

KZN Health Intranet

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KZN Health > Components > Supply Chain Management

AdvertQuote

KWAZULU-NATAL PROVIN HEALTH REPUSLIC OF SOUTH AFRICA	CE Quotation Advert
Opening Date:	2022-02-25
Closing Date:	2022-03-04
Closing Time:	11:00
INSTITUTION DETAILS	
nstitution Name:	Dr Pixley ka Isaka Seme Memorial Hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	DR PIXLEY KA ISAKA SEME MEMORIAL
Date Submitted	2022-02-25
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: DPM 308/21-22
Item Category:	Goods
item Description:	RESTONE FOAM PADS WITH ADHESIVE SIDE FOR REPLACEMENT OR FOAM ON PENILE CLAMP
Quantity (if supplies)	O1 ROLL
COMPULSORY BRIEFING SESSION	/ SITE VISIT
Select Type:	Not Applicable
Date :	
Time:	
Venue:	
QUOTES CAN BE COLLECTED FROM:	KZN HEALTH WEBSITE
QUOTES SHOULD BE DELIVERED TO:	310 JABU NDLOVU STREET OLD BOYS MODEL PMB/EMAIL:quotations.scmho@kznhealth.gov.za
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:
Name:	ZAMAMPEMBE DLADLA
Email:	zamampembe.dladla@kznhealth.gov.za
Contact Number:	087 131 1807
Finance Manager Name:	BM NTOMBELA
Finance Manager Signature:	John Sill

S	STANDARD QUOTE DOCUMENTAT	TION SUPPLY C	CHAIN	MAN	IAG	ME	J TV	JND	ER R	30 00	0.0	0 in	cl v	AT				
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT . DR PIXLEY KA ISAKA SEME MEMORIAL HOSPITAL												Į.						
DATE ADVERTISED 25/02/2022 FACSIMILE NUMBER:												•••••		•••••		Ä.		
ENQUIRIES REGARDING THE QUOTE: ZAMA: DLADLA															*****	,		
ENQUIRIES REGARDING TECHNICAL INFORMATION: LINDA PHUNGULA CONTACT NUMBER: 087.13													7 131	1782	egatika) Permenan	arene.		
PHYSICAL ADDRESS: 310 JABU NDLOVU STREET OLD BOYS MODEL SCM TENDER BOX													********			į		
QUOTE NUMBER: DPM 308/21/22 CLOSING DATE: 04/03/2022 CLOSING TIME: 11:00																		
DESCRIPTION RESTORE FOAM PADS WITH AN ADHESIVE SIDE																		
THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO MAY RESULT IN YOUR OFFER BEING DISQUALIFIED)																		
NAME & ADDRESS OF BIDDER (FIRM)																		
NAME OF BIDDER:																		
PHYSICAL ADDRESS:	EMAIL ADDRESS:																	
CONTACT NUMBER:			FACS	IMILE	NUM	BER:												
SIGNATURE OF BIDDER:	SARS	PIN:																
(By signing this document,	CENT	NTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.: ↓																
UNIQUE REGISTRATION																		
												l						
Does this offer comply with th	State delivery period, e.g. <i>1day, 1week</i>																	
s the price firm?	y costs	must be included in the quoted price																
Item Quantity	Description								Country of manufacture			<u> </u>	Price R			С		
1. 10 BOXES	RESTORE FOAM PADS WITH																	
	SPECIFICATON A						<u> </u>				\perp							
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	QUOTATIONS TO BE EM	ALLED BACK AT			-			•••••		+				-				
	quotations.scmho@kznhealth.gr	+					╂							-	\dashv			
	310 JABU NDLOVU STREET OLD BO	+					+				+				-			
VALUE ADDED TAX @ 15% (Only if VAT Vendor)														-				
	CE (VALIDITY PERIOD 60 Days)					•								\top			\dashv	\neg
	NDITIONS OF QUOTATIONS o obligation to accept the lowest or any quote.														singular s			

