




Quotation Advert

Opening Date: 2019-10-08 
Closing Date: 2019-10-14 
Closing Time: 11:00

INSTITUTION DETAILS


Institution Name: Richmond hospital
Province: KwaZulu-Natal
Department or Entity: Department of Health
Division or section: Central Supply Chain Management
Place where goods / services is required:
Date Submitted: 2019-10-07 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: 81.09.19.20
Item Category: Services
Item Description: MAJOR SERVICE TO AIR-CONDITIONERS X 40 UNITS
ASSESSMENT FAULTY AIR-CONDITIONERS X 09 UNITS

Quantity (if supplies):

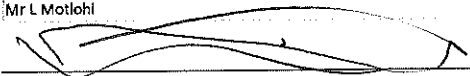
COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable
Date: 
Time:
Venue:

QUOTES CAN BE COLLECTED FROM: RICHMOND SECURITY GATE

QUOTES SHOULD BE DELIVERED TO: TENDER BOX NEAR PHARMACY DEPT

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: NOZIPHO MAKATHINI
Email: Esther.makathini@kznhealth.gov.za
Contact Number: 039212 2170
Finance Manager Name: Mr L Motlohi
Finance Manager Signature: 

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, shareholder²):..... 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

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

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

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

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.

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. SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS QUOTATION.

- 4.1. Unless inconsistent with or expressly indicated otherwise by the context, the singular shall include the plural and vice versa and with words importing the masculine gender shall include the feminine and the neuter.
- 4.2. Under no circumstances whatsoever may the quotation/bid forms be retyped or redrafted. Photocopies of the original bid documentation may be used, but an original signature must appear on such photocopies.
- 4.3. The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated.
- 4.4. Quotation submitted must be complete in all respects.
- 4.5. Any alteration made by the bidder must be initialled.
- 4.6. Use of correcting fluid is prohibited
- 4.7. Quotation will be opened in public as soon as practicable after the closing time of quotation.
- 4.8. Where practical, prices are made public at the time of opening quotations.
- 4.9. If it is desired to make more than one offer against any individual item, such offers should be given on a photocopy of the page in question. Clear indication thereof must be stated on the schedules attached.

5. SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS

- 5.1. Quotation shall be lodged at the address indicated not later than the closing time specified for their receipt, and in accordance with the directives in the quotation documents.
- 5.2. Each quotation shall be addressed in accordance with the directives in the quotation documents and shall be lodged in a separate sealed envelope, with the name and address of the bidder, the quotation number and closing date indicated on the envelope. The envelope shall not contain documents relating to any quotation other than that shown on the envelope. If this provision is not complied with, such quotations/bids may be rejected as being invalid.
- 5.3. All quotations received in sealed envelopes with the relevant quotation numbers on the envelopes are kept unopened in safe custody until the closing time of the quotation/bids. Where, however, a quotation is received open, it shall be sealed. If it is received without a quotation/bid number on the envelope, it shall be opened, the quotation number ascertained, the envelope sealed and the quotation number written on the envelope.
- 5.4. A specific box is provided for the receipt of quotations, and no quotation found in any other box or elsewhere subsequent to the closing date and time of quotation will be considered.



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

DIRECTORATE:

PROJECT SPECIFICATIONS

1. MAJOR SERVICE TO AIR CONDITIONERS X 40,
2. ASSESS FAULTY AIRCONDITIONRES AT RICHMOND HOSPITALx09

1. NOTES TO TENDERERS

1.1. SCOPE OF CONTRACT

This Contract is for the complete execution of the project indicated above.

1.2. CONTRACT DRAWINGS

This quotation document is to be read in conjunction with the drawings listed below which is issued together with this document.

Drawing No.: Nil

These drawings may be updated from time to time during the course of the Contract, and the Contractor must ensure at the time of the installation that he has the latest copy of all drawings. No claim will be considered for work, which requires to be changed due to the use of outdated drawings.

1.3. CONDITIONS OF CONTRACT AND PRELIMINARIES

1.3.1 PERIOD OF CONTRACT

Twelve (12) Months as the Contract Period for the completion of the Structural Work from date of Site handover.

1.3.2 CONTRACT GUARANTEE:

The successful Tenderer will be required to submit a contract guarantee.

1.3.3 GUARANTEE PERIOD

The guarantee period for the **Structural Work** and all materials must be for a minimum of **Three (3) months** from the date of first delivery.

The guarantee period for **Electrical and Mechanical Installations** shall be for a minimum of **Twelve (12) Months** from the date of first delivery.

1.3.4 SITE AND MODE OF PROCEDURE

1.3.5 The work contained in this contract will be carried out on the site of the existing Institution.

The Contractor is advised that the existing premises will be occupied throughout the period of the contract.

