



KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

Quotation Advert

Opening Date: 07/05/2024

Closing Date: 13/05/2024

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Prince Mshiyeni Memorial Hospital

Province: KwaZulu-Natal

Department of entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods/
service is required: PMMH SURGICAL STORES

Date Submitted: 07/05/2024

ITEM CATEGORY AND DETAILS

Quotation number: ZNQ: PMM/49/24/25

Item Category: Goods

Item Description: AIRWAY GUEDAL (DIFFERENCE SIZES)

Quantity (if supplies): REFER TO THE ATTACHED

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not applicable

Date: [Click here to enter a date.](#)

Time: [Click here to enter text.](#)

Venue: [Click here to enter text.](#)

QUOTES CAN BE COLLECTED FROM: PRINT ONLINE

QUOTES SHOULD BE DELIVERED TO: PMMH NEAR MAIN STORES NEXT TO CAGES

ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:

Name: Xolisile Ndlovu

Email: N/A Contact: 031 907 8151

Finance Manager Name: C.D Zuma

Finance Manager Signature



PARTICULARS OF QUOTATION

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: PRINCE MSHIYENI MEMORIAL HOSPITAL

FACSIMILE NUMBER: N/A E-MAIL ADDRESS: N/A

PHYSICAL ADDRESS: Prince Mshiyeni Memorial Hospital, Mangosuthu highway, Unit "v" section, Umlazi, 4031

QUOTE NUMBER: ZNQ / PMM ☐ 49 / 24 .25 VALIDITY PERIOD: 60 DAYS

DATE ADVERTISED: 07/05/2024 CLOSING DATE: 13/05/2024 CLOSING TIME: 11:00

DESCRIPTION: 112 UNITS, AIRWAYS GUEDAL PVC 000, 222 UNITS, AIRWAYS GUEDAL PVC 0, 122 UNITS, AIRWAYS GUEDAL PVC

CONTRACT PERIOD (IF APPLICABLE): N/A

DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS):

Prince Mshiyeni Memorial Hospital, Mangosuthu highway, Unit "v" section, Umlazi, 4031

ENQUIRIES REGARDING THE QUOTE MAY BE DIRECTED TO:

CONTACT PERSON: Xolisile Ndlovu TELEPHONE NUMBER: 031 907 8151

E-MAIL ADDRESS: N/A

ENQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO:

CONTACT PERSON: Ntokozo Mbhele TELEPHONE NUMBER: 031 907 8279

E-MAIL ADDRESS: N/A

Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted for consideration.

The quote box is open from 08:00 to 15:30.

QUOTATIONS MUST BE SUBMITTED ON THE OFFICIAL FORMS – (NOT TO BE RETYPED)

THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2022, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.

THE FOLLOWING PARTICULARS OF BIDDER MUST BE FURNISHED
(FAILURE TO DO SO MAY RESULT IN YOUR QUOTE BEING DISQUALIFIED)

NAME OF BIDDER: _____

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.

M A A A

UNIQUE REGISTRATION REFERENCE:



DESCRIPTION:	112 UNITS, AIRWAYS GUEDAL PVC 000, 222 UNITS, AIRWAYS GUEDAL PVC 0, 122 UNITS, AIRWAYS GUEDAL PVC
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PREFERENCE POINTS WILL BE ALLOCATED ACCORDING TO THE IMPLEMENTATION OF SPECIFIC GOALS IN TERMS OF PPR 2022:	POINTS ALLOCATED
Promotion of South African owned enterprises	20

DOES THIS OFFER COMPLY WITH THE SPECIFICATION?	YES / NO
IS THE PRICE FIRM?	YES / NO
DOES THE ARTICLE CONFORM TO THE S.A.N.S. / S.A.B.S. SPECIFICATION?	YES / NO

STATE DELIVERY PERIOD (E.G. 3 DAYS, 1 WEEK)

NAME OF BIDDER: _____

SIGNATURE OF BIDDER: _____
[By signing this document, I hereby agree to all terms and conditions]

CAPACITY UNDER WHICH THIS QUOTE IS SIGNED: _____

DATE: _____

END-USER SPECIFICATION FORM

Department:
Health
PROVINCE OF KWAZULU-NATAL

Quote Number: _____

Item Description: Airway guedel size: 000

Department/Section: Surgical stores. Purpose of Item: To maintain breathing airway.

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
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 _____

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 / No
if Yes, specify: _____

1.5. Liability Cover insurance? Yes / No
if Yes, specify: _____

2. What is the specification of the required item?

List specifications to be advertised	Comment
1. Size : 000	
2. Colour : Transparent	
3. Material : Soft and hard plastic	
4. Unit of issue : Unit	
5. Must have manufacturing and expiry date.	

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

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?
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

Name of End-user (in full)	N. Z. Magala	Name of SCM Rep (in full)	A. MATIJA
Designation / Rank (in full)	P. N. B. 2	Designation / Rank (in full)	Acting SMO
Signature	[Signature]	Signature	[Signature]
Date	28/09/2020	Date	28/09/2020

END-USER SPECIFICATION FORM

Quote Number: _____

Item Description: Airways guedel size : 0

Department/Section: _Surgical stores. Purpose of Item: To maintain breathing airway.