- 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 satisfactority. been made, to investigate the vendor's standing and ability to complete the supply/service satisfactor ALL DECISIONS TAKEN BY THE DEPARTMENT ARE FINAL. INCLUDING THE AWARD OF THIS
- The price guated 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. The bidder must ensure the correctness & validity of the quotation:

 (i) that the price(s), rate(s) & preference quoted cover all for the work/filem (s) & accept that any mistakes regarding the price (s) & calculations will be at the bidder's risk
- it is the responsibility of the bidder to confirm receipt of their quotation and to keep proof thereof.
- In It is the responsibility of the proper execution & fulfilment of all obligations conditions devoking on under this agreement, as the Principal (s) liable for the due fulfilment of this contract. 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.
- Offers must comply strictly with the specification.
- Only offers that meet or are greater than the specification will be considered.

 Late offers will not be considered.
- 1.11. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six
- 1.12. Used/ second-hand products will not be accepted
- 1.13. A bidder not registered on the Central Suppliers Database or whose verification has failed will not be considered.
- 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
- 1.18. Verification will be conducted to identify if bidders have multiple companies and are cover-quoting for this

quoting is an offence that represents both corruption and acquisition fraud

- 1.19. In such instances, the Department reserves the right to immediately disqualify such bidders as cover-
- SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS OUOTATION.

- 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
- The bidder is advised to check the number of pages and to satisfy himself that none are missing or
- 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
- Any alteration made by the bidder must be initialled. Failure to do so may render the response invalid.

- Any alteriation made by the bidder must be interiest. Fainter to do so findly render the response invalid.

 Quotations will be opened in public as soon as practicable after the closing time of quotation.

 Where practical, 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. 2.9
- 2.10 The Department is under no obligation to pay suppliers in part for work done if the supplier can no longer
- SPECIAL INSTRUCTIONS REGARDING HAND-DELIVERED QUOTATIONS
- Quotations shall be lodged at the address indicated no 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 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.
- 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.

 A specific box is provided for the receipt of quotations, and no quotation found in any other box or
- Aspectic dots is provided at his exception quadrations, and in department in lary shall box of 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 as being invalid.

D-USER SPECIFICATION FORM OF KWAZULU-NATAL Number: Description: FOAM PAOS AN ADHESIVE SIDE epartment/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.)? Y Regulatory Body / certification required if Yes: 1.2. Is a compulsory site inspection / briefing session required? Yes KNo if Yes, specify: Date _____/ Time _____ Place ____ 1.3. Is local production and content part of the quote? Yes / No if Yes, specify: 1.4. Provisions of section 4(1)(a) of the PPPFA Regulations,2017 if applicable? Yes / (10) if Yes, specify: 1.5. Liability Cover insurance? Yes / No if Yes, specify: What is the specification of the required item? List specifications to be advertised Comment single adjustice Icm easy SO71-SPOONS 500 mm 100 mm DMM 100 mm cella Does a sample need to be submitted? (Tes / No(select option 3.1 or 3.2) 3.1. Deadline for submission if Yes: Date Time Place 3.2. Specify that samples must be made available when requested in writing. Yes _____ or No [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. What is the evaluation criteria / special terms and conditions to be advertised? st evaluation criteria / special terms and conditions to be advertised (if applicable) Pre-qualification criteria | Does the offer meet the pre-qualification criteria? Administrative Does the offer comply to stipulated administrative requirements? Conformance: Was the product made or service performed to specifications? Performance: Will/does the product/service fulfil its performance obligation, in a manner that releases the supplier from all liabilities under the contract? Features: What characteristics does the product or service have? Reliability: How long can a product go between failures and the need for maintenance? (guarantee) Durability: What is the useful life for the product? How will the product hold up under extended use? Serviceability: How easy is it to repair, maintain or support the product or service? (customer support) Ability & Capacity The ability and capacity of the vendor to execute the contract Preference points Preferential Procurement System (80/20) if applicable ne of End-user (in full) Name of SCM Rep (in full) signation / Rank (in full) SIYA Designation/ Rank (in full) nature Signature

