

# **Quotation Advert**

PROVINCE OF KWAZULU-HAYAL		
Opening Date:	2019-11-07	
Closing Date:	2019-11-14	ijo ijo
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Head Office Quotations	$\vee$
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	Pinetown Mortuary	
Date Submitted	2019-11-07	112
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: 1119/19/20-H	
Item Category:	Services	$\subseteq$
Item Description:	Repair & service A/C and Refrigeration (cold rooms & freezers) system Pinetown MLM	at
Quantity (if supplies)		
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Compulsory Site Visit	[▽]
Date :	2019-11-08	
Time:	10:00	[2000]
Venue:	Pinetown Mortuary	
QUOTES CAN BE COLLECTED FROM:	310 Jabu Ndłovu Street, Pietermaritzburg or on website	
QUOTES SHOULD BE DELIVERED TO:	310 Jabu Ndlovu Street, Pletermaritzburg or to email address attached	i
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	K.Cele	٠
Email:	tyrone.ashby@kznhealth.gov.za	
Contact Number:	033-8158392	
Finance Manager Name:	Tyrone Ashby	
Finance Manager Signature:		
No la	te quotes will be conside <del>rall</del>	

## STANDARD QUOTE DOCUMENTATION OVER R30 000.00

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: DEPARTMENT OF HEALTH- CENTRAL SCM  DATE ADVERTISED: 07/11/2019  PHYSICAL ADDRESS: 310 JABU NDLOVU STREET, SCM OFFICES, PIETERMARITZBURG, 3201
ZNQ NUMBER:
DESCRIPTIONRepairs to A/C & Refrigeration (cold rms & Freezers) System (Pinetown Mortuary)
CONTRACT PERIOD VALIDITY PERIOD 60 Days
SARS PIN
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.
UNIQUE REGISTRATION REFERENCE
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS) 310 JABU NDLOVU STREET, PIETERMARITZBURG, SCM OFFICES, TENDER ADVISORY
Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted for consideration.
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 PREFERENTIAL PROCUREMENT REGULATIONS, 2011, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL 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)  YES NO
IF YES, WHO WAS THE CERTIFICATE ISSUED BY? [TICK APPLICABLE BOX
AN ACCOUNTING OFFICER AS CONTEMPLATED IN THE CLOSE CORPORATION ACT (CCA)

YES NO

# STANDARD QUOTE DOCUMENTATION OVER R30 000.00

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: DEPARTMENT OF HEALTH-CENTRAL SCM  DATE ADVERTISED: 07/11/2019  PHYSICAL ADDRESS: 310 JABU NDLOVU STREET, SCM OFFICES, PIETERMARITZBURG, 3201	
ZNQ NUMBER: 1091/19/20H CLOSING DATE: 14/11/2019 CLOSING TIME: 11:00	
DESCRIPTIONRepairs to A/C & Refrigeration (cold rms & Freezers) System (Pinetown Mortuary)	
CONTRACT PERIODVALIDITY PERIOD 60 Days	
SARS PIN	
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.	
UNIQUE REGISTRATION REFERENCE	
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS) 310 JABU NDLOVU STREET, PIETERMARITZBURG, SCM OFFICES, TENDER ADVISORY	••
Bidders should ensure that quotes are delivered timeously to the correct address. If the quote is late, it will not be accepted consideration.	for
The quote box is open from 08:00 to 15:30.	
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THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENT PROCUREMENT REGULATIONS, 2011, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECICONDITIONS OF CONTRACT.	IAL IAL
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 CODENUMBERFACSIMILE 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)	
IF YES, WHO WAS THE CERTIFICATE ISSUED BY? [TICK APPLICABLE BC	)X]
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	. [] , []
TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEEI	

YES NO

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

ENCLOSE I	PROOF]						
OFFICIAL P	RICE PAGE I	FOR QUOTATIONS					
[By signing t	his document	R			re		
Item No	Quantity	Description	Brand	& odel	Country of manufacture	Price R	Тс
1		Repairs to A/C & Refrigeration (cold rooms				1	+
		& Freezers) System (Pinetown Mortuary)					
		AS PER ATTACHED LIST					_
				***************************************			····
							+
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					$\vdash$
		Manual Articles and the Control of t			
	0				$\vdash$
		required in a sealed			
		CSD summary report			ļ
	reflecting banking d	letails, certified copy			
	of B-BBEE certificate	by verified agency and			
	accredited by SAN	IAS , Tax Clearance			
	certificate c	or SARS pin			ĺ
	··········				
1.1.1.1.1WH97	Deeperage to be deliv	rorod:240 Jahr Ndlovi			
		vered:310 Jabu Ndlovu			
		,Quotation tender box			
		@kznhealth.gov.za			
		la@kznhealth.gov.za			
VALUE ADDED TAX	(Only if VAT Vendor)				1
TOTAL QUOTATION	PRICE (VALIDITY PERIOD 60	Days)			
	y With The Specification?		.S. / S.A.B.S. Specification	on?	
s The Price Firm?		State Delivery Period E		1	

