SharePoint Sikithi Sipho - ?



KZN Health Intranet KZN HEALTH

Search this site Q

CORPORATE INFORMATION COMPONENTS DIRECTORY

DISTRICT OFFICES

KZN Health > Components > Supply Chain Management

AdvertQuote

| | HEALTH REPUBLIC OF SOUTH AFRICA | Quotation Advert | |
|-----------------|------------------------------------|---|---|
| Opening Date | | 2022-04-12 | |
| Closing Date: | | 2022-04-26 | |
| Closing Time: | | 11:00 | |
| INSTITUTIO | N DETAILS | | |
| Institution Na | me: | Grey's hospital | ~ |
| Province: | | KwaZulu-Natal | |
| Department or | r Entity: | Department of Health | |
| Division or se | ction: | Central Supply Chain Management | |
| Place where g | oods / services is required | Grey's Hospital | |
| Date Submitte | d | 2022-04-12 | |
| ITEM CATE | GORY AND DETAILS | | |
| Quotation Nur | mber: | ZNQ: | |
| | | GRS 3910/01/22 | |
| Item Category | | Goods | ~ |
| Item Descripti | on. | Single Needle Connectors - 'Y' Connectors with Plastic Clamps on each Pigtails. Must have Luer lock Adaptors, for use on Haemodialysis where the Patient only has one Port functioning. | : |
| Quantity (if su | pplies) | 600 Units | |
| COMPULSO | RY BRIEFING SESSION / | SITE VISIT | |
| Select Type: | | Not Applicable | ~ |
| Date : | | | |
| Time: | | | |
| Venue: | | | |
| QUOTES CAN | BE COLLECTED FROM: | Departmental Website | |
| QUOTES SHO | ULD BE DELIVERED TO: | Grey's Hospital Tender Box / Fax: 033 897 3006 | |
| ENQUIRIES | REGARDING THE ADVER | RT MAY BE DIRECTED TO: | |
| Name: | | Sipho Sikithi | |
| Email: | | No Email / Fax: 033 897 3006 | |
| Contact Numb | per: | 033 897 3492 | |
| Finance Mana | ger Name: | Mrs/B.G Anderson | |
| | | / ^ | |
| | | 1/5/.5 | |

