Name:

Fmail:

Contact Number:

Finance Manager Name:

Finance Manager Signature:

health **Quotation Advert** Opening Date: 2019-06-28 **Closing Date:** 2019-07-08 **Closing Time:** 11:00 **INSTITUTION DETAILS** Institution Name: Prince Mshiyeni Memorial hospital Province: KwaZulu-Natal Department or Entity: Department of Health Central Supply Chain Management Division or section: Place where goods / services is required Prince Mshiyeni Memorial Hospital, Mangosuthu Highway, Unit "V... **Date Submitted** 2019-06-27 **ITEM CATEGORY AND DETAILS Quotation Number:** ZNQ: 159/2019/2020 Item Category: Goods Item Description: SUTURE MONOCRYL LENGTH 70CM GAUGES 5/0 W3209 Quantity (if supplies) 02 Boxes (BOX/12) **COMPULSORY BRIEFING SESSION / SITE VISIT** Select Type: Not Applicable Date: Time: Venue: **QUOTES CAN BE COLLECTED FROM:** Prince Mshiyeni Memorial Hospital, Mangosuthu Highway, Unit "V" Section, Umlazi 4031. **QUOTES SHOULD BE DELIVERED TO:** Prince Mshiyeni Memorial Hospital, Mangosuthu Highway, unit "V" Section, Umlazi 4031 **ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:**

Mr. C. H. Buthelezi

031 907 8151

Lindiwe Doncabe

Lindiwe.Doncabe@kznhealth.gov.za

No late quotes will be considered

STANDARD QUOTE DOCUMENTATION OVER R30 000,00 THO 159/19/20
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: PRINCE MESHIYENI MEMORIAL HOSPITAL

1

DATE ADVERTISED: 28/06/2019 PHYSICAL ADDRESS: PRINCE MSHIYENI MEMORAIL HOSPITAL MANGOSUTHU HIGH WAY UNIT V SECTION	<u>\</u>
ZNQ NUMBER: 159/2019/2020 CLOSING DATE: 08/07/2019 CLOSING TIME: 11:00	
DESCRIPTION 02 BOXES SUTURE MONOCRYL LENGTH 70CM GAUGES 5/0 W3209	
CONTRACT PERIOD ONCE OFF VALIDITY PERIOD 60 Days	
SARS PIN	
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.	
UNIQUE REGISTRATION REFERENCE	
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS) PRINCE MSHIYENI MEMORAIL HOSPITAL MANGOSUTHU HIGH WAY UNIT V SECTION	
UMLAZI 4031	
Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accept consideration.	ed for
The quote box is open from 08:00 to 15:30.	
ALL QUOTES MUST BE SUBMITTED ON THE OFFICIAL FORMS - (NOT TO BE RE-TYPED)	
THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERE PROCUREMENT REGULATIONS, 2011, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SP CONDITIONS OF CONTRACT.	
THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO WILL RESULT IN YOUR QUOTE BEING DISQUALIFIED)	
NAME OF BIDDER	
POSTAL ADDRESS	
STREET ADDRESS	
TELEPHONE NUMBER CODENUMBER FACSIMILE NUMBER CODENUMBER	******
CELLPHONE NUMBER	
E-MAIL ADDRESS	
VAT REGISTRATION NUMBER (If VAT vendor)	
HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SBD 6.1)	10
IF YES, WHO WAS THE CERTIFICATE ISSUED BY? [TICK APPLICABLE	BOX]
AN ACCOUNTING OFFICER AS CONTEMPLATED IN THE CLOSE CORPORATION ACT (CCA) A VERIFICATION AGENCY ACCREDITED BY THE SOUTH AFRICAN ACCREDITATION SYSTEM (SANAS); A REGISTERED AUDITOR	
YES N	10

ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS / SERVICES / WORKS OFFERED? [IF YES ENCLOSE PROOF]

LINGEOGE THOSE,	
OFFICIAL PRICE PAGE FOR QUOTATIONS	
SIGNATURE OF BIDDER [By signing this document I hereby agree to all terms and conditions]	DATE
CAPACITY UNDER WHICH THIS QUOTE IS SIGNED	