Enquiries regarding the quote may be directed to:	Enquiries regarding <u>technical information</u> may be directed to:
Contact Person: Mr K.Cele Tel: 033-815 8392	Contact Person: Mr S.Cele Tei033-9402513

#### **DECLARATION OF INTEREST**

- Any legal person, including persons employed by the state<sup>1</sup>, 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

Act, 1999 (Act No. 1 of 1999);

b)

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 abo	ove, the following questionnaire	∍ must be	completed and submitte	ed with the quote.			
2.1. 2.2.	Full Name of bidder/represental		2.5.	Tax Reference Number	er:			
2.3.	· · · · · · · · · · · · · · · · · · ·	any (director, trustee, sharehol		VAT Registration Num	ıber;		•	
2.7.	The names of all directors / truemployee / persal numbers mu	ustees / shareholders / membe	ers, their ir	ndividual identity numbe	rs, tax reference num	nbers and, i		
	Are you or any person connect	ted with the bidder presently er		y the state?		YES	NO	I
2.8.1	I. If so, furnish the following parti Name of person / director / trus	culars: too / shareholder/ member:						
	Name of state institution at which	the range of the person connected	d to the bi	dder is employed:				
	Position occupied in the state in	nstitution:		Any other particular	rs:			
2.8.2	2. If you are presently employe	d by the state, did you obtain t	he approp	oriate authority to undert	ake remunerative wo	ork outside	employn	nen
	in the public sector?	•				YES	NO	
	2.1. If yes, did you attach proof							
	ailure to submit proof of such a							
2.8.2	2.2. If no, furnish reasons for n	on-submission of such proof: .		ah arabaldara I mambaya	or their analysis as			. ih.
2.9.	Did you or your spouse, or any		rustees /	snarenoiders / members	or their spouses cor		NO	
201	state in the previous twelve mo f so, furnish particulars:					YES	INO	Т.
2.3.1	. Do you, or any person connect	led with the hidder, have any re	elationshir	o (family friend other) w	 √ith a person employ∈	ed by the st	ate and	who
2.10	may be involved with the evalu			o (raining) interior outload in	war ar boroom omproye	YES	NO	
2.10	.1. If so, furnish particulars:						1110	
2.11	. Are you, or any person connec	ted with the bidder, aware of a	ny relatior	nship (family, friend, othe	er) between any other	r bidder and	<mark>ժ any pe</mark> r	(SO
	employed by the state who ma					YES	NO	T
	.1. If so, furnish particulars:							
2.12	. Do you or any of the directors /		bers of the	e company have any inte	rest in any other rela			
0.40	or not they are bidding for this					YES	NO	
2.12	.1. If so, furnish particulars:		1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	· · · · · · · · · · · · · · · · · · ·			
	Full details of directors / trust The Department Of Health will to ensure that their details are not be considered and passed	validate details of directors I up-to-date and verified on CS	trustees 3D. If the D	Department cannot valid	late the information	on CSD, th		
4	DECLARATION							
-	HE UNDERSIGNED (NAM NISHED IN PARAGRAPH	-		C	ERTIFY THAT TI	HE INFO	RMATI	ON
	CCEPT THAT THE STATE : OVE TO BE FALSE.	MAY REJECT THE QUOT	ΓE OR A	CT AGAINST ME S	HOULD THIS DE	CLARAT	ION	
	e of bidder	Signature	****	Position		ate	***********	
**State	e" means –							
a)	any national or provincial departmer constitutional institution within the me	nt, national or provincial public entiti aning of the Public Finance Manager	y or c) ment d)	provincial legislature; national Assembly or the na	itional Council of provinces	s; or		

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.

#### 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. COMPULSORY SITE INSPECTION / BRIEFING SESSION	
5.1. Bidders who fail to attend the compulsory meeting will be disqua	lified from the evaluation process.
(i) The institution has determined that a compulsory site meeting (ii) Date 08 / 11 / 2019 Time 10 : 00 Place Pinetow	will take place n Mortuary
Institution 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:
- (i) 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:
- (i) 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:

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

- 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:
  - 1) B-BBEE Status level certificate issued by an authorized body or person;
  - 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;

#### 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 DECLARATION

- 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.

