




Quotation Advert

Opening Date: 2019-10-11 
Closing Date: 2019-10-17 
Closing Time: 11:00

INSTITUTION DETAILS



Institution Name: Don McKenzie hospital 
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required: DON MCKENZIE HOSPITAL
Date Submitted: 2019-10-11 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
20-10-19/20
Item Category: Goods 
Item Description: Supply of plumbing material as per specification

Quantity (if supplies) as per list

COMPULSORY BRIEFING SESSION / SITE VISIT

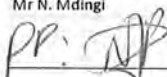
Select Type: Both 
Date : 
Time:
Venue: n/a

QUOTES CAN BE COLLECTED FROM: Supply Chain Management office

QUOTES SHOULD BE DELIVERED TO: Don Mckenzie Hospital tender box near guard room, main gate

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Makhosi Ngubane
Email: Makhosazana.ngubane@kznhealth.gov.za
Contact Number: 031-7771155
Finance Manager Name: Mr N. Mdingi

Finance Manager Signature: 

No late quotes 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 be completed and submitted with the quote.

- | | |
|--|--|
| 2.1. Full Name of bidder/representative..... | 2.4. Company Registration Number:..... |
| 2.2. Identity Number:..... | 2.5. Tax Reference Number:..... |
| 2.3. Position occupied in the Company (director, trustee, shareholder):..... | 2.6. VAT Registration Number:..... |

2.7. The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / persal numbers must be indicated in paragraph 3 below. [TICK APPLICABLE]

2.8. Are you or any person connected with the bidder presently employed by the state?

YES	NO
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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 bidder is employed:.....

Position occupied in the state institution:..... Any other particulars:.....

2.8.2. If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector?

YES	NO
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2.8.2.1. If yes, did you attach proof of such authority to the quote document?

(Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the quote.)

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 / trustees / shareholders / members or their spouses conduct business with the state in the previous twelve months?

YES	NO
-----	----

2.9.1. If so, furnish particulars:.....

2.10. Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this quote?

YES	NO
-----	----

2.10.1. If so, furnish particulars:.....

2.11. Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this quote?

YES	NO
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2.11.1. If so, furnish particulars:.....

2.12. Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract?

YES	NO
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2.12.1. If so, furnish particulars:.....

3. Full details of directors / trustees / members / shareholders.

NB: The Department Of Health will validate details of directors / trustees / members / shareholders on CSD. It is the suppliers' responsibility to ensure that their details are up-to-date and verified on CSD. If the Department cannot validate the information on CSD, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17.

4. DECLARATION

I, THE UNDERSIGNED (NAME)..... CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 2.

I ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

..... Name of bidder Signature Position Date
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¹"State" 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) provincial legislature; |
| b) any municipality or municipal entity; | d) national Assembly or the national Council of provinces; or |
| | e) Parliament. |

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.

**health**

Department:
Health
PROVINCE OF KWAZULU-NATAL

Don McKenzie Hospital
Private Bag X1006 Botha's Hill 3660
Tel: 031 7771155 Fax: 031 7771717 Email: gloria.zamisa@kznhealth.gov.za
www.kznhealth.gov.za

ASSISTANT DIRECTOR:
SYSTEMS


PLUMBING MATERIAL

ITEM	DESCRIPTION	QUANTITY	PRICE
1.	15mm copper pipe 6 meters length class "2"	05	
2.	22mm copper pipe 6meters length class "0"	04	
3.	110mm underground Y junction	04	
4.	110mm 45 bend underground	04	
5.	Soldering wire (roll)	01	
6.	15mm x 400mm length flex pipe	30	
7.	15mm stop end compression fitting	11	
8.	22mm straight coupler compression fitting	11	
9.	15mm ball-o-stop	20	
10.	15mm elbow compression fitting	20	
11.	22mm elbow compression fitting	15	
12.	50mm 90 degrees bend with I.E.	05	
13.	22mm equal tee compression fitting	20	
14.	15mm equal tee peace compression fitting	20	
15.	20mm ball-o-stop plason fitting	06	
16.	25mm ball-o-stop plason fitting	10	
17.	600 kpa safety valve	07	
18.	Geyser element	08	
29.	15mm cistern bottom inlet universal filling value	20	
20.	15mm side cistern inlet universal filling valve	20	
21.	Geyser thermostat	10	
22.	600 kpa pressure control valve	04	
23.	15mm heavy duty pattern tap washers	100	
24.	15mm light pattern tap washers	100	
25.	22mm tap washers	60	
26.	Wax bowl (white color) pocket	30	

28.	22mm x15mm straight reduce compression fitting	07	
29.	Toilet pan (white)	02	
30.	22mm boll-o-stop	20	
31.	22mm equal tee peace compression fitting	30	
32.	Pan connector (flax)	30	
33.	PVC weld 500ml	04	
34.	20mm Male coupler plason fitting	07	
35.	25mm male plason fitting	05	
36.	Gully grate	10	
37.	Drain burst 5ltr -quickly dissolve all organic obstruction -remove lime and grease -clean waste discharge	03	
38.	22mm x 400mm flex pipe	05	
39	110mm 90 bend soil and vent	04	
40	flux	01	
41.	22mm garden tap (brass)	10	
42.	22mm female straight coupler compression fitting	05	
43.	15mm female straight coupler compression fitting	04	
44	22mm holder bat pkt of 50	01	
45	15mm holder bat pkt of 100	01	
46	15mm tap head part (light pattern)	15	
47	15mm tap head part (heavy duty)	15	
48	15mm shower stop cock head part	10	
49	15mm straight coupler compression fitting	30	
50.	15mm brass rings	40	
51.	22mm brass rings	30	
52.	20mm HDPE straight coupler	20	
53.	25mm HDPE straight coupler	20	
54	22mm non return valve compression	05	
55	15mm non return valve compression	05	
56	Tread tape	20	
57	Elbow action mixer deck mount (pillar tap)	02	






S.E DLAMINI: -- 
Artisan

DATE: 16-09-2019

G.B Zamisa 
Assistant director systems

Date 16/09/2019

• KINDLY RETURN ALL DOCUMENTATION WHEN REPLYING

 Submit |  Save |  Save As... |  Close |  Print Preview

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Note:

1. The completed Quotation Advert must be printed and signed by the Finance manager.
2. A signed copy of the Quotation Advert must be scanned and emailed to web administration: webmaster@kznhealth.gov.za for uploading to the department website.
3. N.B if the scanned copy emailed to web Administration is not a signed copy (by the finance manager), the advert/award WILL NOT be uploaded.

Site Updated: 11 October, 2019, 08:15 am

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