Item No	Quantity	Description	Brand	Country of	Price	100
LOTH HO			mode	manufacture	R	C
	02	SUTURE MONOCRYL LENGTH 70CM				1
	BOXES	GAUGES 5/0 W3209				+
						+
		BOX/12				
	NBI	SEE ATTACHED SPECIFICATION				+
	I N.D.	OLL) (III) (III)				
				-	-	+
					-	+
					1	+
						1
		OPTION ONE				_
		KINDLY COMLY WITH ANNEXTURE A				4
		OR B FOR SAMPLE SUBMISSION STATUS			-	+
	-	OPTION TWO				
	-	IF YOU DONT QUALIFY ON THE ABOVE				
		PLEASE SUBMIT YOUR SAMPLE ON THE				
		08/07/2019				
		FAILURE TO COMPLY WILL DISQUALIFY				
		YOUR QUOTATION				\dashv
VALUE A	DDED TAX @	14% (Only if VAT Vendor)				

Does This Offer Comply With The Specification?	Does The Article Conform To The S.A.N.S. / S.A.B.S. Specification?	
Is The Price Firm?	State Delivery Period E.G. E.G. 1day, 1week	

Enquiries regarding the quote may be directed to
--

Contact Person: LINDIWE DONCABE Tel: 031 907 8151

Enquiries regarding technical information may be directed to:

Contact Person: S.C MGOBHOZI Tel 031 907 8279



Specifications Template

Compiled by:

Name and Surname	Designation	Signature	Date	
N P Mbhele	Supply Officer	100	15/02/2019	

Recommended by Supervisor/Professional Nurse/Operations Manager:

Name and Surname	Designation	Signature	Date
Lugaria Newsot	I.RN	Aprip	15/02/2019
1/10 0.00			<u> </u>

Approved by SCM Practitioner:

Name and Surname	Designation	Signature	Date
B. HAREPARS	5 5mo	Haripian	15/02/2019

Spec licition	User details
Item description	Suture Monocryl
Size	5-0
Colour	Undyed
Material	Poliglecaprone 25
Packaging (unit/box)	Box/12
Funct onality/performance	For Plastic Facial Surgery
Purpcse	Same As functionality
Other: (3200443)	 Material Type : Poliglecaprone 25 Colour : Undyed Suture Size (USP) : 5-0 Strand Length : 70cm, Strong, Easy knot tying. Needle Type : 3/8 Rev Cut Needle Length : 19mm

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
 - 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.

In order to give effect to the above, the following questionnaire must be completed and submitted with the quote.

	Full Name of bidder/representative				
2.2. 2.3.	Position occupied in the Company (director, trustee, shareholder ²			ıber: ımber:	
2.7.	The names of all directors / trustees / shareholders / members, t employee / persal numbers must be indicated in paragraph 3 below		ndividual identity numb	oers, tax reference numb	pers and, if applicable, [TICK APPLICABLE]
2.8.	Are you or any person connected with the bidder presently employed	yed l	by the state?		YES NO
2.8.	1.If so, furnish the following particulars:				
	Name of person / director / trustee / shareholder/ member:				
	Name of state institution at which you or the person connected to	the b	idder is employed:		
	Position occupied in the state institution:		Any other particu	lars:	
2.8.	If you are presently employed by the state, did you obtain the a	appro	priate authority to unde	ertake remunerative wor	k outside employment
	in the public sector?				YES NO
	2.1. If yes, did you attach proof of such authority to the quote doci			, ,	
	Failure to submit proof of such authority, where applicable, may res				
2.8.	2.2. If no, furnish reasons for non-submission of such proof:				
2.9.	Did you or your spouse, or any of the company's directors / trust	ees /	shareholders / members	ers or their spouses con-	duct business with the
	state in the previous twelve months?				YES NO
	1. If so, furnish particulars:				4144
2.10	Do you, or any person connected with the bidder, have any relative) with a person employed	
0.46	may be involved with the evaluation and or adjudication of this quantum for the second of the second				YES NO
2.10).1. If so, furnish particulars:				hidder and any narros
2.11	. Are you, or any person connected with the bidder, aware of any re				
2 11	employed by the state who may be involved with the evaluation a				YES NO
	2. Do you or any of the directors / trustees / shareholders / members				ed companies whether
2.12	or not they are bidding for this contract?	o Or ar	ie company nave any n	illerest in any other relati	YES NO
2.42	2.1. If so, furnish particulars:				TES NO
2. 12					
3. NB:	Full details of directors / trustees / members / shareholders. The Department Of Health will validate details of directors / trusto ensure that their details are up-to-date and verified on CSD. I not be considered and passed over as non-compliant according to	f the	Department cannot va	alidate the information	on CSD, the quote will
4	DECLARATION				
	HE UNDERSIGNED (NAME)			CERTIFY THAT TH	IE INFORMATION
FU:	RNISHED IN PARAGRAPHS 2.				
	CCEPT THAT THE STATE MAY REJECT THE QUOTE (OVE TO BE FALSE.	OR A	ACT AGAINST ME	SHOULD THIS DEC	CLARATION
	ne of bidder Signature		Position	 Da	ute
¹"Sta	te" means -				
a) b)	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); any municipality or municipal entity;	c) d) e)	national Assembly or the	enational Council of provinces;	or

*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.

SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

1. AMENDMENT OF CONTRACT

1.1. Any amendment to or renunciation of the provisions of the contract shall at all times be done in writing and shall be signed by both parties.

2. CHANGE OF ADDRESS

2.1. Bidders must advise the Department of Health (institution where the offer was submitted) should their address (domicilium citandi et executandi) details change from the time of bidding to the expiry of the contract.

3. GENERAL CONDITIONS ATTACHED TO THIS QUOTATION

- 3.1. The institution is under no obligation to accept the lowest or any quote.
- 3.2. The price quoted must include VAT (if VAT vendor). However, it must be noted that the department reserves the right to evaluate all quotations excluding VAT as some bidders may not be VAT vendors.
- 3.3. The bidder must ensure the correctness & validity of quote:
 - (i) 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
- 3.4. 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.
- 3.5. This quotation will be evaluated based on the 80/20 points system, specification & correctness of information. All required documentation must be completed in full and submitted.
- 3.6. Offers must comply strictly with the specification.
- 3.7. Only offers that meet or are greater than the specification will be considered.
- 3.8. Late quotes will not be considered.
- 3.9. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six months.
- 3.10. A bidder not registered on the Central Suppliers Database or verification has failed will not be considered.
- 3.11. All delivery costs must be included in the quote price, for delivery at the prescribed destination.
- 3.12. Only firm prices will be accepted. Such prices must remain firm for the contract period. Non-firm prices (including rates of exchange variations) will not be considered.
- 3.13. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 3.14. 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.

4. SAMPLES

- 4.1. In the case of the quote document stipulating that samples are required, the supplier will be informed in due course when samples should be provided to the institution. (This decreases the time of safety and storage risk that may be incurred by the respective institution). The bidders sample will be retained if such bidder wins the contract.
- (i) If a company/s who has not won the quote requires their samples, they must advise the institution in writing of such.
- (ii) If samples are not collected within three months of close of quote the institution reserves the right to dispose of them at their discretion.
- 4.2. Samples must be made available when requested in writing or if stipulated on the document.
- (i) If a Bidder fails to provide a sample of their product on offer for scrutiny against the set specification when requested, their offer will be rejected. All testing will be for the account of the bidder.

5. COMPULSORY SITE INSPECTION / BRIEFING SESSION

5.1.	Bidders who fail to attend the compulsory meeting will be disqu	alified from the evaluation process.
(i) (ii)	The institution has determined that a compulsory site meeting Date Time: Place	take place
Instit	ution Stamp:	Institution Site Inspection / briefing session Official
		Full Name:
		Signature:
		Date:

6. STATEMENT OF SUPPLIES AND SERVICES

6.1. The contractor shall, when requested to do so, furnish particulars of supplies delivered or services executed. If he/she fails to do so, the Department may, without prejudice to any other rights which it may have, institute inquiries at the expense of the contractor to obtain the required particulars.

7. SUBMISSION AND COMPLETION OF SBD 6.1

7.1. Should a bidder wish to qualify for preference points they must complete a SBD 6.1 document. Failure by a bidder to provide all relevant information required, will result in such a bidder not being considered for preference point's allocation. The preferences applicable on the closing date will be utilized. Any changes after the closing date will not be considered for that particular quote.

8. TAX COMPLIANCE REQUIREMENTS

- 8.1. In the event that the tax compliance status has failed on CSD, it is the suppliers' responsibility to provide a SARS pin in order for the institution to validate the tax compliance status of the supplier.
- 8.2. In the event that the institution cannot validate the suppliers' tax clearance on SARS as well as the Central Suppliers Database, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17.