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
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 _____

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 / No
if Yes, specify: _____

1.5. Liability Cover insurance? Yes / No
if Yes, specify: _____

2. What is the specification of the required item?

List specifications to be advertised	Comment
1. Size : 0	
2. Colour : Transparent	
3. Material : Soft and hard plastic	
4. Packaging : Units	
5. Must have manufacturing date and expiry date.	

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

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

or

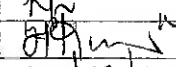
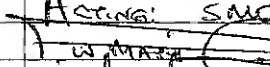
3.2. Specify that samples must be made available when requested in writing. Yes ☐ or No ☐

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?
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

Name of End-user (in full)	THANDILE P. KUNENE	Name of SCM Rep (in full)	A. MARIJA
Designation / Rank (in full)	RN	Designation/ Rank (in full)	Accountant SAUD
Signature		Signature	
Date	30/08/21	Date	30/08/2021



END-USER SPECIFICATION FORM

Quote Number: _____

Item Description: Airways guedel

Department/Section: Surgical Stores
has difficulty in breathing.

Purpose of Item: Used to establish a patent airway in ill neonate who

1. 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
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

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 / No
if Yes, specify:

1.5. Liability Cover insurance? Yes / No
if Yes, specify:

2. What is the specification of the required item?

List specifications to be advertised		Comment
1.	Size : 00	
2.	Unit of issue: Units	
3.	Material : Quality plastic	
4.	Sterility must be guaranteed	
5.	It must have expiry / manufacturing date.	

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

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?
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

Name of End-user (in full)	<u>E.S. Mbhele</u>	Name of SCM Rep (in full)	<u>A. M. M. M. M.</u>
Designation / Rank (in full)	<u>R.N.</u>	Designation / Rank (in full)	<u>ACCINGI S.M.G.</u>
Signature	<u>[Signature]</u>	Signature	<u>[Signature]</u>
Date	<u>08/04/2022</u>	Date	<u>08/04/2022</u>



Quote Number: _____

Item Description: Airways guedel PVC port size: 02.

Department/Section: _Surgical stores. Purpose of Item: Used to establish a patent airway in an ill neonate who has difficulty breathing.

1. 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:
Regulatory Body / certification required if Yes: SABS1.2. Is a compulsory site inspection / briefing session required? Yes ☒ No
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 / No
if Yes, specify: _____1.5. Liability Cover insurance? Yes ☒ No
if Yes, specify: _____

2. What is the specification of the required item?

List specifications to be advertised	Comment
1. Size : 02	Must have required length
2. Colour : Transparent (Clear)	
3. Material : Soft and hard plastic Sterility must be guaranteed	
4. Packaging : Units	
5. Must have manufacturing and expiry date.	

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

3.1. Deadline for submission if Yes: Date ____/____/____ Time ____:____ Place _____
or3.2. 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?	
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	

Name of End-user (in full)	N. Z. Mnguni	Name of SCM Rep (in full)	S. HARIPARSAD
Designation / Rank (in full)	P.N.B.2	Designation/ Rank (in full)	SMO
Signature	[Signature]	Signature	[Signature]
Date	02/07/2020	Date	20/07/2020

Quote Number: _____

Item Description: Airway guedel size: 04

Department/Section: _Surgical stores. Purpose of Item: To maintain breathing airway.

1. 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
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 _____

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 / No
if Yes, specify: _____

1.5. Liability Cover insurance? Yes / No
if Yes, specify: _____

2. What is the specification of the required item?

List specifications to be advertised		Comment
1.	Size : 04	
2.	Colour : Transparent	
3.	Material : Soft and hard plastic	
4.	Unit of issue : Unit	
5.	Must have manufacturing and expiry date.	

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

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

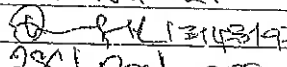
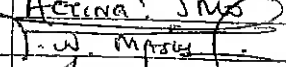
3.2. Specify that samples must be made available when requested in writing. Yes ☐ or No ☐

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.

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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

Name of End-user (in full)	N. Z. Maseko	Name of SCM Rep (in full)	A. Maseko
Designation / Rank (in full)	P.N.B.2.	Designation/ Rank (in full)	Acting: SMO
Signature		Signature	
Date	28/09/2020	Date	28/09/2020



Quote Number: _____

Item Description: Airways guedel

Department/Section: Surgical Stores

prevent biting of tongue and endotracheal tube.

Purpose of Item: Used to assist oropharyngeal airway to be patent and

1. 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:
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 _____

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 / No

if Yes, specify: _____

1.5. Liability Cover insurance? Yes / No

if Yes, specify: _____

2. What is the specification of the required item?

List specifications to be advertised		Comment
1.	Size : 05	
2.	Unit of issue: Units	
3.	Material : Quality plastic	
4.	Sterility must be guaranteed	
5.	It must have expiry / manufacturing date.	

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

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.

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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

Name of End-user (in full)	<u>E.S. Nkomo</u>	Name of SCM Rep (in full)	<u>A. MASHA</u>
Designation / Rank (in full)	<u>Rln</u>	Designation / Rank (in full)	<u>Acting: S.M.O.</u>
Signature	<u>[Signature]</u>	Signature	<u>[Signature]</u>
Date	<u>08/04/2022</u>	Date	<u>08/04/2022</u>