

Quotation Advert

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Opening Date:	30/01/2019	[B
Closing Date:	06/02/2019	-0
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Umzinyathi district office	V
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	UMZINYATHI HEALTH DISTRICT OFFICE	
Date Submitted	29/01/2019	(10)
ITEM CATEGORY AND DETAILS	,	
Quotation Number:	ZNQ: 63B/2018/19	
Item Category:	Goods	V
Item Description:	SUPPLY AND DELIVER UNIFORM NB; OFFICIAL DOCUMENT AND SPECIFICATIONS ATTACHED	
Quantity (if supplies)	LIST ATTACHED	
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Not Applicable	V
Date:		H404X
Time:		
Venue:		
QUOTES CAN BE COLLECTED FROM:	34 WILSON STREET, DUNDEE 3000	
QUOTES SHOULD BE DELIVERED TO:	34 WILSON STREET, DUNDEE 3000	

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

THOBILE KHOWANE

thobile.khowane@kznhealth.gov.za

Name:

Email:

Contact Number:

Submit Save Save As... Close Print Preview



Note

	8	TANDARD QUOTE DOCUMENT	NOITA	SUPPL	Y CH	AIN	MAN	IAGEM	ENT	UNDE	R R	30 000	0.00				
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ENQUIR	RIES MAY BE	DIRECTED TO: H.T KHOWANE				U	UNI	ACI N	J191C)	_1\. ,		*******			.,,		
PHYSIC	AL ADDRESS	34 WILSON STREET, DUNDEE, 300	0	,			.,,										
		8/19 CLOSING	3 DATE	: 06/02	/2019.			CL(OSIN	G TIME	: 11	:00					
ESCRIP	TION.SUPPLY	AND DELIVER UNIFORM		*******						.,		······			ست	1151	
THE FO	LLOWING PA	RTICULARS MUST BE FURNISH	ED (FA	ILURE	TO D	0 S	O WI	LL RES	ULT	IN YOU	JR	JFFE	K BEIN	IG DIS	JQUA	LIFIE	.0)
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	CAL ADDRESS)			DAT									,			_
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IBv sian	ing this docun	nent I hereby agree to all terms and	d condit	ions]	CEN	VTR/	AL S	JPPLIE	K D/	ATABAS	SE F	KEGR	IKAII		,30) T	T.O	Τ_
UNIQUI	E REGISTRAT	TION REFERENCE: ↓			<u></u>	_ļ_		<u> </u>	-	11			\dashv	٦_	\vdash	 	┰
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Item	Quantity	Description					1	Brand	& m	odel		ountr	y of acture	Pric	;e		C
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01	05 PAIRS	SOCK									┼-			 			┢
02	01	JERSEY MALE NAVY)						╁			+-			
03	01	SAFETY SHOP	E: SIZE 8	3							+			 			
		NB: DETAILED SPECIFIC	ATION	ATTACI	HED												L
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VALU	E ADDED TAX	K (Only if VAT Vendor) N PRICE (VALIDITY PERIOD 60 D)avs)														T
ATOTA	L QUUTATIO	N PRICE (VALIDITY PERIOD 60 E	-450)														
Does this offer comply with the specification?					State delivery period e.g. E.g. 1day, 1week All delivery costs must be included in the quote price												
	rice firm?		<u> </u>							ncluded	ınt	ne qu	ote pri	,e		,	
2. The	price quoted must department reserv	r no obligation to accept the lowest or any q i include VAT (if VAT vendor). ses the right to evaluate all quotations exclu	ding VAT	as some	16.	In the respo comp	e even onsibili oliance	that the ty to prov status of	tax co ide a : the si	mpliance SARS pin upplier. fy the KZI as of infrin	I <i>IN OF</i>	ger for	the insut	uuon to Ith (aka	the ou	irchase	er)

Bidders may not be VAT vendors.

The Bidder must ensure the correctness & validity of quote: that the price(s), rate(s) & preference quoted cover all for the work/item (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 comply with or greater than specification will be considered.

Late quotes will not 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.

All delivery costs must be included in the quote price, for delivery at the prescribed

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 influenced the pricing, a separate pricing schedule multiple appropriate for each delivery point. If samples / compulsion, site inspection, briefing session are required, the supplier will 21. The supplier shall furnish any information, when requested.

The supplier shall indemnify the KZN Department of Health (axa the purchaser) 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 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. 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

shall be liable to the purchaser for any excess costs for such similar goods, works or

services. 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.

