





Quotation Advert

Opening Date: 2019-09-28 

Closing Date: 2019-10-01 

Closing Time: 11:00

INSTITUTION DETAILS


Institution Name: Hlabisa hospital 

Province: KwaZulu-Natal

Department or Entity: Department of Health


Division or section: Central Supply Chain Management

Place where goods / services is required: HLABISA HOSPITAL

Date Submitted: 2019-09-20 

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
293-19/20

Item Category: Services 

Item Description: AFTER SERVICE REPAIR FOR AIRCONDION AT:
*HLABISA HOSPITAL
*GATEWAY CLINIC

Quantity (If supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable 

Date: 

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: 60 SAUNDERS STREET HLABISA HOSPITAL SCM OFFICE

QUOTES SHOULD BE DELIVERED TO: 60 SAUNDERS STREET HLABISA MAINGATE TENDERBOX

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: MR AN SITHOLE

Email: ayanda.sithole@kznhealth.gov.za

Contact Number:

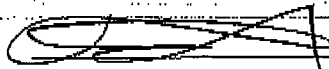
Supply Chain Management - AdvertQuote

035 838 8625/8780/8776 or OUR FAX NUMBER IS 035 838 1959

Finance Manager Name:

MISS NB MASONDO

Finance Manager Signature:



No late quotes will be considered

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: HLABISA HOSPITAL

DATE ADVERTISED: 23/09/2019 CLOSING DATE: 01/10/2019

FACSIMILE NUMBER: 035 838 1959 E-MAIL ADDRESS:

PHYSICAL ADDRESS: 60 SAUNDERS STREET HLABISA HOSPITAL, HLABISA 3937

DEPARTMENT OF HEALTH
HLABISA HOSPITAL
SUPPLY CHAIN MANAGEMENT
QUOTATIONS

2019-09-23

PRIVATE BAG X5001
HLABISA, 3937

SW

ZNQ NUMBER: 293-19/20

DESCRIPTION: AFTER SERVICE REPAIR FOR AIRCONDITION AT HOSPITAL AND GATEWAY CLINIC

CONTRACT PERIOD: ONCE OFF (if applicable) VALIDITY PERIOD 60 Days SARS PIN:

CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO. [Grid]

UNIQUE REGISTRATION REFERENCE [Grid]

DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS)
60 SAUNDERS STREET HLABISA HOSPITAL, MAIN GATE IN THE TENDERBOX

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 CODE.....NUMBER..... FACSIMILE NUMBER CODE.....NUMBER.....

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

[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMES & QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]

OFFICIAL PRICE PAGE FOR QUOTATIONS

ZNQ NUMBER: 293-19/20

DESCRIPTION: AFTER SERVICE REPAIR FOR AIRCONDITION IN THE HOSPITAL AND GATEWAY CLINIC

SIGNATURE OF BIDDER DATE.....
 (By signing this document I hereby agree to all terms and conditions)

CAPACITY UNDER WHICH THIS QUOTE IS SIGNED.....

Item No	Quantity	Description	Brand & model	Country of manufacture	Price	
					R	c
		AFTER SERVICE REPAIR FOR AIRCONDITION				
		IN THE :				
	28	HLABISA HOSPITAL				
	2	GATEWAY CLINIC				
		SPECIFICATION ATTACHED				
VALUE ADDED TAX @ 15% (Only if VAT Vendor)						
TOTAL QUOTATION PRICE (VALIDITY PERIOD 60 Days)						

Does This Offer Comply With The Specification?	Does The Article Conform To The S.A.N.S. / S.A.B.S. Specification?
Is The Price Firm?	State Delivery Period E.G. E.G. 1day, 1week

Enquiries regarding the quote may be directed to: Contact Person: MR. AN. SITHOLE Tel: 035.838.8624 E-Mail Address:	Enquiries regarding technical information may be directed to: Contact Person: MS SR SHABALU Tel: 035.838.8808
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health

Department:
Health
PROVINCE OF KWAZULU-NATAL

Physical Address: 60 Sauldiers street, Hlabisa, 3937
Postal Address: Private Bag X5001, Hlabisa, 3937
Tel: (085)638 6000, Fax: 085 836 1177 Email: borgani@kznhealth.gov.za
www.kznhealth.gov.za

MAINTENANCE DEPARTMENT

DIRECTORATE: HLABISA HOSPITAL

ENQUIRIES: S R Shabalala

EXTENSION: 8808
DATE: 27/08/2019

SPECIAL TERMS AND CONDITION

1. Service provider must have valid Tax Clearance Certificate
2. Service provider must have valid CIDB ME
3. Service provider must be registered with central supplier data base
4. Service provider must attach certificate of handling Dangerous Gases, Proof must be supplied.
5. Service provider must attach a letter of good standing
6. Service provider must fill contract form ZNB5730/30/2014-H accordingly
7. Service provider to report at maintenance before and after and complete the relevant register for payment purpose at a hospital
8. Service provider to provide after service report and quote together with the invoice for service where applicable
9. Service provider to attach a copy of certificate for a qualified artisan to perform the task
10. Valid BEB certificate

