

SharePoint

Gcaba Siphokazi ?

KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

KZN HEALTH

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Search this site

HOME CORPORATE INFORMATION COMPONENTS DIRECTORY DISTRICT OFFICES HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

AdvertQuote

KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

Quotation Advert

Opening Date:	2021-10-14	
Closing Date:	2021-10-22	
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Clairwood hospital	<input checked="" type="checkbox"/>
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	CLAIRWOOD HOSPITAL	
Date Submitted	2021-10-14	
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: CLW0185/21/22	
Item Category:	Goods	<input checked="" type="checkbox"/>
Item Description:	MOBILE STANDS ON WHEELS(BEDSIDE ICU MONITORS)	

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type:	Select...	<input checked="" type="checkbox"/>
Date :		
Time:		
Venue:		

QUOTES CAN BE COLLECTED FROM: WEBSITE

QUOTES SHOULD BE DELIVERED TO: CLAIRWOOD HOSPITAL TENDER BOX

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: SIPHOKAZI
 Email: Siphokazi.Gcaba@kznhealth.gov.za
 Contact Number: 031-4543017
 Finance Manager Name: MRS.S.G. MKHIZE
 Finance Manager Signature:

No late quotes will be considered



END-USER SPECIFICATION FORM

Quote Number:

2na/cw/0185/21/22

Item Description:

TROLLEY ON CASTORS FOR NIHON KOHDEN-BSM3532-----

Department/Section:

Purpose of Item:

Pre-qualification criteria if any:

1.1. Is the item required to have a regulatory body certification (e.g. SABS, SANS, SANAS, ISO, CIDB, etc.)? Yes / No: Yes

Regulatory Body / certification required if Yes: SABS

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

if Yes, specify: Date / / Time Place NO

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

if Yes, specify: YES

1.4. Provisions of section 4(1)(a) of the PPPFA Regulations, 2017 if applicable? Yes / No

if Yes, specify:

1.5. Liability Cover insurance? Yes / No

if Yes, specify: NO

2. What is the specification of the required item?

List specifications to be advertised	Comment
1. Supply of Trolley on castors	
2. Quantity: 24 units	
3.	
4. SEE ATTACHED SPECIFICATION	
5.	
6.	
7. SABS or ISO Approved	
8.	
9.	
10.	
11.	

3. Does a sample need to be submitted? Yes / No (select option 3.1 or 3.2) Yes

3.1. Deadline for submission if Yes: Date / / Time Place

or

3.2. Specify that samples must be made available when requested in writing. Yes ☐ or No ☐

4. Penalties to be noted by the suppliers:

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

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

List evaluation criteria / special 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 to stipulated administrative requirements?

Name of End-user (in full)	<u>C. W. Ncobeni</u>	Name of SCM Rep (in full)	<u>BACBALA</u>
Designation / Rank (in full)	<u>Agm</u>	Designation / Rank (in full)	<u>SCC</u>
Signature	<u>[Signature]</u>	Signature	<u>[Signature]</u>
Date	<u>01/10/2021</u>	Date	<u>30/09/2021</u>

**END-USER SPECIFICATION FORM**

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 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)
7.	Durability:	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
10.	Preference points	Preferential Procurement System (80/20) if applicable



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

DIRECTORATE:

CLAIRWOOD HOSPITAL

Physical Address: 1 Higginson Highway, Mobeni, 4060
Postal Address: Private Bag X04, Mobeni, 4060
Tel: 031 451 5203 Fax: 031 462 2882 Email: Anusha.Rughoonandan@kznhealth.gov.za
www.kznhealth.gov.za

BIDS SPECIFICATION

MOBILE STAND FOR NIHON KOHDEN –BSM3532 BEDSIDE PATIENT MONITORS (MOUNTABLE)

- Mobile with stand on wheels
- Mountable
- Metal
- Approximately 1,5 metres to 1,8 metres in height
- Must include a basket to house the accessories
- Must include screws and all attachments that will allow for mounting the equipment on.
- Product user manual

Mrs. A.Rughoonandan(Anm)

25/08/21.

Date