7.	SUB-CONTRACTING	(Tick applicable box)	
7.1	Will any portion of the contract be sub-contracted?	YES N	0
7.1.1	If yes, indicate:		
	i) What percentage of the contract will be subcontracted% ii) The name 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 Profesoratial Procurement Regulations 2017:

Designated Group: An EME or QSE which is at last 51% owned by:	EME	QSE	
	√	√	
Black people			
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			

NO

9.	DECLAR	ATION WITH REGARD TO COMPANY/FIRM						
9.1	Name	Name of company/firm:						
9.2	VAT re	/AT registration number:						
9.3	Compa	Company registration number:						
9.4	TYPE	TYPE OF COMPANY/ FIRM [TICK APPLICABLE BOX]						
	0 0 0	Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited						
9.5	DESC	RIBE PRINCIPAL BUSINESS ACTIVITIES						
9.6	COMP							
		Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.						
9.7	Total n	umber of years the company/firm has been in b	business:					
9.8	the B-E	I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based of the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we acknowledge that:						
	i) The information furnished is true and correct;							
	ii) TI	ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;						
		iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;						
		<ul> <li>iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have –</li> </ul>						
	(a)	disqualify the person from the bidding proces	SS;					
			urred or suffered as a result of that person's conduct;					
	<ul> <li>(c) cancel the contract and claim any damages v arrangements due to such cancellation;</li> </ul>		s which it has suffered as a result of having to make less favourable					
	(d)	who acted on a fraudulent basis, be restricted	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.						
	WITN	ESSES	SIGNATURE(S) OF BIDDERS(S)					
	1		SIGNATURE(S) OF BIDDERS(S)  DATE:					
	2		ADDRESS					

#### CONDITIONS OF CONTRACT

#### 1.1 NOTICE TO BIDDERS

1

- 1.1.1 The institutions will remain open and operational at all times therefore the Contractor shall make the necessary arrangements with the Institutional Management and maintenance staff for any power outages that are required. This may necessitate weekend work
- 1.1.2 All rubble shall to be removed from the institution's property immediately.
- 1.1.3 All equipment and materials used in this contract shall be that which is specified or **other** approved prior to submission and closure of the bid.
- 1.1.4 The Contractor is advised to examine all the drawings (if any) and to visit the site prior to tendering to acquaint him/herself with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim will be allowed on the grounds of ignorance of the conditions under which the work will be executed.
- 1.1.5 All items quantities in the Schedule of Prices are **PROVISIONAL** and subject to re-measure after installation.
- 1.1.6 The Schedule of Prices shall be read in conjunction with the Scope of Work. Any discrepancies or omissions shall be brought to the attention of the Project Leader immediately.
- 1.1.7 Preference will be given to Bidders who have registered offices / workshops within the borders of the Province of KwaZulu-Natal. This is in an effort to reduce response times to call outs for breakdowns in the more remote areas of the Province.
- 1.1.8 The Contractor must be registered with CIDB and must have minimum grading of 2ME.
- 1.1.9 The Contractor must be competent with proven experience in working with air-conditioning equipment with traceable references.

#### 1.2 EXECUTION PERIOD

Three (3) days is the specified completion period for the service from the date of award. A repair work that shall result from after service report shall be quoted against and shall only proceed upon approval in writing from the project leader or designated official.

# **A.SERVICE WORKS COSTING**

ITEM	DESCRIPTION	UNIT	QUANTITY	RATE	PRICE
1	Condensing Units	No.	6		
2	Blower Coils	No.	6		
3	Autopsy Ducted Dx A/C Unit	No.	1		
4	Autopsy Extraction	No.	1		
				Total	
				Total	

Minimum scope is captured under section C and D below.