9. TAX INVOICE

- 9.1. A tax invoice shall be in the currency of the Republic of South Africa and shall contain the following particulars:
- the name, address and registration number of the supplier;
- (ii) the name and address of the recipient;
- (iii) an individual serialized number and the date upon which the tax invoice is issued;
- (iv) a description and quantity or volume of the goods or services supplied;
- (v) the official department order number issued to the supplier;
- (vi) the value of the supply, the amount of tax charged;
- (vii) the words tax invoice in a prominent place.

10. PATENT RIGHTS

10.1. The supplier shall indemnify the **KZN Department of Health** (hear after known as 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.

11. PENALTIES

11.1. 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. The purchaser may also consider termination of the contract.

12. TERMINATION FOR DEFAULT

- 12.1. The purchaser, without prejudice to any other remedy for breach of contract, by written notice of default sent to the supplier, 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,
- (ii) if the supplier fails to perform any other obligation(s) under the contract; or
- (iii) if the supplier, in the judgment of the purchaser, has engaged in corrupt or fraudulent practices in competing for or in executing the contract.
- 12.2. In the event the purchaser terminates the contract in whole or in part, 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 services.
- 12.3. 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.

FAILURE TO COMPLY WITH ABOVE WILL RESULT IN YOUR QUOTE BEING PASSED OVER.

PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2017

This preference form must form part of all quotes invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (B-BBEE) Status Level of Contribution

NB: BEFORE COMPLETING THIS FORM, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF B-BBEE, AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.

1. GENERAL CONDITIONS

- 1.1 The following preference point systems are applicable to all quotes:
 - the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- 1.2 The value of this quote is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the 80/20 preference point system shall be applicable.
- 1.3 Points for this quote shall be awarded for:
 - (a) Price; and
 - (b) B-BBEE Status Level of Contributor.
- 1.4 The maximum points for this quote is allocated as follows:

	POINTS
PRICE	80
B-BBEE STATUS LEVEL OF CONTRIBUTOR	20
Total points for Price and B-BBEE must not exceed	100

- 1.5 Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the quote, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.
- 1.6 The purchaser reserves the right to require of a bidder, either before a quote is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

2. DEFINITIONS

- (a) "B-BBEE" means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic Empowerment Act;
- (b) "B-BBEE status level of contributor" means the B-BBEE status of an entity in terms of a code of good practice on black economic empowerment, issued in terms of section 9(1) of the Broad-Based Black Economic Empowerment Act;
- (c) "bid" means a written offer in a prescribed or stipulated form in response to an invitation by an organ of state for the provision of goods or services, through price quotations, advertised competitive bidding processes or proposals;
- (d) "Broad-Based Black Economic Empowerment Act" means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003);
- (e) "EME" means an Exempted Micro Enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (f) "functionality" means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- (g) "prices" includes all applicable taxes less all unconditional discounts;
- (h) "proof of B-BBEE status level of contributor" means:
 - B-BBEE Status level certificate issued by an authorized body or person;
 - 2) A sworn affidavit as prescribed by the B-BBEE Codes of Good Practice;
 - Any other requirement prescribed in terms of the B-BBEE Act;
- (i) "QSE" means a qualifying small business enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (j) "rand value" means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

27/06/2019

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3. POINTS AWARDED FOR PRICE

3.1 THE 80/20 PREFERENCE POINT SYSTEMS

A maximum of 80 points is allocated for price on the following basis:

$$Ps = 80 \left(1 - \frac{Pt - P \min}{P \min} \right)$$
 Where

Ps = Points scored for price of bid under consideration

Pt = Price of bid under consideration
Pmin = Price of lowest acceptable bid

4. POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR

In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for attaining the B-BBEE status level of contribution in accordance with the table below:

B-BBEE Status Level of Contributor	Number of points (80/20 system)
1	20
2	18
3	14
4	12
5	8
6	6
7	4
8	2
Non-compliant contributor	0

5.	BID	DECL	ARA	TION

5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:

6. B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1

6.1 B-BBEE Status Level of Contributor: =(maximum of 20 points)

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.

p		
7. \$	SUB-CONTRACTING	(Tick applicable box)
7.1	Will any portion of the contract be sub-contracted?	YES NO
7.1.1	If yes, indicate:	

i) What percentage of the contract will be subcontracted......%

ii) The name of the sub-contractor.

iii) The B-BBEE status level of the sub-contractor.....

