAL MENERAL	0 ,	05 ROLLS	10 ROLLS	2 ROLLS	05 ROLLS	CRS 555
LOCAL ANAESTHETIC Anaesthetic	0	10 ROLLS	20 ROLLS	5 ROLLS	10 ROLLS	•
ADRENALINE	0	10 ROLLS	20 ROLLS	5 ROLLS	10 ROLLS	
ANTIBIOTICS Antibiotic	0	10 ROLLS	15 ROLLS	5 ROLLS	05 ROLLS	
OPIATES	0	10 ROLLS	20 ROLLS	5 ROLLS	10 ROLLS	
SEE ATTACHED SPECS AND SAMPLE MUST BE SENT WITH QUOTE TO BE CONSIDERED						- 0 10 a a a
Requisitioner:	KSON		Signature	P	Date 2	Date 25 of U
Approved/Not Approved by Supervisor Name Assistant Nursing Manager State No. 13120970	MVELASE ing Manager 3128970		Signature	MRS G.Z. MVELASE Bestsant knosjig Manager SANG No. 13128970	Elmy Date: 28/04/2	2804 <u>वि</u>
						1 %

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00

ESCRIF	PTION,				PARTIC																								
													S OF E														_		
NAME	OF BID	DER:		-					-					ATE:			_	_	-		-		_	_	_	_	_	_	_
PHYSIC	CAL AD	DRESS											E	MAIL	ADDR	ESS:													
CONTA	ACT NU	MBER:											FA	ACSII	AILE N	UME	BER:												
SIGNA"	TURE (F BIDD	ER:										SA	ARS I	PIN:														
[By sign	signing this document I hereby agree to all terms and conditions]											CI	ENTR	AL SU	PPL	IER (ATA	BA	SE R	EG	ISTR/	TION	(CSD)) N	0.: ↓				
UNIQU	NIQUE REGISTRATION REFERENCE: ↓										1	T	Т				Ī			T	1		T						
					uii I		П	Т	T	T		П				T	Т	Т	T	1			T		ľ				
			ah ah		e o		-		100			1	N. 1	_				4.7			Ξ	11 11	•		1				-
oes this the pric			ıın me s	респтса	uon?				-+				State de All defiv									e price	<u> </u>						
Item		intity	I n	script	ion				Ė					, .		_					-	_		·f	- 1	Drice			
No	""	u.y	-	.ocript										Brand & model Country of manufacture									Price R						
	+		+								_												C						
	†		+																										+-
	†		1								_																		+
			1													Г													7
				_																									
	-																												
	-		-						_						_	_					_				_				
			- 1											_		_		_	_		_	_		_	_		_		_
VALUE	ADDE	DTAY	a 450/ //	Inhe if	いみて いっ	ndarl.																							

- cover all not the working (s) & accept must any mistakes regarding the price (s) & calculations will be at its bidder sits.

 The bidder must accept full responsibility for the proper execution & fulfilment of all obligations conditions devolving on under this agreement, as the Principal (s) sidule for the due fulfilment of this contract. This quotation will be evaluated specification & correctness of information.

 Only offers that comply with or greater than specification will be considered.
- 15

- Only offers that comply win or greater man specimeanon win or consistence.

 Late quotes will not be considered.

 All products supplied must be valid for a minimum period of six months.

 All delivery costs must be included in the quote price, for delivery at the prescribed destination.

 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.

 In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery norm.
- for each delivery point.

 1.14 If samples / compulsory site inspection / briefing session are required, the supplier will be informed in due

- course.

 1.15 The supplier shall furnish any information, when requested.

 1.16 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.

 1.17 The supplier shall indemnify the KZN Department of Health (ask the purchases) against all third-party claims of infitingement of patent, trademark, or industrial design rights arising from use of the goods or any part
- of infingement of patent, trademark, or industrial design rights arising from use of the goods or any part thereof by the purchaser. 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 perially, 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 delayed goods or unperformed services using the current prime interest rate calculated for each day of the delayed goods or unperformance. The purchaser may also consider termination of the contract. The purchaser, may leminate this contract fails to perform any other obligation(s) under the contract, or has engaged in corrupt or fraudulent practices in competing for or in executing the contract. 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.

- such similar goods, works or services.