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B.REPAIR WORKS COSTING

PROVINCE OF KWAZULU-NATAL - DEPARTMENT OF HEAL	TH	
THOUNGE OF NAME DESCRIPTION	-	
SUBMIT TO:	FOR ATTENTION:	
INSTITUTION:		
SCOPE OF WORK: (A description of the work quoted for is required).		
Materials, component/ancillary parts: Firm Price. When applicable a c shall be provided.	letailed list of materials etc. sho	owing unit costs
`Quoted for Bought Out Items(Excluding VAT)(Carried forward)		R
Mark Up @ %(Maximum Mark Up = 20% for values R0.00 to	R299 999.99)	R
Mark Up @ %(Maximum Mark Up = 15% for values R300 00	0.00 to R500 000.00)	R
Mark Up @ % (Maximum Mark Up = 13% for values over	R500 000.00)	R
B.Quoted for Proprietary Items(Excluding VAT)(Carried forward)		R
C.Quote for Sub-Contract Items(Excluding VAT)(Carried forward)		R
Mark Up @ %	R	
D.Labour, Travelling, Subsistence and Transport. This price shall be etc. quoted for. (Excluding VAT) (Brought forward)	firm in respect of materials	R
E.Less credit for redundant materials, parts and equipment if applicab	le	R( )
	SUBTOTAL	R
	VAT @ %	R
F.This Price in SA Currency firm for 90 days from date of the esting the exceeded. To be measured on completion.	mate quotation and shall	R ( )
Time required for completion weeks from receipt of officia	l order.	
NAME OF SERVICE PROVIDER:	***************************************	
CIDB REGISTRATION NUMBER	CIDB	
PROVINCIAL SUPPLIERS DATABASE REGISTRATION NUMBER:		• • • •
SERVICE PROVIDER'S AUTHORISED SIGNATURE:	QUOTE REF	No
NAME IN BLOCK LETTERS:	***************************************	71124412
COMPANY STAMP:DATE:		

# 6.1 SCHEDULE OF PRICES: MATERIALS, COMPONENT/ANCILLARY PARTS AND SUB CONTRACT WORK

The service provider shall add here, <u>ALL</u> materials, components/ancillary parts which are required for the completion of the work quoted for.

In the event that more pages are required, this page may be copied.

ITEM	DESCRIPTION	MANU- FACTUR ER	FIGUR E/MOD EL NO.	QUANT ITY	UNIT COST	TOTAL COST (Excluding VAT)		
						BOUG HT OUT	PRO- PRIETAR Y	SUB CONTRA CT
6.1.1					,			·
6.1.2		,						
6.1.3								
6.1.4								
6.1.5								
6.1.6								
6.1.7								
6.1.8								
6.1.9								
6.1.10								
6.1.11								
6.1.12								
		TOTAL CO	ST BOUG	HT OUT IT	EMS (A)			
		T	OTAL COS	T PROPRI	ETARY IT	TEMS (B)		
			. Т	OTAL COS (Attach	T SUB Co	ONTRACT	TITEMS (C)	

# 6.2 LABOUR, SUBSISTENCE, TRAVEL AND TRANSPORT REPLACEMENT AND ADDITIONAL EQUIPMENT

	MAL EQUIT MENT			T		
6.2.1	LABOUR	No. of	TOTAL HOURS	RAT	E/HR	AMOUNT
a)	Artisans			R 300.00		R
b)	Apprentice					
-'	1 <sup>st</sup> Year		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	R 1	18.00	R
	2 <sup>nd</sup> Year		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	R 1	50.00	R
	3 <sup>rd</sup> Year	,,,,,,,,,,,		R 1	80.00	R
	4 <sup>th</sup> Year			R 2	65.00	R
(c)	Semi-skilled			R 1	42.00	R
d)	Unskilled	1414413111111	(,,,,,,,,))	R	75.00	R
6.2.2	SUBSISTENCE	No. of	TOTAL DAYS	RATE/24H	HR DAY	
a)	Artisans	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	*************	R 3	03.00	R
b)	Apprentice			R 3	00.80	R
c)	Semi-skilled			R 3	03.00	R
d)	Unskilled	,,,,,,,,,,	141134744477777444444444	R 3	03.00	R
6.2.3	HOTEL/ACCOMMODATION		No. of Persons	No. of Nig	hts	Cost per Night as per Suppliers Invoice
		****	*,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,		R
	NOTE: When applicable you ma		n for Accommodat	ion <u>OR</u> Sub	sistence <u>NO</u>	T both
6.2.5	TRAVEL		TOTAL Km	RAT	E/Km	
6.2.5.1	From service provider's			Petrol	Diesel	
a)	premises to site			Delete as	applicable	
	trips (skilled)			R 7.78	R 7.58	R
b)	@km per trip					
	trips (Semi-skilled)			R 5.80	R 5.60	R
0050	@km per trip From accommodation to site					
6.2.5.2	trips (skilled)			***************************************		
a)	@km per trip			R 7.78	R 7.58	R
					,	
b)	trips (semi-skilled)			D = 00	D E 60	Ь
	@km per trip	LINO	TOTAL	R 5.80	R 5.60	R
6.2.6	ADDITIONAL LABOUR TRAVEL WITH DRIVER	_LING	TOTAL HOURS	HA	E/HR	AMOUNT
a)	x Additional Artisan/s trips (skilled) @ km per trip ÷ 80km/hr			R 300.00		R
b)	x Additional Semi-Skilled trips (semi) @ km per trip ÷ 80km/hr			R 142.00		R
c)	x Additional Unskilled trips (unskilled) @km per trip ÷ 80km/hr			R 75.00		R
d)	x Additional Apprentice/s (semi) @ km per trip ÷ 8		R		R	
		SUBTO	TAL CARRIED FO			R
						1

