



KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

Quotation Advert

Opening Date: 28/10/2024

Closing Date: 06/11/2024

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Provincial Pharmaceutical Supply Depot

Province: KwaZulu-Natal

Department of entity: Department of Health

Division or section: Central Supply Chain Management

**Place where goods/
service is required:** Provincial Pharmaceutical Supply Depot

Date Submitted: 28/10/2024

ITEM CATEGORY AND DETAILS

Quotation number: PSD/ZNQ0055/24-25

Item Category: Services

Item Description: SUPPLY AND INSTALL DELUXE SINGLE FULL HEIGHT
TURNSTILE

Quantity (if supplies): 1

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: COMPULSORY SITE MEETING

Date: 31/10/2024

Time: 12H00

Venue: PPSD

QUOTES CAN BE COLLECTED FROM: PPSD / KZN HEALTH WEBSITE

QUOTES SHOULD BE DELIVERED TO: ** PPSD TENDER BOX **

ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:

Name: Mr Hlalanathi Mbonane

Email: halanathi.mbonane@kznhealth.gov.za

Telephone No: 031-4698368

FINANCE MANAGER Mr S NAICKER

Signature



EVALUATION CRITERIA

| | |
|-----------------------|--|
| Quotation No. | ZNQ0055/25 |
| Quotation Description | SUPPLY AND INSTALL DELUXE SINGLE FULL HEIGHT TURNSTILE |

EVALUATION CRITERIA

This institution intends to evaluate valid quotations using **four (4) evaluation stages**. These are peremptory requirements, should the bidder/tenderer fail to comply with any of the stages as stated below, the quotation will be regarded as non-responsive, and will not progress to the final stage of evaluation:

Stage 1: Administrative Compliance, Compulsory and Mandatory Requirements

Stage 2: Capacity To Deliver

Stage 3: Compliance with Specification

Stage 4: Price and Preference Points System (Specific Goals)

Bidder Initial here: _____



STAGE 1: ADMINISTRATIVE, COMPULSORY COMPLIANCE AND MANDATORY REQUIREMENTS

| NO. | REQUIREMENTS | INCLUDED IN THE PUBLISHED DOCUMENT? | TO BE RETURNED BY BIDDER/ TENDERER? |
|----------------------------------|--|-------------------------------------|-------------------------------------|
| Administrative Compliance | | | |
| 1. | PARTICULARS OF QUOTATION | YES | YES |
| 2. | OFFICIAL PRICE PAGE FOR QUOTATIONS OVER R2 000.01 | YES | YES |
| 3. | BIDDER'S DISCLOSURE (SBD4) | YES | YES |
| 4. | GENERAL CONDITIONS OF CONTRACT (GCC) | YES | YES |
| 5. | SPECIAL CONDITIONS OF CONTRACT (SCC) | YES | YES |
| 6. | PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022 (SBD 6.1) | YES | YES |
| Compulsory Compliance | | | |
| 7. | SUPPLIER UPDATED CIPC REGISTRATION DOCUMENTS | NO | YES |
| 8. | A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/ SWORN AFFIDAVIT (For EMEs & QSEs) | NO | YES |
| 9. | CENTRAL SUPPLIER DATABASE COMPLIANCE REPORT (CSD) | NO | YES |
| Mandatory Requirements | | | |
| 09. | THE BIDDER MUST PROVIDE PROOF THAT THE ITEMS TO BE SUPPLIED ARE SABS OR SANS APPROVED | NO | YES |
| 10. | VALID COPY OF LICENCE ISSUED BY SOUTH AFRICAN HEALTH PRODUCTS REGULATORY AUTHORITY (SAHPRA), AUTHORIZING YOUR COMPANY TO MANUFACTURE/WHOLESALER/DISTRIBUTE MEDICAL DEVICES | NO | NO |

Note: This relates to administrative, compulsory and mandatory returnable documents which must be fully completed, and submitted, should you fail to submit any of the above returnable documents, your offer will be treated as non-responsive and will not proceed to the next stage of evaluation. The department reserve a right to verify validity of the documents submitted, should it be discovered that the information submitted is misrepresented or falsified the quotation will be disqualified or contract maybe be terminated.

