

Opening Date:

Closing Date:

Quotation Advert

2019 / 02 / 06

Closing Date:	2019 / 02 / 13
Closing Time:	11:00
ACTOR BETALLS	
Institution Name:	RK Khan Hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or Section:	Supply Chain Management
Place where goods / Services is required	R.K KHAN HOSPITAL
Date Submitted	2019 / 02 / 06
TEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: 202/18-19
Item Category:	Goods
Item Description:	MICROSCOPE DRAPES
Quantity (if supplies)	03 BOXES
TOWN LEOKY BRICKING SESSION/SI	
Select Type:	Select
Date :	
Time:	
Venue:	
QUOTES CAN BE COLLECTED FROM:	

R.K KHAN HOSPITAL

QUOTES SHOULD BE DELIVERED TO:

R.K KHAN HOSP - SECURITY OFFICE

ENGUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name:

MRMNPMTHETHWA

Email:

mnqobi.mthethwa@kznhealth.gov.za

Contact Number:

0314596391

Finance Manager Name:

MRIDMYEZA

Finance Manager Signature:

No late quotes will be considered

202/18-19

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[By signing this document I hereby agree to all terms and conditions] UNIQUE REGISTRATION REFERENCE:											<u> </u>	CI	ΞN	TR	AL S	SU	PP	LIE	RL)A]	AB.	ASE	= RI	=GIS	STF	RAT	ION	(C	SD)	NO	:								
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- The Bidder must ensure the correctness & validity of quote: that the price(s), rate(s) & preference quoted cover all for the workfitem (s) & accept that any mistakes regarding the price (s) & calculations will be at the Bidder's risk.

 The Bidder must accept full responsibility for the proper execution & fulfilment of all obligations conditions devolving on under this agreement, as the Principal (s) liable for the due fulfilment of this contract.

 This quotation will be evaluated specification & correctness of information. Only offers that compty with or greater than specification will be considered.

 All products supplied must be valid for a minimum period of six months.

 A Bidder not registered on the Central Suppliers Database or verification has failed will not be considered. 5.

- 9. 10.
- All delivery costs must be included in the quote price, for delivery at the prescribed destination. 11.
- destination.

 Only firm prices will be accepted. Such prices must remain firm for the contract 20. period. Non-firm prices (including rates of exchange variations) will not be considered. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point. If samples / compulsory site inspection / briefing session are required, the supplier will 21. The supplier shall furnish any information, when requested. 13.

- against all third-party claims of infringement of patent, trademark, or industrial design
- rights arising from use of the goods or any part thereof by the purchaser. If the supplier falls 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. The purchaser may also consider termination of the contract. The purchaser, may terminate this contract in whole or in part if the supplier fails to
- deliver any or all of the goods within the period(s) specified in the contract fails to perform any other obligation(s) under the contract; or has engaged in corrupt or fraudulent practices in competing for or in executing the contract.
- The purchaser may procure, upon such terms and in such manner as it deems appropriate, goods, works or services similar to those undelivered, and the supplier shall be liable to the purchaser for any excess costs for such similar goods, works or
- Where the purchaser terminates the contract in whole or in part, the purchaser may decide to impose a restriction penalty on the supplier by prohibiting such supplier from doing business with the public sector for a period not exceeding 10 years. In the event of a bidder having multiple quotes, only the cheapest according to
- specification will be considered. Furthermore a verification will be done to identify if bidders have multiple companies and are quoting (cover-quoting) for this bid. In such instances only the cheapest bid according to specification will be considered.



health 202/18-19

Department: Health

R K KHAN HOSPITAL

PROVINCE OF KWAZULU-NATAL

SPECIFICATION:

MICROSCOPE DRAPES

DESCRIPTION	COMPLIANT	NON-COMPLIANT
MICROSCOPE DRAPES, DRAPABLE POLYFILM		
COUR - CLEAR SIZE - 48MM -102X160CM		
STERILE , LATEX FREE		
10 UNITS PER BOX		
SAMPLE TO BE SUBMITTED ON REQUEST		-
*Compulsory: Kindly tick the above boxes, sign, and specifications. This document must be attached to y	l stamp below in acce	eptance of the
in disqualification.		
Name :	COMPANY	/ STAMP
Company:		
Signature:	**************************************	

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

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.

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2.	In order to give effect to the ab	ove, the following questionnai	re must be	completed and sui	bmitted with the quote.		
21	Full Name of bidder/represent	rative	24	Company Regist	iration Number		
2.2.	Identity Number:	anvo	2.5.		lumber:		
2.3.	Position occupied in the Comp	oany (director, trustee, shareh	older²):2.6.				
27	The names of all directors / tr			vdividual identity n	umbare tay rafaranca numb	here and if	annlicable
2.1.	employee / persal numbers m			idividuai identity iti	ambers, tax reference munit		PLICABLE
2.8.	Are you or any person connec			v the state?		YES	NO
2.8.	l. If so, furnish the following part	iculars:		•		L.=-	11101
	Name of person / director / trus		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	Name of state institution at whi						
	Position occupied in the state i						
2.8.2	If you are presently employed	ed by the state, did you obtain	the approp	oriate authority to u	ındertake remunerative wor	k outside er	mployment
	in the public sector?					YES	NO
	2.1. If yes, did you attach proo						
(Note: I	Failure to submit proof of such a	iuthority, where applicable, m	<u>ay result in</u>	the disqualification	of the quote.)		
2.8.2	2.2. If no, furnish reasons for r	on-submission of such proof:				4	
2.9,	Did you or your spouse, or an		trustees /	snarenolders / mei	mbers or their spouses con-	,	
201	state in the previous twelve m					YES	NO
2.8.1	If so, furnish particulars:Do you, or any person connect	tad with the hidder have one	ralationahir	/fomily friend of	har) with a naroan amplayer	d butba atal	to and who
2.10	may be involved with the evalu			(iaitiliy, irietio, ou	ier) with a person employed		
2 10	.1. If so, furnish particulars:					YES	NO
	. Are you, or any person connec					bidder and a	anv nerson
	employed by the state who ma					YES	NO
2.11	1. If so, furnish particulars:					10	INO
2.12.	Do you or any of the directors	/ trustees / shareholders / men	nbers of the	company have an	y interest in any other relate	ed companie	es whether
	or not they are bidding for this				•	YES	NO
2.12.	1. If so, furnish particulars:	***************************************					
3.	Full details of directors / trus	tees / members / shareholdi	are				
NB:	The Department Of Health will to ensure that their details are not be considered and passed	validate details of directors up-to-date and verified on C	<mark>/ trustees</mark> / SD. If the [Department cannot	t validate the <mark>information</mark> o		
4	DECLARATION	over as non-compliant accord	ing to read	onai ricasury insu	delion 140te 4 (a) 2010/17.		
I, Tł	HE UNDERSIGNED (NAM	E)		*************	CERTIFY THAT TH	E INFORM	MATION
FUR	NISHED IN PARAGRAPH	S 2.			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
	CCEPT THAT THE STATE VE TO BE FALSE.	MAY REJECT THE QUO	TE OR A	CT AGAINST M	IE SHOULD THIS DEC	LARATIO	N
Nam	e of bidder	Signature	•	Position	Dat	e	
1ºState	e" means –						
a)	any national or provincial department constitutional institution within the me Act. 1999 (Act No. 1 of 1999):			provincial legislature; national Assembly or Parliament	the national Council of provinces;	or	

^{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.