

Quotation Advert

Opening Date:

30/01/2024

Closing Date:

06/02/2024

Closing Time:

11:00

INSTITUTION DETAILS

Institution Name:

Wentworth Hospital

Province:

KwaZulu-Natal

Department of entity:

Department of Health

Division or section:

Supply Chain Management

Place where goods/

WENTWORTH HOSPITAL

service is required: **Date Submitted:**

29/01/2024

ITEM CATEGORY AND DETAILS

Quotation number:

WEH: 337/23-24

Item Category:

Goods

Item Description

Acticoat Silver Coated Antimicrobial Barier Dressing 40cm X 40CM

15 inch X 15 inch - box of 6 units

10 Boxes QUANTITY

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type:

Not applicable

Date:

Click here to enter a date.

Time:

Venue:

NOTE!!

QUOTES CAN BE COLLECTED FROM:

Pint from the web and bring the document for signing

on site meeting date

QUOTES SHOULD BE DELIVERED TO: Blue Tender Box at the Min Gate Wentworth Hospital

NOTE!! No emailed documents will be allowed

ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:

Name:

Themba Dlamini

Email:

Themba.dlamini@kznhealth.gov.za

Contact number: 031 460 5314

Finance Manager Name: Mr. S. Cotchobos Finance Manager Signature





14/54	S OF QUOTATION TWORTH HOSPITAL
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT:	TWORTH HOSPITAL
FACSIMILE NUMBER: E-MAIL AD	DRESS: ntombifuthi.khumalo2@kznhealth.gov.za
PHYSICAL ADDRESS: 1 BOSTON ROAD JACOBS 4026	
QUOTE NUMBER: ZNQ /WEH → 1337 /23 -	VALIDITY PERIOD: 90 DAYS
DATE ADVERTISED: 30-01-2024 CLOSING I	DATE: 06-02-2024 CLOSING TIME: 11:00
DESCRIPTION: ACTICOAT SILVER COATED ANTIMICRO	BIALBARIER DRESSING 40CM X 40CM - 15 INCH X 15 INCH
CONTRACT PERIOD (IF APPLICABLE): ONCE OFF	
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS): BLUE TENDER BOX AT THE MAIN GATE - 1 BOATON ROA	AD JACOBS 4026
E-MAIL ADDRESS: ENQUIRIES REGARDING THE QUOTE MAY BE DIRECTED TO: Ntombifuthi Khumalo ntombifuthi.khumalo2@kznhealth.gov.za	TELEPHONE NUMBER: 031 460 5314 ·
ENQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO	го:
CONTACT PERSON:	TELEPHONE NUMBER:
E-MAIL ADDRESS: Bidders should ensure that quotes are delivered timeously to the correct a	address. If the quote is late, it will not be accepted for consideration
The quote box is open from 08:00 to 15:30.	and one in the question to take, it will not be accepted for consideration.
QUOTATIONS MUST BE SUBMITTED ON THE OFFICIAL FORMS - (NOT TO) BE RETYPEO)
THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLIC REGULATIONS, 2022, THE GENERAL CONDITIONS OF CONTRACT (GCC) A	Y FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT
	S OF BIDDER MUST BE FURNISHED N YOUR QUOTE BEING DISQUALIFIED)
NAME OF BIDDER:	V TOUR GOOTE BEING DISQUALIFIED
E-MAIL ADDRESS:	
POSTAL ADDRESS:	
STREET ADDRESS:	
TELEPHONE NUMBER:	FACSIMILE NUMBER:
CELLPHONE NUMBER:	SARS PIN:
VAT REGISTRATION NUMBER (If VAT vendor):	
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.	MAAA
UNIQUE REGISTRATION REFERENCE:	