| | S | TANDARD | QUC | TE D | OCUM | ENTA | TION | SUPP | LYC | CHA | ΔIN | MANA | GEME | ENT L | IND | ER R | 30 00 | 0.00 | incl | VA | T | | | | |
|---|--|---|-------------------------|--------------|---------------|------------|-------------|---|--------------|--|---|--------------------------|--------------------------------------|-----------|----------|------------|------------|-----------|------------|-----------|--------------|-----------|---------|-------|--|
| YOU AF | E HEREBY INVIT | ED TO QUOT | E FOR | REQU | IREMEN | TS AT: | Grey's | Hospita | al | | | | | | | | | 540 | | | | | | | |
| DATE A | DVERTISED: 202 | 2-04-12 | FA | CSIMIL | E NUME | BER: | 33 897 | 3006 | | | | | | | | | | 3006 | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| ENQUIF | RIES REGARDING | TECHNICAL | INFOR | RMATIO | N: | | | | | | | | | | | CON | TACT N | NUMB | FR: | | | | | | |
| PHYSIC | AL ADDRESS: | 1Townbush | Ropad, | Northe | ern Park, | Pieter | maritzb | urg, 320 | 001 | | | | | | | | | | | | | | | | |
| | NUMBER: GRS | | | | | | | | | | | | | | | | | | | | | | | | |
| DESCRI | PTION.SINGLE N | EEDLE CON | INECTO | ORS -'Y | CONN | ECTO | RS WIT | H PLAS | STIC | CLA | MPS | ON EA | CH PIC | STAILS | S. MI | UST H | AVE LU | JER L | OCK | AD | APTOR | S | | | |
| | THE F | OLLOWING | PARTIC | CULAR | S MUST | BE FU | RNISHI | ED (FAI | LURE | ТО | DO S | SO MAY | RESU | LT IN Y | ′OUI | R OFFE | ER BEI | NG DI | SQUA | LIF | IED) | | | | |
| | | | | | | | NAME | & ADDF | RESS | OF | BIDD | ER (FIR | M) | | | | | | | | | | | | |
| NAME OF BIDDER: DATE: | | | | | | | | | | | | | | | | | | | | | | | | | |
| PHYSICAL ADDRESS: EMAIL ADD | | | | | | | | | | ADDRE | RESS: | | | | | | | | | | | | | | |
| CONTACT NUMBER: FACSIMILE | | | | | | | | | | MILE NU | NUMBER: | | | | | | | | | | | | | | |
| SIGNATURE OF BIDDER: SARS PIN: | | | | | | | | | | PIN: | | | | | | | | | | | | | | | |
| | | | | | | | | | ENTR | AL SUP | SUPPLIER DATABASE REGISTRATION (CSD) NO.: ↓ | | | | | | | | | | | | | | |
| UNIQUE REGISTRATION REFERENCE: ↓ | | | | | | | | | | T | | | | | | | | | | | | | | | |
| | | | | | | | | | | | ΠΊ | | ГΤ | 1 | Τ | | 1 | Τ | ΙТ | _ | ГΤ | + | Т | | |
| Dogs this c | offer comply with th | o enocificatio | 2 | | | | | | lou | | | | | | _ | | | | | _ | | | | | |
| | | | | | | | | | · · | period, e.g. 1day, 1week | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| Item No Quantity Description | | | | | | | | | | | | | Brand & model Country of manufacture | | | | | | | | Price R c | | | | |
| 1 | 1 600 UNITS SINGLE NEEDLE CONNECTORS -'Y' CONNECTORS WITH | | | | | | | | | | PLA | STIC | | | | | | | | | | | 1 | | |
| | CLAMPS ON EACH PIGTAILS. MUST HAVE LUER LOCK A | | | | | | | | | K AI | DAP | TORS | | | | | | | | | | | | | |
| | | FOR USE ON HAEMODIALYSIS WHERE THE PATIENT OF | | | | | | | | | NLY | HAS | | | | | | | | | | | | | |
| | | ONE PORT FUNCTIONING. | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | \perp | | | | | | | | | |
| | | | | | | | | | | | | | | | | | _ | | | | | | | | |
| VALUE / | DDED TAY O 45 | | | | | | | | | | | | | | | | | | | | | | | | |
| | ADDED TAX @ 15 | | | | | | | | | | | | | | | | | | | | | | | | |
| | QUOTATION PRIC | | | | ays) | | | | | | | | | | 100 | 8 18 5 5 | | | | | | | | | |
| 1.1. The Department is under no obligation to accept the lowest or any quote. | | | | | | | | | 2.1 | | ss inconsis Il and vice | | | | | | | | | | | | | | |
| 1.2. 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 | | | | | | | ion | 2.2 | neut Unde | er. er no circu | mstances | s whatso | ever | may the | uotation | / bid fo | rms be | retvi | ned or rec | drafted F | hotoc | onies | | | |
| of prid | ces or preference claim made, to investigate th | s in cases where | e it is evid | dent that a | a typing, wr | itten, tra | nsfer or u | init error h | nas | | of the | e original b ocopies. | id docun | nentation | may | be used | , but an | original | signatu | re m | ust appe | ar on suc | h | орлоо | |
| 1.3. ALL L | DECISIONS TAKEN BY | THE DEPART | MENT AR | RE FÍNAL, | , INCLUDIN | IG THE | AWARD | OF THIS | | 2.3 | The | bidder is a | dvised to | check th | ne nu | mber of p | ages an | d to sat | isfy him | nself | that none | are mis | sing o | r | |
| QUOTATION. 1.4. The price quoted must include VAT (if VAT vendor). However, it must be noted that the Department | | | | | | | | duplicated. 2.4 Quotations submitted must be complete in all respects; however, where it is identified that information in | | | | | | | | | | | | | | tion in | | | |
| reserves the right to evaluate all quotations excluding VAT as some bidders may not be VAT vendors. 1.5. The bidder must ensure the correctness & validity of the quotation: | | | | | | | i. | 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 | | | | | | | | | | | | | | | | | |
| 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 | | | | | | | | information. 2.5 Any alteration made by the bidder must be initialled. Failure to do so may render the response invalid. | | | | | | | | | | | | | | | | | |
| (ii) 1.6. The b | it is the responsibility of idder must accept full r | of the bidder to co | onfirm red the prope | ceipt of the | eir quotation | on and to | keep pro | of thereo | f. | 2.6 Use of correction fluid is prohibited and may render the response invalid. | | | | | | | | | | | | | | | |
| devol | ving on under this agre quotation will be evalua | ement, as the Pr | incipal (s |) liable fo | r the due fu | ılfilment | of this co | ntract. | | 2.8 Where practical, prices are made public at the time of opening quotations. | | | | | | | | | | | | | | | |
| inform | nation and/or functional | ity criteria. All re | quired do | cumentat | tion must be | e comple | eted in ful | l and | | 2.9 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. | | | | | | | | | | | | | | | |
| 1.8. Offers | must comply strictly w | ith the specificat | ion. | | | | | | | 2.10 The Department is under no obligation to pay suppliers in part for work done if the supplier can no longer fulfill their obligation | | | | | | | | | | | | | | | |
| 1.10. Late of | offers that meet or are of offers will not be consid | ered. | | | | | | | | 3. | SPF | CIAL INST | RUCTIO | NS RFG | ARD | ING HAN | יים אות. | VERFN | חווס | ΔΤΙ | 200 | | | | |
| 1.11. Expire month | ed product/s will not be | accepted. All pro | oducts su | pplied mu | ust be valid | for a mi | nimum pe | eriod of size | х | 3.1 | Quot | ations sha | ll be lodg | ed at the | addı | ress indic | ated no | later tha | an the c | losir | | ecified f | or thei | г | |
| 1.12. Used/ | second-hand products | | | | haaa | ation t | - 4-:1 | 211 1 1 | | 3.2 | Each | pt and in a quotation | shall be | addresse | ed in | accordan | ice with t | he dire | ctives in | the | quotation | ı docum | ents ar | nd | |
| 1.13. A bidder not registered on the Central Suppliers Database or whose verification has failed will not be considered. | | | | | | | | | | numb | be lodged er and clo | sing date | indicate | ed on | the enve | lope. The | e envek | ope sha | all no | t contain | docume | nts rel | ating | | |
| 1.14. All de | I de la companya della companya della companya de la companya della companya dell | | | | | | | | | | to an | y quotation | other th | an that s | showr | on the e | envelope | . If this | provisio | n is | not comp | lied with | , such | , | |

