

Finance Manager Signature:

Quotation Advert

	0.000000
Opening Date:	2019-06-20
Closing Date:	2019-06-28
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	llembe district office
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	ILEMBE DISTRICT OFFICE
Date Submitted	2019-06-19
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: 067/19/20
Item Category:	Goods
Item Description:	SUPPLY AND DELIVER PNEUMATIC ANTI SHOCK GARMENT X 03 UNITS
	SIZE: LARGE
Quantity (if supplies)	03 UNITS
COMPULSORY BRIEFING SESSION /	
Select Type:	Not Applicable
Date:	
Time:	
Venue:	
QUOTES CAN DE COU ESTED EDOM.	ILEMBE HEALTH DISTRICT OFFICE , NO 1 KING SHAKA STREET , 3RD
QUOTES CAN BE COLLECTED FROM:	FLOOR NEXT TO ELEVATORS
QUOTES SHOULD BE DELIVERED TO:	ILEMBE HEALTH DISTRICT OFFICE, 1ST FLOOR NEXT TO ELAVATORS
ENQUIRIES REGARDING THE ADVE	www.
Name:	S.N.MASUKU/ S.Z.ZULU
Email:	siyabonga.masuku@kznhealth.gov.za
Contact Number:	032 437 3500
Finance Manager Name:	HLENGIWE NGCOBO

No late quotes will be considered

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT	· ILEMBE HEALTH DISTRICT OFFICE					
DATE ADVERTISED: 20 / 06 / 2019 FACSIMILE NUMBER: 032 552 1859						
ENQUIRIES MAY BE DIRECTED TO:XOLANI KHUMALO	CONTACT NUMBER:032 437 3500					
PHYSICAL ADDRESS: 1 on KING SHAKA STREET, KWADUKUZA (STANG	GER) 4450					
ZNQ NUMBER: 067 / 19 / 20 CLOSING DATE:	28 / 06 / 2019					
DESCRIPTION. SUPPLY AND DELIVER PNEUMATIC ANTISHOCK NAS GARMENT. TO ILEMBE HEALTH DISTRICT OFFICE						
THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE	TO DO SO WILL RESULT IN YOUR OFFER BEING DISQUALIFIED)					
NAME & ADDRESS	OF BIDDER (FIRM)					
	OF BIDDER (FIRM)					
NAME OF BIDDER	DATE					
PHYSICAL ADDRESS	DATE					
CONTACT NUMBER	FACSIMILE NUMBER					
SIGNATURE OF BIDDER	SARS PIN					
[By signing this document I hereby agree to all terms and conditions]	CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.:					
UNIQUE REGISTRATION REFERENCE:						

ltem No	Quantity	Description	Brand & model	Country of manufacture	Price	
					R	С
1.	3	SUPPLY AND DELIVER PNEUMATIC ANTISHOCK GARMENT				
		SIZE: LARGE				-
						#
						1
		*NB: COMPULSORY ATTACHMENTS				_
		* SUBMITT A CSD SUPPLIERS DETAILS				
		NB: A COLOUR PICTURE OF THE ITEM QUOTED FOR				
		FAILURE TO COMPLY WITH THE ABOVE WILL RESULT IN				
		YOUR QUOTATION BEING INVALID				
VALU	 E ADDED TA	X (Only if VAT Vendor)		1		
		N PRICE (VALIDITY PERIOD 60 Days)				

Does this offer comply with the specification?	State delivery period e.g. E.g. 1day, 1week
Is the price firm?	All delivery costs must be included in the quote price

SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

- The institution is under no obligation to accept the lowest or any quote.

 The price quoted must include VAT (if VAT vendor).

 The department reserves the right to evaluate all quotations excluding VAT as some Bidders may not be VAT vendors.

 The Bidder must ensure the correctness & validity of quote: that the price(s), rate(s) & 17. The Bidder must ensure the correctness & validity of quote: that the price(s), rate(s) & 17. 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

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

- desunation.

 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.

16. 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.

The supplier shall indemnify the KZN Department of Health (aka 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
- 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.

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.

2.	In order to give effect to the above, the following questionnaire must	t be	completed and submitted with the quot	e.			
2.1.	Full Name of bidder/representative	2.4.	Company Registration Number:	,			
2.2.			Tax Reference Number:				
2.3.	Position occupied in the Company (director, trustee, shareholder²)::	2.6.	VAT Registration Number:				
2.7.	The names of all directors / trustees / shareholders / members, the employee / persal numbers must be indicated in paragraph 3 below		ndividual identity numbers, tax referenc	e numbers and, i			
2.8.	Are you or any person connected with the bidder presently employed		by the state?	YES		NO	
	. If so, furnish the following particulars:		7	[, , ,	-	-110	
	Name of person / director / trustee / shareholder/ member:						
	Name of state institution at which you or the person connected to the						
	Position occupied in the state institution:						
	. If you are presently employed by the state, did you obtain the ap						
	in the public sector?			YES		NO	Г
2.8.2	.1. If yes, did you attach proof of such authority to the quote docum	nent	!?				_
(Note: I	ailure to submit proof of such authority, where applicable, may resu	lt in	the disqualification of the quote.)				
	.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 / trustee	es / s	shareholders / members or their spous	es conduct busin	ess	s with	the
004	state in the previous twelve months?			YES		NO	
	. If so, furnish particulars:						
2.10	Do you, or any person connected with the bidder, have any relation		o (family, friend, other) with a person en		ate		vnc
2 10	may be involved with the evaluation and or adjudication of this quo			YES		NO	
2.10	If so, furnish particulars: Are you, or any person connected with the bidder, aware of any relations are some some series.	ation	schip (family, friend, other) hotween any	other hidder and	4 00	N nor	cor
4.11	employed by the state who may be involved with the evaluation and			40. 00.	Jai		_
2.11	1. If so, furnish particulars:			YES		NO	
	Do you or any of the directors / trustees / shareholders / members o			er related compar	nies	s whet	hei
_,	or not they are bidding for this contract?		s company navo any menocimany can	YES	Ï	NO	
2.12	1. If so, furnish particulars:			[.20]		.,,,	
	•						
	Full details of directors / trustees / members / shareholders. The Department Of Health will validate details of directors / truste to ensure that their details are up-to-date and verified on CSD. If t not be considered and passed over as non-compliant according to	he [Department cannot validate the inform	ation on CSD, th			
4	DECLARATION						
	IE UNDERSIGNED (NAME) NISHED IN PARAGRAPHS 2.	• • • • •	CERTIFY THA	AT THE INFOR	M	ATIO)N
	CEPT THAT THE STATE MAY REJECT THE QUOTE OF VE TO BE FALSE.	R A	CT AGAINST ME SHOULD THIS	S DECLARATI	(O)	Ŋ	
	e of bidder Signature		Position	Date			••••
	ŭ						
	"means –						
a)	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);	c) d) e)	provincial legislature; national Assembly or the national Council of pr Parliament.	ovinces; or			
b)	any municipality or municipal entity;						

^{2*}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.