2019 -01- 30

PRIVATE BAG X2052 DUNDEE 3000

	 Nan	ne of bidder	Signature		Position	 Da	te
		CCEPT THAT THE OVE TO BE FALSE	STATE MAY REJECT THE QU	OTE OR A	ACT AGAINST ME	SHOULD THIS DEC	LARATION
	FUI	RNISHED IN PARA					
	4	DECLARATION					D DIEGDY (1990)
	3. NB:	The Department Of H	ors / trustees / members / sharehol ealth will validate details of director etails are up-to-date and verified on d passed over as non-compliant acc	rs / trustees CSD. If the	Department cannot va	ilidate the information (uppliers' responsibility on CSD, the quote will
	2.12	or not they are biddin 2.1. If so, furnish particu	g for this contract? lars:				
	2.11 2.12	l.1. If so, furnish particu ≥. Do you or any of the o	e who may be involved with the evalulars:lirectors / trustees / shareholders / m				<u> </u>
	2.10	Are you or any nerso	n connected with the bidder, aware o	of any relatio	nship (family, friend, ot	her) between any other I	oidder and any person
	2 1A	may be involved with	the evaluation and or adjudication of	this quote?		,,,,,,,,,	YES NO
	2.9.1 2.10	Do you, or any persor	lars: o connected with the bidder, have an	y relationshi	ip (family, friend, other)	with a person employed	by the state and who
	2.9.	Did you or your spous state in the previous t	se, or any of the company's directors welve months?	s / trustees /	shareholders / membe	ers or their spouses cond	YES NO
	ን ይ ኅ	2.2 If no furnish rage	one for non-submission of such prop	f:		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
/A1-	2.8.2	2.1. If yes, did you atta	ach proof of such authority to the quo of such authority, where applicable, r	ite documen nav result in	it? a the disqualification of	the auote.)	
	2.8.2	If you are presently in the public sector?	employed by the state, did you obta	in the appro	priate authority to unde	ertake remunerative work	outside employment
		Name of state institution	n at which you or the person connec	ted to the bi	idder is employed: Anv other particul	ars:	
4		Name of norsen / direc	tor / trustoe / shareholder/ memher:		the transfer of the state of		,
	2 2 1	f If en furnish the follow	connected with the bidder presently				
		employee / persal nun	ctors / trustees / shareholders / mem nbers must be indicated in paragraph	ו 3 below.		ers, tax reference numb	ers and, if applicable, [TICK APPLICABLE] YES NO
2	2.3.	Position occupied in the	e Company (director, trustee, sharel	nolder²):2.6. 	VAT Registration Nu	mber:	
	2.1. 2.2.	Idontity Number	presentative	2.5.	Tax Reference Numi	on Number: ber:	,,,,,,,,,,,,
2	2.		the above, the following questionna				
	-	the legal person on evaluation and or ac on whose behalf the	ed by the state; and/or whose behalf the bidding document ljudication of the quote(s), or where declarant acts and persons who are	it is known t involved wi	that such a relationship th the evaluation and o	exists between the per radjudication of the quo	son or persons lor or
		declare his/her position	in relation to the evaluating/adjudica	nting authorit	ty where-		·
1		blood relationship, may	ding persons employed by the state make an offer or offers in terms of l al). In view of possible allegations o or to persons connected with or re	his invitatior f favouritism	n to quote (includes a f n. should the resulting (orice quotation, advertise quote, or part thereof, be	awarded to persons
			DECLAI	RATION OF	INTEREST	normana amplayad by	the state including a

- "State" means —
 any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999);
 b) any municipality or municipal entity;
- c) provincial legislature; d) national Assembly or t national Assembly or 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.



DIRECTORATE: UMZINYATHI HEALTH DISTRICT OFFICE

Address:34 Wilson street, Dundee, 3000

Postal Address: Private Bag 2052 Tel: 034 2999 169 Fax: 034 212 3139 Email: anele.maphumulo@kznhealth.gov.za

SUPPLY AND DELIVER UNIFORMS

1. SOCKS

COLOUR: Black

COMPOSITION: 65/35 Wool/Nylon.

STYLE: Chemically treated to prevent fungal grow1h, half hose with reinforced

heel and toe iKnee Hiahl.

QUANTITY= 05 PAIRS

2. JERSEY MALE NAVY V-NECK (PLAIN)

The body and sleeve would be knitted in 100% worsted spun high bulk acrylic. The jersey shall be a V-neck with long sleeve in the colour navy. The body of the jersey shall consist of a front and back panel that are seamed together at the side seams. The lower edge of the body shall have a blind stitched double welt ribbing.

Size: Large

Colour: Navy

No epilates holder.

QUANTITY = 1

See attached photo.

3. SAFETY SHOE: SIZE 8

Fully good year welted construction. Full grain leather upper. 100% rubber parabellum sole breathable lining colour black. Genuine parabellum shoe lock stitched sole. Upper: corrected grain leather shoe with rubber sole. Use: security/officer formal dress shoe. SABS approved.

Size: 08

Colour: Black

QUANTITY = 1

See attached photo.

UMZINYATHI HEALTH DISTRICT OFFICE QUOTE QUOTE SPECIFICATION COMMITTEE APPROVEDINGTAPPROVED

NB: The above uniform must be delivered with manufacture specification