LIST OF AIRCONDITION

<u>NO</u>	<u>LOCATION</u>	<u>CONDITION</u>	<u>MAKE</u>	<u>SIZE</u>	<u>TYPE</u>
1	Nursing collage				
	Class room 1	Replace compressor, drier, flush unit and with refrigerant and replace PCB and reverse valve	CARRIER	24000BTU	Mid wall
2	Class room 2	Replace compressor, drier, flush unit and charge with refrigerant and place PCB and reverse valve	AUX	24000 BTU	Mid wall
3	Mr sbiya	Replace compressor, drier, flush unit and charge with refrigerant and replace PCB and reverse valve	DUHNAM BUSH	12000 BTU	Mid wall
4	Demonstration room	Replace sensor and PCB	DUHNAM BUSH	24000 BTU	Mid wall
5	Office no 4	Replace compressor, drier, flush unit and charge with refrigerant	DUHNAM BUSH	12000 BTU	Mid wall
6	Office no 6	Repair gas leak and charge unit with gas	YORK	12000 BTU	Mid wall
7	Office no 7	Repair gas leak and charge unit with gas	YORK	12000 BTU	Mid wall
8	Switch board	Repair gas leak and charge unit gas	JET AIR	9000 BTU	Mid wall
	SCM park home				
	Office no 1	Replace insulation on piping	JET AIR	12000 BTU	Mid wall
10	office no 2	Replace insulation on piping	JET AIR	12000 BTU	Mid wall
11	office no 8	Replace insulation on piping	PANASONIC	24000 BTU	Window wall
12	Asset	Replace compressor, drier, flush unit and charge with refrigerant and replace PCB and reverse valve	LUXAIR	12000 BTU	Mid wall
13	Mobile clinic	Repair gas leak and charge unit with gas	UNITHERM	24000 BTU	Mid wall

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14	pharmacy Finance supervisor	Replace compressor, drier, flush unit and charge with refrigerant	AVION	12000BTU	Mid wall
15	Loger mother park home a/c	Repair gas leak and charge unit with gas	LG GOLD	12000 BTU	Window/wall
16	laundry	Repair electrical power supply and replace isolator	LG PLASMA	24000BTU	mid wall
17	Resident park home a/c3 LAB	Replace PCB and repair gas and charge with refrigerant	SAMSUNG	24000BTU	Window/wall
18	Facility information room	Repair gas leak and charge unit with gas	ACSION	12000BTU	Mid wall
19	X ray unit	Unit 1 and 2 replace 15 m drain pipe and pump	MIDEA and HYDRAJR	12000BTU	Mid wall
20	Patient admin file room	Repair gas leak and charge unit with gas	DUNHAM BUSH	12000BTU	Mid wall
21	Mortuary office	Repair gas leak and unit with gas	Dunham bush	12000BTU	Mid wall
22	Human resource HRD	Replace compressor, drier, flush unit and charge and replace insulation on piping	LG Neo	12000BTU	Mid wall
23	Medical manager	Repair gas leak and charge unit with gas	LG Neo	12000BTU	Mid wall
24	CEO	Repair gas leak and charge unit with gas	LG Neo	9000BTU	Mid wall
25	psychologist	Repair gas leak and charge unit with gas	Jet air	12 000BTU	Mid wall
26	mental	Repair gas leak and charge unit with gas and replace insulation on piping	Jet air	12 000BTU	Mid wall
27	IT services a/c3	Unit has no power, pc board is faulty, unit has a gas leak and has no remote	SAMSUNG	24000BTU	Mid wall
28	Main stores	Unit not cooling, gas leak	ACSION	9000BTU	Mid wall

• KINDLY RETURN ALL DOCUMENTATION WHEN REPLYING

<u>LOG OF AIRCONDITION</u>				
<u>LOCATION</u>	<u>ITEM DESCRIPTION</u>	<u>TYPE OF AIRCON</u>	<u>SIZE</u>	<u>MAKE</u>
Park home1	Replace bearing	Window wall	12 000BTU	LG GOLD
Consulting room 5	Repair gas leak and charge unit with gas	mid wall	12 000BTU	

KINDLY RETURN ALL DOCUMENTATION WHEN REPLYING

DECLARATION OF INTEREST

1. Any legal person, including persons employed by the state^a, 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 declares 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.....
- 2.2. Identity Number:
- 2.3. Position occupied in the Company (director, trustee, shareholder):.....
- 2.4. Company Registration Number:
- 2.5. Tax Reference Number:
- 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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^a"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);
- b) any municipally or municipal entity;
- c) provincial legislature;
- d) national Assembly or the national Council of provinces; or
- e) Parliament.

^a"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.

SCC

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.