Damage to existing buildings - Tenderers to note that any damages done or occurring to any of the buildings will be repaired at the expense of the contractor/ Tenderer.

The repairs must be to the satisfaction of the KwaZulu-Natal Department of Health.

NB: *Tenderers are advised to examine the drawings and visit the site prior to quoting and to acquaint themselves 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.*

1.3.5 SATISFACTORY INSTALLATION

The whole of the installation shall be carried out in accordance with the South African Bureau of Standards Code of Practice for the application of National Building Regulations, the KZNPA Standard Preambles to all Trades, the KZNPA General Electrical Specification, the South African Bureau of Standards Code of Practice for the Wiring of Premises and the Occupational Health and Safety Act 85 of 1993 as amended.

Copies of the KZNPA Standard Preambles to all Trades and the KZNPA General Electrical Specification are available at the office of the Superintendent – General for Health – KwaZulu-Natal and can be obtained on request.

1.3.6 CERTIFICATE OF COMPLIANCE

On completion of the service, a copy of the "Certificate of Compliance for servicing of firefighting equipment" must be submitted to the office of the Superintendent –General for Health: KwaZulu-Natal.

2. SCOPE OF WORK

1. Service and Repair Air conditioners x 40
2. Assess faulty Air conditioners x09
See attached schedule

All work to be executed by a firm specializing in this type of work (Core Business) and all approved of the department.

NOTE: ALL OBSOLETE MATERIALS TO BE REMOVED FROM THE SITE BY THE CONTRACTOR. THE SITE MUST BE LEFT CLEAN AND TIDY BY THE CONTRACTOR.

**QUOTATION FORM
ALTERNATIVES**

It is required that the Contractor's main offer be in accordance with the specification. However, should Contractors wish to make alternative offers these must only be made on this form or copies thereof as necessary.

Note that all of the information required in this document must be supplied for all alternative offers as well.

Where the Contractor does not wish to submit alternatives, the word "NIL" shall be inserted against each section and the page signed by the Contractor.

ALTERNATIVE NO

ALTERNATIVE PRICE

(IN WORDS)

DETAIL VARIATIONS FROM SPECIFICATION

DETAIL BENEFITS TO OWNER IN TERMS OF THE ALTERNATIVE OFFER

REMARKS

CONTRACTOR'S AUTHORIZED SIGNATURE / FULL NAME AND ADDRESS OF FIRM

NAME IN BLOCK LETTERS: _____

DATE: _____

**PROVINCE OF KWAZULU-NATAL
DEPARTMENT OF HEALTH**

**SERVICE AND REPAIR OF AIR CONDITIONERS AT RICHMOND HOSPITAL X40
ASSESS FAULTY AIRCONDITIONERS AT RICHMOND HOSPITAL X 09**

SCHEDULE OF RATES

3.1 ITEMS AND PRICING

The Department reserves the right to place an order for any quantities of items included in the Schedules. The Schedule of Rates must also not be assumed to include and describe every detail of the supply requirement, but must be taken and read in conjunction with the other parts of the document. Thus the supplier shall not have claim for further payment in respect of any order which may be described or implied in the contract, although apparently no corresponding items are given in the Schedule of Rates. The supplier shall be deemed to have satisfied himself before quoting as to the correctness and sufficiency of his quote for the contract and of the rates and prices stated in the Schedule of Rates.

3.2 TAX AND DUTIES

Prices, quoted and paid, must include all customs, excise and import duties, and any other tariffs or taxes levied by the government or statutory body having jurisdiction on the goods provided under this contract, including Value Added Tax (applicable to the current rate).

3.3 RATES

Except where provision is made in the Schedule of Rates, the rates and prices inserted shall be the full rates and prices for the service delivered described under the respective items and shall cover all Labour, transport, overhead charges and profit, etc. as well as the general liabilities, obligations and risks arising out of the Conditions of Contract, the overhead charges and profit being spread proportionately over the rates of the relative items in the Schedule of Rates.

