e Ma	health
**************************************	Department:
CANAL STATE	Health PROVINCE OF KWAZULU-NAYAL

Quotation Advert

Opening Date:	2019 / 05 / 15
Closing Date:	2019 / 05 / 22
Closing Time:	11:00
INSTITUTION DETAILS	
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 / 05 / 14
ITEM CATEGORY AND DETAILS	,
Quotation Number:	ZNQ: 38/19-20
Item Category:	Goods
Item Description:	ENDO RETRIEVAL POUCH
Quantity (if supplies)	50 UNITS
COMPULSORY BRIEFING SESSION /	SITE VISIT
Select Type:	Select
Date :	
Date.	
Time:	

QUOTES CAN BE COLLECTED FROM:

R.K KHAN HOSPITAL

QUOTES SHOULD BE DELIVERED TO:

R.K.KHAN HOSP - SECURITY OFFICE

ENQUIRIES 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

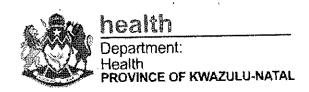
38/19-20

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00

DATE A	ADVERTISED: RIES MAY BE	NVITED TO QUOTE FOR REQUII 15 MAY 2019 DIRECTED TO: MNP MTHETHW S: 336 R.K.KHAN CIRCLE - WESTCLI	<u> </u>	FAC: CON	SIMILE NUMBER: .9			
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Specifications Template

Prepared by:

Initial and Surname	Designation	Signature	Date
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ALONE		the in a	

Reviewed by Supervisor/Operations Manager:

Initial and Surname	Designation	Signature//	Date
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Item details	Specification
Item description	Endo retrieval pouch
Size	90x145mm
Colour	Black and white
Material	Plastic
Packaging (unit/box)	10 units per box
Functionality/performance	Passes through a 10mm port into the abdominal pelvic cavity. Unfolds in the cavity
Purpose	Excised tissue is dropped into the opened pouch and delivered via the 10mm port.
Other:	

Approved by specifications committee chairperson:

N.G. Naang S.M.O. @ 05/04		Date	Signature	Portfolio	Initial and Surname
	119	05/04/1	@	SIM, O.	RIC A

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

	evaluation and or adjudica on whose behalf the decla	ation of the quote(s), or where it rant acts and persons who are i	ıs known tr nvolved wit	h the evaluation and	or adjudication of the qu	iote.
2.	In order to give effect to the	above, the following questionnal	re must be	completed and subm	itted with the quote.	
2.1.	Full Name of bidder/represe Identity Number:	ntativenpany (director, trustee, shareh	2.4. 2.5. older²):2.6.	Company Registrat	ion Number:	
2.8. 2.8. 2.8. (Note: 2.8. 2.9 2.9	The names of all directors / employee / persal numbers Are you or any person contour 1. If so, furnish the following polymer of person / director / to Name of state institution at word Position occupied in the stat 2. If you are presently emploin the public sector? 2.1. If yes, did you attach polymer to submit proof of suc 2.2. If no, furnish reasons for the previous twelves to the previous twelves 1. If so, furnish particulars: 0. Do you, or any person conditions are your spouse of the proof of your state in the previous twelves 1. If so, furnish particulars: 0. Do you, or any person conditions are your spouse of the previous twelves the previous twelves the proof your spouse or your y	trustees / shareholders / member must be indicated in paragraph sected with the bidder presently articulars: rustee / shareholder/ member: which you or the person connect e institution:	bers, their in 3 below. employed below. ed to the binner the appropriate documentary result in the second for trustees / relationship this quote?	y the state? dder is employed: Any other partic oriate authority to une t? the disqualification of shareholders / meml	ulars:dertake remunerative wo of the quote.) bers or their spouses co	YES NO ork outside employment YES NO onduct business with the YES NO
2.1 2.1 2.1	 0.1. If so, furnish particulars:. 1. Are you, or any person coremployed by the state who 1.1. If so, furnish particulars: 2. Do you or any of the direct or not they are hidding for 	nnected with the bidder, aware on may be involved with the evaluous / trustees / shareholders / mo	f any relatio ation and o embers of th	nship (family, friend, r adjudication of this ne company have any	quote? vinterest in any other rel	100 110
3. NE	Full details of directors I	trustees / members / sharehol will validate details of director are up-to-date and verified on ssed over as non-compliant acc	ders. 's / trustees	s / members / share	holders on CSD. It is the validate the information	0 000,
4 I,	DECLARATION THE UNDERSIGNED (N JRNISHED IN PARAGRA	AME)			CERTIFY THAT	THE INFORMATION
I z	ACCEPT THAT THE STA	ATE MAY REJECT THE QU	JOTE OR	ACT AGAINST M	IE SHOULD THIS D	ECLARATION
	ame of bidder	Signature		Position		Date
1"(a)	State" means – any national or provincial der constitutional institution within Act, 1999 (Act No. 1 of 1999);	partment, national or provincial public the meaning of the Public Finance Mar	nagement	c) provincial legislature; d) national Assembly or e) Parliament.	the national Council of provin	ces; or