Department Pools PAOVINCE OF INVASULUMATAL	Mi Programment Ountation Advert	
Opening Date:	2020-02-31	
Closing Date:	2020-09-04	
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name;	Umzimkhulu hospitai	
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	uMzimkhulu Hospilal	
Date Submitted	2020-08-27	
ITEM CATEGORY AND DETAILS		
Quotation Number:	ZNQ: 143 / 20 - 21	
Item Galegory:	Services	
Item Description:	SUPPLY AND DELIVER	
	IPC ITEMS	
Quantity (If supplies)	ON THE QUOTATION DOCUMENT	
COMPULSORY BRIEFING SESSION	The state of the s	
Select Type:	Not Applicable	
Dale;	*** *** *** *** *** *** *** *** *** **	
Time;	1	
Venue:	The second secon	
valua.		
QUOTES CAN BE COLLECTED FROM:	ON KZN HEALTH WEBSITE	
QUOTES SHOULD BE DELIVERED TO:	UMZIMXHULU HOSIYAL TENDER BOX	
ENQUIRIES REGARDING THE ADV	ERT MAY BE DIRECTED TO:	
Name:	PALESA	
Email:	obligat takhiz-@kinhealth gay za	
Contact Number:	039 259 0310	
Finance Manager Name:	Mrs L.N. Ngcobo	
Finance Manager Signature:	(€)60	

No late quotes will be considered

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000.00			
YOU ARE HERERY INVITED TO QUOTE FOR REQUIREMENTS AT: UMZIMKHULU PSYCHIATRIC HOSPITAL			
DATE ADVERTISED: 31- 00 - 2020 CLOSING DATE: 04 - 09 - 2020 CLOSING TIME: 11:00			
FACSIMILE NUMBER: 039 259 0310 E-MAIL ADDRESS: 086 402 4553			
PHYSICAL ADDRESS: UMZIMKHULU HOSPITAL NEXT TO TESTING GROUND MBIZWENI AREA			
ZNQ NUMBER: 143 / 20 - 21			
DESCRIPTION: IPC ITEMS			
CONTRACT PERIOD ONCE OFF (If applicable) VALIDITY PERIOD 60 Days SARS PIN			
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.			
UNIQUE REGISTRATION REFERENCE			
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS)			
ALL TENDER DOCUMENTS SHOULD BE DEPOSITED INTO TENDER BOX			
AT THE AMBULACE GATE NEXT TO RECORDS OFFICE BEFORE 11:00 ON THE CLOSING DATE			
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 QUOYES 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			
CELLPHONE NUMBER			
E-MAIL ADDRESS			
VAT REGISTRATION NUMBER (If VAT vendor)			
HAS A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE BEEN SUBMITTED? (SBD 6.1)			

[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	143 / 20 - 2	1
DESCRIPTION. IPC ITEMS	11-111-1	·····	
SIGNATURE OF BIDDER [By signing this document I hereby agree to all terms and conditions]	DATE		
CAPACITY UNDER WHICH THIS QUOTE IS SIGNED			,,
Fig. 10 - 10 - 10 - 10 - 10 - 10 - 10 - 10	Deand &	Country of	Price

Item No	Quantilty	Description	Brand & model	Country of manufacture	Price	
1,0,1110					R	Č
1 7 UNITS	7 UNITS	SUPPLY AND DELIVER COOLER WATER DISPENSER				
		20LT WARM / ROOM TEMPERATURE FLOOR				
		STANDING, SABS APPROVED (SAMPLE ATTACHED)				+
	30 UNITS	SUPPLY AND INSTALL LOCKABLE WALL MOUNTED	_			\pm
		BRACKETS HOLDER THAT FITS 500ML BOTTLE WITH				
	•	LONG NOOZLE FOR HAND WASH(SABS APPROVED)				
		NB: PLEASE PROVIDER CLEAR PICTURE (COLOUR)				
	·	WITH QUOTATION			_	
3	20 UNITS	SUPPLY AND INSTALL AUTOMATIC / TOUCHLESS		-	<u> </u>	+
	20 21110	MOIDTURISING HAND SANITIZER REFILLABLE (1LT		-		\top
		(SABS APPROVED)		•••		Τ.
3	35 UNITS	REMOVE, SUPPLY AND INSTALL LOCKABLE		·		
		TOILET PAPER HOLDER (SPEC ATTACHED)		<u>-</u>		
		(SABS APPROVED)				
3 30 U	30 UNITS	REMOVE, SUPPLY AND INSTALL				
		1LT AUTOMATIC / TOUHLESS LIQUID HAND SOAP				
		DISPENSER (REFILLABLE)(SABS APPROVED)				_
4	30 UNITS	REMOVE, SUPPLY AND INSTALL WALL MOUNTED		_		
		LOCKABLE TOWEL PAPER DISPENSER	·			
		(SABS APPROVED)				
5	20 UNITS	REMOVE, SUPPLY AND INSTALL ELBOW OPERATED TAP				
		FOR COLD AND HOT WATER MIXER (SABS APPROVED)				
		(ATTACHED CLEAR QUOTED PICTURE)				
		NB: ATTACH CLEAR PICTURE WITH QUOTATION				\perp
VALUE A	ODEN TAX @	15% (Only If V∆T Vendor)				\perp

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: PALESA Tel: 039, 2590310 E-Mail Address: Dhillani, mkhize@kznhealth.gov.za	