Bidder Initial here: _____



STAGE 2: CAPACITY TO DELIVER

| | |
|----|---|
| 1. | Valid copy of at least one order and delivery note which will serve as proof that you have delivered the order either in private or public health facility. Note: Should you fail to submit any of the above returnable documents, your offer will be treated as non-responsive and will not proceed to the next stage of evaluation |
| 2. | As part of risk management, if there is valid proof that the bidder was previously issued with an order and thereafter failed to deliver without acceptable reasons, the bidder will be treated as a defaulter and will not progress to the next stage of evaluation. |

STAGE 3: COMPLIANCE WITH SPECIFICATION

| Requirement | Complies with Specification/ Scope of Work Yes /No |
|--|---|
| The bidder / Tenderer to confirm that the product supplied complies with attached specification document, should you fail to indicate compliance your quotation will not progress to the next stage of evaluation. | |

STAGE 4: PRICE AND PREFERENCE POINTS

The value of this quotation is estimated not to exceed R 50 000 000 (inclusive of all applicable taxes), therefore the 80/20 preference point system shall be applicable. Points for this quotation will be awarded for:

| CATEGORY | POINTS |
|--|--------|
| PRICE | 80 |
| SPECIFIC GOALS | 20 |
| Total points for Price and must not exceed | 100 |

The Department has identified the following specific goal:

| Specific Goal | Number of Points allocated | Proof To Claim Specific Goal (Returnable Documents) |
|---|----------------------------|---|
| RACE: FULL POINTS ALLOCATED TO COMPANIES WHO ARE AT LEAST 51% OWNED BY BLACK PEOPLE | 20 | <ol style="list-style-type: none"> 1. CIPC Certificate 2. BBBEE Certificate/Sworn Affidavit 3. ID Copies 4. Utility bill or letter from the Ward Councilor (in the company's name) confirming the area in which the Business operates 5. Medical Certificate confirming disability |
| NOTE: Should a responsive bidder fail to submit proof to claim points, as stated above this will not result in disqualification; however, the bidder will not be awarded points for specific goals. | | |

Bidder Initial here: _____

**KWAZULU-NATAL PROVINCE****HEALTH**
REPUBLIC OF SOUTH AFRICA**DIRECTORATE:**

Provincial Pharmaceutical Supply Depot

Postal Address : Private Bag X03, Mobeni, 4060

Physical Address: 1 Higginson Highway, Mobeni, 4052

Tel: 031 469 8300 Fax: 031 469 8309

Email address: Sagathevan.naicker@kznhealth.gov.za

www.kznhealth.gov.za

DELUXE SINGLE FULL HEIGHT TURNSTILE**SUPPLY, INSTALL, CONFIGURE TURNSTILE AND READERS**

| Qty | Description | Price |
|-----|---|-------|
| 1 | ALLOW FOR DISCONNECTION OF EXISTING READERS AND RE-INSTALL ON NEW TURNSTILE REMOVE THE EXISTING TURNSTILE AND REPLACE WITH NEW TURNSTILE DELUXE, SINGLE, FULL HEIGHT, BI-DIRECTIONAL 4ARM (90 °) REVOLVING URNSTILE COMPLETE WITH STAINLESS-STEEL FRAME & ROTOR INCLUDING ALL ASSOCIATED ELECTRONIC CONTROL CIRCUITRY WITH MANNUAL OVERRIDE FACILITY. COMPATIBLE WITH ALL ACCESS CONTROL SYSTEMS OVERALL SIZE 1350(W) ×1310 (D) ×2181mm HIGH COMPLETE WITH 304 GRADE STAINLESS -STEEL FRAME, CONTROL BOX & ROTOR ARMS WITH MATCHING ACCESS CONTROL READER MOUNTING PLATES, BOLTED TO 20Mpa 1500 × 1500 × 150mm THICK CONCRETE BASE WITH 6No, M12 × 75mm ANCHOR BOLTS AND CONNECTED TO 220V AC SINGLE PHASE POWER SUPPLY (to engineers' specifications) | |
| 1 | POWER SUPPLY UNIT WITH BATTERY BACKUP | |
| 1 | READER MOUNTING PLATES - SET OF 2 | |
| 1 | DELIVERY & INSTALLATION - MOBENI | |
| 1 | BROCHURE REQUIRED TO VALIDATE ITEM QUOTED ON | |
| 1 | COMMISSION AND TEST THE TURNSTILE FOR ITS FUNCTIONALITY | |

Mr S Naicker

➤ Mr S Mbeje

➤ Mr C Mtambo

Signed.....
Assistant Director
Support services

Date: 09/09/2024

Signed.....
SCM Supervisor
Demand Management

Date: 23.9.24