8. Whether the sub-contractor is an EME or QSE (Tick applicable box)

iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations 2017:

of Preferential Procurement Regulations,2017:		
Designated Group: An EME or QSE which is at last 51% owned by:	EME √	QSE √
Black people	<u> </u>	
Black people who are youth		
Black people who are women		
Black people with disabilities		
Black people living in rural or underdeveloped areas or townships		
Cooperative owned by black people		
Black people who are military veterans		
OR		
Any EME		
Any QSE		

) 51/dopo19

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9.	DECLARA	ATION WITH REGARD TO COMPANY/FIRM	
9.1	Name o	of company/firm:	
9.2	VAT reç	gistration number:	
9.3	Compa	ny registration number:	
9.4	TYPE (OF COMPANY/ FIRM [TICK APPLICABLE BO	X]
		Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited	
9.5		RIBE PRINCIPAL BUSINESS ACTIVITIES	
9.6			
		Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.	
9.7	Total no	umber of years the company/firm has been in	business:
9.8	the B-B		do so on behalf of the company/firm, certify that the points claimed, based on agraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for :
	i) Th	ne information furnished is true and correct;	
	ii) Th	ne preference points claimed are in accordanc	e with the General Conditions as indicated in paragraph 1 of this form;
	iii) In be	the event of a contract being awarded as a re e required to furnish documentary proof to the	esult of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may satisfaction of the purchaser that the claims are correct;
		the B-BBEE status level of contributor has been ave not been fulfilled, the purchaser may, in ac	en claimed or obtained on a fraudulent basis or any of the conditions of contract Idition to any other remedy it may have –
	(a)	disqualify the person from the bidding proce	ss;
	(b)		rred or suffered as a result of that person's conduct;
	(c)	cancel the contract and claim any damages arrangements due to such cancellation;	which it has suffered as a result of having to make less favourable
	(d)	who acted on a fraudulent basis, be restrict	s shareholders and directors, or only the shareholders and directors ed by the National Treasury from obtaining business from any organ s, after the audi alteram partem (hear the other side) rule has been
	(e)	forward the matter for criminal prosecution.	
	- 1	ESSES	SIGNATURE(S) OF BIDDERS(S) DATE:
	2		ADDRESS

ANNEXUKE A

[NOTE: IF NOT PLEASE COMPLETE ANNEXURE B] IF THIS TTEM/PRODUCT WAS PROCURED AND USED BY PMMH FOR THE LAST TWO FINANCIAL YEARS AND WITHOUT COMPLAINTS PLEASE COMPLETE THIS FORM. PRINCE MSHIYENI MEMORIAL HOSPITAL (PMMH)

SIGNATURE	DATE	POSTITON	SURNAME AND INITIALS	COMPILED BY SUPPLIER/ REPRESENTATIVE			ZNQ/TENDER NO. Order Number Order Date QUANTITY C	There is no need to submit sample. But if the Brand Name/Product Name has changed please submit sample. Comment on the space provided.	COUNTRY OF MANUFACTURE	BRAND NAME	ITEM DESCRIPTION
							QUANTITY UNIT OF ISSUE				
			company stamp				INVOICE PAID				
							DATE OF PAYMENT				

Note2: We reserve a right to call for sample before order is issued. Note1: If this product was procured and used successfully by Prince Mshlyeni Memorial Hospital for the last two Financial Years, sample may not be required.

Note3: The information supplied above is subject to verification, should this be misrepresented your quotation will immediately be. disqualified

ANNEXURE B

PRINCE MSHIYENI MEMORIAL HOSPITAL
TRADE REFERENCE SCHEDULE FOR AT LEAST FOUR HOSPITALS WITHIN KZN DEPARTMENT OF HEALTH WHERE YOUR PRODUCT IS/WAS USED SUCCESSFULLY

								SIGNATURE
								DATE
								POSITION
								SURNAME AND INITIALS
		company stamp					r#	COMPILED BY SUPPLIERY REPRESENTATIVE
					-			
INVOICE PAID (Y/N)	QUANTITY	QUANTITY	Hospital Contact Number	Hospital Contact Person	Order Date	Order Number	ZNQ NO.	Hospital Name
								Has the sample for the above product /brand been submitted for Evaluation? IVES OR NO
								COUNTRY OF MANUFACTURE
								BRAND NAME
		0.00						TEM DESCRIPTION

Note2: The information supplied above is subject to verification, should this be misrepresented your quotation will immediately be. disqualified

Note1: If this product has not been procured by Prince Mshiyeni Memorial Hospital for the last two Financial Years sample is required. Failing to submit sample will disqualify your bid/tender.