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KZN HEALTH

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AdvertQuote

KWAZULU-NATAL PROVII HEALTH REPUBLIC OF SOUTH AFRICA	Quotation Advert	
Opening Date:	2022-02-21	
Closing Date:	2022-02-28	_
Closing Time:	11:00	13.12
NSTITUTION DETAILS		
nstitution Name:	Prince Mshiyeni Memorial hospital	~
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	Prince Mshiyeni Memorial Hospital main stores	and garage of the state of the
Date Submitted	2022-02-21	110
TEM CATEGORY AND DETAILS	2022-02-21	, Ш
Quotation Number:	ZNQ:	
	PMM/703/21/22	
tem Category:	Goods	v
tem Description:	50000 UNITS MASKS PARTIVULATE RESPIRATORY KN95	
	SEE ATTACHED ANNEXURE D FOR PRE-QUALIFICATION CRITERIA	
Quantity (if supplies)	.50000	
COMPULSORY BRIEFING SESSION	/ SITE VISIT	
Select Type:	Not Applicable	
Pate :	and the sub-residence of the s	li s
ime:		1000
'enue:		
QUOTES CAN BE COLLECTED FROM:	PRINCE MSHIYENI MEMORIAL HOSPITAL 23-25 FEBRUARY 2022 TIME 09H00 TO 15H00	
QUOTES SHOULD BE DELIVERED TO:	PRINCE MSHIYENI MEMORIAL HOSPITAL TENDER BOX	
NQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:	
lame:	MISS MBALI MDLULI	
mail:	N/A	
ontact Number:	0319078365	

ANNEXURE D – Target Local PEOPLE

PRE-QUALIFICATION CRITERIA FOR PREFERENTIAL PROCUREMENT

	Contract Number	PMM/703/21/22	Description of Service Mask s particulate respiratory KN95		
Name of Tenderer (Bidder):					
	PRE-QUALIFICATION CRITERIA				
				Yes / No NA	
1.	Database (CSI	D), "proof of B-BBEE status level of con	BEE status level 1 contributor on Central Supplier tributor" means- (a) the B-BBEE status level certificate ffidavit as prescribed by the B-BBEE Codes of Good		
2.	people who are which is Umlaz	e LOCAL and whose address indicate th i/ Ngonyameni or Ethekwini Lower Sout IMbumbulu, Kwamakhutha, Nsimbini, F	to an EME or QSE which is at least 51% owned black nat they are living within catchment area of the hospital th (covering areas such as Isipingo, Malukazi, Illovu, folweni, Umnini, Magabheni, Danganya, Inkwali,		
	Or				
	address indicat Ethekwini Lowe	e that they are living within catchment a er South (covering areas such as Isiping	% owned by black people who are LOCAL and whose area of the hospital which is Umlazi/ Ngonyameni or go, Malukazi, Illovu, Amanzimtoti, UMbumbulu, , Danganya, Inkwali, Imfume, Nkwali, Odidini etc).		
3.	document for the		ain contractor must not submit a separate tender nould they do so, the quotation will be treated as non-		
1.		ele who are women must submit proof of within catchment area.	f address from Ward Counsellor or Utility Bill as a proof		
Fer dis	nderer-(Bidder) qualified	failing to comply with the above will	be-regarded as non-responsive and immediately be		
5.		actor and subcontracted company must n front of Commissioner of Oaths.	t submit valid proof of joint venture agreement signed		
No or	te. We reserve tracting but fail	the right to check for validity of the jo ling this criteria will be regarded as r	oint venture agreement. Tenderer (Bidder) sub- non-responsive and will immediately be disqualified		
3.	clearance certificate which	icate on Central Supplier Database (CS n will be checked and verified with SAR:	with Central Supplier Database (CSD), have valid tax SD). If expired there must be proof of tax clearance S via pin number. The CSD proof must be submitted treated as non-responsive and will be disqualified.		
	Name		Signature of Bidder Representative		

EVALUATION CRITERIA

Note: Prospective tenderer (bidder) is obliged to comply with pre-qualification criteria as guided on Preferential Procurement Regulation 2017, any tenderer (bidder) who fail to comply with this, will be regarded as non-responsive and will be disqualified.



This quotation will be evaluated as follows:

- 1. Phase 1 Prequalifying criteria as prescribed on Annexure D.
- 2. Phase 2 Mandatory requirements and specification
- 3. Phase 3 Price and Preference Point System 80/20 System

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