Sa health		ADVIDENTIAN CONTRACTOR
Department Health PROVINCE OF KWAZULU-N		e division di la companya di la comp
Quote Number:	AIAL	
	New A sign of the second	
Item Description:	Achieve Armanoby D	(C) (c) ng
Department/Section:	(4 (Paeds) Purpose of	of Item: Bus aressing
1. Pre-qualification	criteria if any:	
 1.1. Is the item re Regulatory Body / c 	quired to have a regulatory body certification (e.ģ. ABS	SANS, SANAS, ISO, CIDB, etc.)? Yes / No:
1.2. Is a compulso if Yes, specify: Date	ory site inspection / briefing session required? Yes /(No 	· · · · · · · · · · · · · · · · · · ·
1.3. Is local produ if Yes, specify:	ction and content part of the quote? (Yes / No	
1.4. Provisions of if Yes, specify:	section 4(1)(a) of the PPPFA Regulations,2017 if applical	ble? Yes / No
1.5. Liability Cover	insurance? Yes / No	
if Yes, specify:	modiance: res/No	·
What is the specific	cation of the required item?	
List specifications to be ad	dvertised	Comment
1. Achoet	Silvercooted Antimicrobiod	Continent
<u> </u>	C 8 8 7 7	
3. 1277 SHC	2455 Neurocrystals	
4. HOCM X	toem - 161 not X 16 (well	
D.		
 Does a sample need 	to be submitted? Yes / No(select option 3.1 or 3.2)	
3.1. Deadline for sub	mission if Yes Date / / —	ace
3.2. Specify that sam	ples must be made available when requested in writing. Yes	Z or No
		01140 (
Penalties to be noted	by the suppliers:	
Goots of the	ils to deliver any or all of the goods or to perform the se haser shall, without prejudice to its other remedies under the	Discos within the
contract, the purc	haser shall, without prejudice to its other remedies under the	scontract in the period(s) specified in the
as a penalty, a s	um calculated on the delivery	contract, deduct from the contract price
prime interest rate	um calculated on the delivered price of the delayed goods calculated for each day of the delay until actual delivery or p	or unperformed services using the current
		retruthlatice.
writat is the evaluation	n criteria / special terms and conditions to be advertised?	
	terms and conditions to be advertised (if applicable)	•
, and the state of	boes the other meet the pre-qualification with the	
Administrative	Does the offer comply to stipulated administration	2024-2
Conformance:		
Performance:	Will/does the product/service fulfil its performance obligation	eto;
Features:	Will/does the product/service fulfil its performance obligation from all liabilities under the contract?	in, in a manner that releases the supplier
Reliability:	Trial Cital acie issues the product of	
Durability:	Thow forigital a product go between failuses and the	for maintanance 2 /
Service obility:	What is the useful life for the product? How will the product	bald (guarantee)

me of End-user (in full) latterice Alma Calma la la Ala	
	Name of SCM Rep (in full)
153/ AN MINITER A MAN	Designation/ Pank (in full)
nature nature notice nature	Designation/ Rank (in full)
	Signature
ME PANGEO	S. C.C.
ME PALECCIO	Date July 22

The ability and capacity of the vendor to execute the contract

Preferential Procurement System (80/20) if applicable

Serviceability:

Ability & Capacity

Preference points

What is the useful life for the product? How will the product hold up under extended use?

How easy is it to repair, maintain or support the product or service? (customer support)



UOTE NUMBE	R: ZNQ	,WEH	√,337 ,23 <u>.24</u>					
ESCRIPTION:	ACTIO	OAT SILV	ER COATED ANTIMICROBIALBAR	RIER DRESSING 400	CM X 40CM -	15 INCH 2	X 15 IN	CH
REFERENCE PO	INTS WILL BE	ALLOCATED.	ACCORDING TO THE IMPLEMENTATION OF SPE	CIFIC GOALS IN TERMS OF	PPR 2022:	POINTS A	LLOCAT	TED
omotion of Sou	h African Owne	ed Enterprises			: :		20	
N NUMBER	QUANTITY	UNIT OF MEASURE	DESCRIPTION	BRAND & MODEL	COUNTRY OF MANUFACTUR		RICE	
			* ************************************	1110000	Ε	R	C	_
			, , , , , , , , , , , , , , , , , , ,					_
		***	**************************************			<u> </u>		
			,					
			waterways				-+	
					<u>.</u>			
	· ·						\dashv	
×								
A								
				· · · · · · · · · · · · · · · · · · ·	THE STREET			
	:		The state of the s					_
								_
								····
			ANNUEL 1. 11. 11. 11. 11. 11. 11. 11. 11. 11.			-	<u> </u>	
						· · · · · ·		
								_
TIE ADDED	FAX @ 15% (C	Only if VAT V	ondori				$-\!\!\!\!\!+$	
		-	RIOD 90 Days)					_
HE PRICE FI	RM?		PECIFICATION? A.N.S. / S.A.B.S. SPECIFICATION?		1		YES /	N
ATE DELIVER							YES /	N
ME OF BIDDE		G. JUATO, I	Con-	IRE OF BIDDER:	•			_