- 1.14. All delivery costs must be included in the quoted price for delivery at the prescribed destination.
 1.15. 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.
 1.16. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
 1.17. In the event of a bidder having multiple quotes, only the cheapest according to specification will be considered.
 1.18. Verification will be conducted to identify if bidders have multiple companies and are cover-quoting for this bid.
 1.19. In such instances, the Department reserves the right to immediately disqualify such bidders as coverquoting is an offence that represents both corruption and acquisition fraud.

 2. SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS

 - rejected as being invalid.
- 2. SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS QUOTATION.

1

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

enterprise.

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.

| 2.1. Full name of bidder/representative | |
|--|---------------|
| employee / persal numbers must be indicated in paragraph 3 below. APPLICABLE] 2.8. Are you or any person connected with the bidder presently employed by the state? YES | if applicable |
| 2.8. Are you or any person connected with the bidder presently employed by the state? 2.8.1 If so, furnish the following portion less: | п аррпоавіс, |
| 2.8.1.If so, furnish the following particulars: Name of person / director / trustee / shareholder/ member: | NO |
| Name of state institution at which you or the person connected to the employed: | bidder is |
| Position occupied in the state institution:Any particulars: | other |
| 2.8.2. If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside | |
| 2.8.2.1. If yes, did you attach proof of such authority to the quote document? | NO |
| (Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the quote.) | |
| 2.8.2.2. If no, furnish reasons for non-submission of such proof: | |
| 2.9. Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses conduct busin | ess with the |
| state in the previous twelve months? | |
| 2.9.1. If so, furnish particulars: |] 110 |
| 2.10. Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the | ne state and |
| who may be involved with the evaluation and or adjudication of this quote? | |
| 2.10.1. If so, furnish particulars: | NO |
| 2.11. Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bid | der and any |
| person employed by the state who may be involved with the evaluation and or adjudication of this quote? | |
| 2.11.1. If so, furnish particulars: |] NO] |
| 2.12. Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related | l companies |
| whether or not they are bidding for this contract? | |
| 2.12.1. If so, furnish particulars: | 1 110 |
| 3. Full details of directors / trustees / members / shareholders. | |
| NB: The Department Of Health will validate details of directors / trustees / members / shareholders on CSD. It is the responsibility to ensure that their details are up-to-date and verified on CSD. If the Department cannot validate the informat the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016. | on on CSD. |
| 4 DECLARATION | |
| I, THE UNDERSIGNED (NAME)CERTIFY THAT THE INFOI | RMATION |
| | |
| I ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAINST ME SHOULD THIS DECLARAT PROVE TO BE FALSE. | ON |
| | |
| Name of bidder Signature Position Date | |
| 1 "State" means – | |
| a) any national or provincial department, national or provincial public entity or constitutional Institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999); Constitutional Institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999); Constitutional Institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999); Constitutional Institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999); | |

2" 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