 Where the purchaser terminates the contract in whole or in part, the purchaser may decide to impose a

- SPECIAL INSTRUCTIONS AND NOTICES TO SUPPLIERS REGARDING THE COMPLETION OF THIS 2.
- 2.1

- QUOTATION.

 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. 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. The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated. Quotation submitted must be complete in all respects. Any alteration made by the bidder must be initialled.

 Use of correcting fluid is prothibited
 Quotation will be opened in public as soon as practicable after the closing time of quotation.

 Where practice, prices are made public at the time of opening quotations.

 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.

- SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

 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.

 Each quotation shall be addressed in accordance with the directives in the quotation documents and shall be lodged in a separate seaded 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 helping invalid. ed as being invalid,
- All quotations received in sealed envelopes with the relevant quotation numbers on the envelopes are kept An quotations received in seased envelopes with the relevant quotation numbers on the envelopes are kept unopened in sale 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. 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.
- 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. Quotation documents must not be included in packages containing samples, Such quotations may be rejected 3,5
- 3.6

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
- 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. Ir	order to give effect to the	ne above, the following questionnaire must	t be co	ompleted and submitted with the	quote.		
2.1. 2.2	Full Name of bidder/re	presentative	2.4. 2.5	Company Registration Number	r:		
2.3.	Position occupied in th	e Company (director, trustee, shareholder	2.5. 2):2.6.	VAT Registration Number:			
2.7.	The names of all direc	tors / trustees / shareholders / members, t	their ir	ndividual identity numbers, tax re			
2.0	Are you or one person	bers must be indicated in paragraph 3 bel connected with the bidder presently employed	OW.	ou the state?		PPLICA	
2.0.	1. If so, fumish the follow	ing particulars:	byea L	by the state?	YES	NO	<u>}</u>
2.0.	Name of person / direct	or / trustee / shareholder/ member:					
	Name of state institution	at which you or the person connected to	the bi	dder is employed:	***************************************		••••
	Position occupied in the	state institution:		Anv other particulars:			
2,8.2	If you are presently e	employed by the state, did you obtain the	approp	oriate authority to undertake rem	unerative work outside	employ	men
	in the public sector?			•	YES	-	_
2.8.2	2.1. If yes, did you atta-	ch proof of such authority to the quote doc	umen	t?		1 110	-
(Note:	<u>Failure to submit proof o</u>	f such authority, where applicable, may re-	<u>sult in</u>	the disqualification of the quote.)		
2.8.2	2.2. If no, furnish reaso	ns for non-submission of such proof:					
2.9.		e, or any of the company's directors / trust	ees/	shareholders / members or their			
0.0	state in the previous tv				YES	NO)
2.9.	1. If so, furnish particula	ars:		<i>ft</i>			
2.10		connected with the bidder, have any relatine evaluation and or adjudication of this qu			41		
2 10		ars:			YES	NO	
2.10	Are volumer and nerson	connected with the bidder, aware of any re	elation	nshin (family friend other) between	en any other hidder ar	id any ne	ereor
	employed by the state	who may be involved with the evaluation a	and or	adjudication of this quote?	YES		-
2.11		ars:			[IEO	INC	-
2.12	. Do you or any of the di	rectors / trustees / shareholders / members	of the	e company have any interest in a	ny other related compa	nies wh	ethe
	or not they are bidding	for this contract?			YES	NO	
2.12	.1. If so, furnish particula	ars:					
3. NB:	The Department Of He to ensure that their de	s / trustees / members / shareholders. alth will validate details of directors / trustails are up-to-date and verified on CSD. It passed over as non-compliant according to	f the I	Department cannot validate the i	information on CSD, t		
4	DECLARATION			•			
	HE UNDERSIGNED RNISHED IN PARAC	(NAME) RAPHS 2.		CERTIF	Y THAT THE INFO	RMAT	ION
	CCEPT THAT THE S OVE TO BE FALSE.	TATE MAY REJECT THE QUOTE (OR A	CT AGAINST ME SHOULI) THIS DECLARAT	NOI	
	ne of bidder	Signature		Position	Date	•••••	
1"Stat	e" means –						
a)	any national or provincial	department, national or provincial public entity or in the meaning of the Public Finance Management		provincial legislature; national Assembly or the national Cou Parliament.	ncil of provinces; or		
L.V	Act, 1999 (Act No. 1011999	p Lantitus	د)	i andiliciti,			

and 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.