SCHEDULE OF RATES

WORK TO BE DONE AND SCHEDULE OF PRICES:

Item	DESCRIPTION	UNIT	QTY	RATE/ UNIT		TOTAL	
				R	c	R	c
	<p>NOTES: All items to be priced fully inclusive of all charges: e.g. labor, plant, profit, etc., but excluding Value Added Tax. The Administration reserves the right to negotiate prices in the Bill of Quantities. All materials used in this contract shall be that which is specified, or other approved by the Department of Health.</p> <p>Contractors are advised to visit site to acquaint themselves with the site and the layout of the institution as no claims on the grounds of ignorance of the locality/siting of the institution will be entertained later.</p> <p>Contractors are informed that living on the institutions premises during the contract is not allowed and arrangements for accommodation will have to be allowed for.</p>						
	<p>INSTITUTION: RICHMOND HOSPITAL SERVICE. 1. MAJOR SERVICE TO CONDITIONERS X40. 2. ASSESS FAULTY AIRCONDITIONERS X09. SEE ATTACHED LIST.</p>						
1)	Major Service to Air Conditioners	Unit	38				
2)	Assess Faulty Air-conditioners	Unit	09				
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
13)							
14)							
15)							
Carried To Collection Summary						R	
		PS 1					

COLLECTION SUMMARY

INSTITUTION: RICHMOND HOSPITAL

PROJECT DESCRIPTION: **MAJOR SERVICE TO AIRCONDITIONSX40
ASSESS FAULTY AIRCONDITONSX09
SEE ATTACHED SCHEDULE.**

THIS COLLECTION SUMMARY MUST BE COMPLETED IN FULL BY THE CONTRACTOR AND RETURNED TOGETHER WITH THE QUOTATION FORM.

Collection Summary PS 1	R	
<u>SUB-TOTAL:</u> CARRIED TO QUOTATION FORM	R	

IMPORTANT
THIS FORM IS ONLY TO BE INCLUDED AND COMPLETED WHEN APPLICABLE TO THE QUOTATION.

OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE

Site/building/institution involved: RICHMOND HOSPITAL

Quotation No.:
Service: **MAJOR SERVICE TO AIRCONDITIONERS X 40
ASSESS TO FAULTY AIRCONDITIONERS X 09**

THIS IS TO CERTIFY THAT..... OF (STATE NAME OF TENDERER)
..... VISITED AND INSPECTED THE SITE ON
..... (DATE) AND THEREFORE IS FAMILIAR WITH THE CIRCUMSTANCES AND
THE SCOPE OF THE SERVICE TO BE RENDERED.

.....
SIGNATURE OF TENDERER OR AUTHORISED REPRESENTATIVE

DATE:

.....
SIGNATURE OF DEPARTMENTAL REPRESENTATIVE

DEPARTMENTAL STAMP:

DATE:

TYPE OF SERVICE: Air-conditioning

SCHEDULE FOR : Air Cooled Condensing Unit

FREQUENCY : Weekly/Bi-annual/ Annual

ITEM	INSTRUCTION	CHECK	COMMENTS
Weekly			
1	Check unit is operating		
2	Check for undue noise or vibration		
3	Check condenser coil is clear		
4	Check by hand compressor motor is not overheating		
5	Check that condenser fan/s are running		
6	Clean plant and plant room area		
Bi-annual (Contractor)			
1	All the above plus the following		
2	Test for oil/refrigerant leaks		
3	Check compressor oil level		
4	Check refrigerant level		
5	Check all operating controls		
6	Check crankcase heater		
7	Check solenoid valves and unloaders		
8	Check safety interlock/s		
9	Check operation of switch-gear		
10	Check oil pressure switch for correct operation		
Annual (Contractor)			
1	All the above plus the following		
2	Check compressor suction/discharge pressure		
3	Check DX valve superheat and sub-cooling settings		
4	Bring HP up and check that HP cutout trips at correct pressure		
5	Bring LP down and check that LP cutout trips at correct pressure		
6	Check gauge calibrations		
7	Check oil pressure switch for correct operation		
8	Check for rust, clean, treat and paint if necessary		
Date :			
Name :			
Signature :			



health

Department:
Health
PROVINCE OF KWAZULU-NATAL

DIRECTORATE:

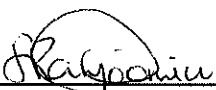
LIST OF AIRCONDITIONERS AT RICHMOND HOSPITAL.

1. AIR CONDITIONERS TO BE SERVICED AND REPAIRED X40

LOCATION	QUANTITY
Control Office	03
VCT Building	10
Kitchen	01
Ithemba Clinic	02
HR Offices	08
Laboratory	01
Physiotherapy	01
OT Department	01
SCM / Finance	02
Mortuary Building	04
VCT Hall	01
Admin Building	04
Laundry	02

2. FAULTY AIRCONDITIONERS TO BE REPAIRS X 09

LOCATION	QUANTITY
Control Office (Mrs. Ntshangase)	01
Social Work Offices (Mrs. Rampersad) Dr M. Anwar Flap not working	02
Data Capturer Office	01
Finance Manager	01
FIO Office	01
Occupational Health & Safety Office	01
Transport Office	01
Physiotherapist	01


Signature

2019/08/22
Date