# C. WORKS SCHEDULE COLDROOM AND FREEZER ROOM

ltem	DESCRIPTION	TYPE
1	MAJOR SERVICE	
	□ Check for undue noise or vibration	
	☐ Check for loose components	
	☐ Test for oil/refrigerant leaks	
	☐ Check compressor oil level. (Where applicable) Top up as required	
	☐ Check for correct refrigerant level and top up	
	☐ Check that the refrigerant is dry	
	☐ Replace belt drive, realign pulley and adjust belt tension where necessary	
	□ Check condenser fan and fan motor bearing as applicable	
	☐ Check all operating controls for correct operation	
	☐ Check and note compressor suction/discharge pressure. Test compressor	
	efficiency	
	□ Check and note compressor motor amperages	
	□ Check that belt guard is in place and secure	
	□ Clean condenser coil with proprietary cleaner	
	☐ Bring HP up and check that HP cut-out trips at correct pressure. Reset if necessary.	<u>%</u>
	Note setting	₹
	☐ Bring LP down and check that LP cut-out trips at correct pressure. Reset if	≥
	necessary. Note setting	필
	□ Remove motor end cover and clean out air ways	BI-ANNUAL SERVICE (MAJOR)
	□ Clean out switchboard	SE
	□ Clean plant and plant room area	
	□ Check operation of all switchgear	Ž
	□ Tighten all electrical terminals	¥
	□ Check evaporator, evaporator fans and motor for correct operation	<u> </u>
	☐ Check DX valve for correct operation	
	☐ Check door seals, door catch mechanism, and panic bolt for correct operation.	
	Adjust as necessary	
	☐ Check cold/freezer room lights	
	☐ Check defrost elements, door and drain heaters, timers for correct operation	
	(Freezer rooms only)	
	☐ Check and note cold/freezer room temperatures. Adjust if necessary	
	☐ Clean evaporator coil with proprietary coli cleaner	
	☐ Scrape, treat and paint rust	
	☐ Check calibration of dial thermometer. Recalibrate if necessary	
	□ Check cold/freezer room walls, floors ceiling for deterioration, ice build up	
	☐ Check door hinges for wear and deterioration	
	☐ Clean and remove loose paint and scale and repaint as required	
	□ Check and clean condensate drain	
	□ Check shelving, meat rails	

# D. WORKS SCHEDULE PACKAGED A/C UNITS

	Package Unit - Air Cooled Type
1	Switch off the unit
2	Inspect filter frame and wash filters
3	Check supply fan Belt and replace if necessary
4	Check supply fan and motor bearings
5	Check the operation of the remote local stop start station
6	Clean drip tray and condensate drain pipe
7	Lubricate the plumber block bearings and dampers
8	Check for any gas leaks and rectify if necessary
9	Check operation of a 7 day timer
10	Check and clean evaporator coils
11	Check and clean condenser coils
12	Check and state running current of a supply air fan
13	Check and read the head pressure
14	Check and read suction pressure
15	Check and state oil level and pressure
16	Check condenser fan operation and control set point
17	Check equipment vibration level
18	Check the supply air temperature
19	Ensure that any damaged seals and fasteners are replaced
20	Inspect condition of washable filter elements
21	Clean and replace filters as per manufacturers recommendations
22	Record reading on Dryer gauges weekly
23	Clean and examine pressure gauges, thermometers, etc.
24	Test against known standards and re-calibrate as necessary
25	Examine general condition of manometers
26	Examine fluid in manometer and re-fill if necessary
27	Check the Head Pressure Cut Out
28	Check the Oil Pressure Cut Out
29	Check the suction Pressure cut out and cut in
30	Check the compressor overload Set point
31	Check the star deltar/part wind timer operation
32	Check compressor unloader operation and set point
33	Check operation of the crankcase heater

34	Scheck supply static pressure switch operation
35	Check the operation of an economiser
36	De-rust any rust and paint where necessary
37	Check for acidity in the oil and take oil samples
38	Check the pressure drop across the driers
39	Check the condenser efficiency
40	Check compressor windings using the megger

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