Date

е

dard End-User Specification Form

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

Act, 1999 (Act No. 1 of 1999); 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 giv	e effec	t to the	above, the	following	questio	nnaire musi	t be co	mpleted a	and submit	ted with the qu	ote.				
2.2.	Full name of the literature of	mber: occup						2.4. e,2.5.	Compar Tax Ref	ny Registrat erence Nur	tion Number: nber:umber:	***********	*********			
	employee / APPLICAB	/ persa LE]	l numbe	ers must be	indicated	in paraç	graph 3 bel	heir in ow.	dividual id	dentity num	bers, tax refer			nd, if ap	pficabi	e,
2.8.1	Are you or . If so, furnis Name of pe	h the f	ollowing	particulars	;	·		•	•				—	ÆS	NO	
	Name c employed:	of s	state	institution	at	which	you	or	the	person	connected	to	the	bidd	er	is
	Position particulars:. . If you are		********								lertake remune			•	oth alovme	
	in the put	olic sec	ctor?							ionity to ano	orano romane	TOUVO WO		ES	NO	_
	.1. If yes, o <i>Failure to sul</i>									alification o	f the quote.)					
2.8.2	.2. If no, fu	ırnish r	easons	for non-sub	mission o	of such p	oroof:		• • • • • • • • • • • • • • • • • • • •							
2 <i>.</i> 9.	Did you or	your s	oouse, o	or any of the	compan	y's direc	ctors / truste	ees/s	harehold	ers / memb	ers or their spo	ouses cor	nduc <u>t b</u> u	usiness		e
291	state in the If so, furn												<u> Y</u>	ES	NO	L
2.10.	Do you, or	any p	erson co	onnected w	ith the bid	dder, ha	ive any rela	ationsh	ip (family	, friend, ot	her) with a per	son emp	loyed b	y the s	tate ar	ıd
	who may be	e invol	ved with	i the evalua	tion and c	r adjudi	cation of th	is quo	te?			·		ES	NO	Ī
2.10. 2.11.	1. If so, furn Are you, or	ısın paı ranv r	ticulars berson (connected v	with the h	idder s	ware of ar	w rela	tionshin i	family frie	nd, other) bet	MOON ON	, other	hiddor	and ar	
	person emp	oloyed	by the s	tate who m	ay be invo	olved wi	th the evalu	uation	and or ad	judication of	of this quote?	scon any		ES	NO	y
2.11.	1. If so, furn	ish par	ticulars													_
2.12.	whether or	any or not the	une un v are bi	ectors / trus ddina for th	stees / sr is contrac	iarenoid 17	iers / mem	pers o	i the con	npany have	any interest	in any ot	·	ated col	mpanie NO	S
2.12.	1. If so, furn	ish par	ticulars:				************		**********	* *** * * * * * * * * * * * * * * * * *				E0	INO	_
NB:	responsibili	tment ty to e	Of Hea	alth will val at their det	idate <mark>det</mark> ails are u	ails of p-to-dat	directors e and verifi	ied on	CSD. If t	he Departn	shareholders nent cannot va easury Instruct	lidate the	inform	nation o	upplier on CSI	s'),
4	DECLAR	ATION														
I, TH FUR	IE UNDER NISHED II	RSIGN N PAI	ED (N RAGR	AME) APHS 2.	• • • • • • • • • • • • • • • • • • • •		***********		******		CERTIFY T	HAT TH	IE INF	ORM	ATIO	1
	CEPT THA VE TO BE			TE MAY	REJECT	THE	QUOTE C	OR AC	CT AGA	INST ME	SHOULD TI	HIS DEC	CLARA	ATION	ſ	
Name	of bidder				nature		***********		Position			Da	ate	**********	• • • • • • • • • • • • • • • • • • • •	
a)	e* means – any national d							c)	provincial le	egislature;	national Court	£				

^{2&}quot; 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.