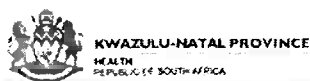


SharePoint

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KZN HEALTH

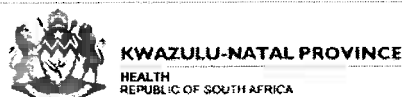
KZN Health Intranet

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KZN Health > Components > Supply Chain Management

AdvertQuote



Quotation Advert

Opening Date: 2020-12-09

Closing Date: 2020-12-18

Closing Time: 11:00

INSTITUTION DETAILS

Institution Name: Emmaus hospital

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required EMMAUS HOSPITAL

Date Submitted 2020-12-08

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ:
EMM 478/11/2020

Item Category: Select...

Item Description: CHIP AWAY OLD EPOXY IN COLD ROOM AND FREEZER ROOM IN KITCHEN AND REDO RAMP AND EPOXY RAMP INSTALL 2 XDRAIN IN BOTH ROOMS AS PER SPECIFICATION

Quantity (if supplies)

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Briefing Session

Date : 2020-12-14

Time: 10H30

Venue: EMMAUS HOSPITAL

QUOTES CAN BE COLLECTED FROM: EMMAUS HOSPITAL**QUOTES SHOULD BE DELIVERED TO:** EMMAUS HOSPITAL

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: VUYI SHOZI

Email: poovie.govender@kznhealth.gov.za

Contact Number: 036 488 8211

Finance Manager Name:

MR S.W MFUPHI

Finance Manager Signature:


No late quotes will be considered

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Site Updated: 08 December, 2020 09:22 am

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**MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES**

**EMMAUS HOSPITAL WINTERTON
QUOTATION DOCUMENT CONTENTS**

- PART ONE:** INVITATION TO QUOTE
- PART TWO:** QUOTATION FORM, LABOUR, SUBSISTENCE, TRAVEL AND
TRANSPORT
- PART THREE:** SCOPE OF WORK
- PART FOUR:** BILL OF QUANTITIES

ZNQ

**REMOVE OLD EPOXY FREEZER ROOMX1 AND COLD ROOM X 1
AND 1 X RAMP REPLACE WITH NEW EPOXY AND INSTALL TWO
DRAINS**

The Contractor is required to check these documents and drawings .The Contractor shall satisfy him that this document is complete in accordance with the above schedule and if any pages or drawings are found to be missing, or duplicated, shall immediately request the Department Representative to rectify the discrepancy. No liability will be admitted by the Employer in respect of errors in the Contractor's quote due to the foregoing.

**PROVINCE OF KWAZULU-NATAL
DEPARTMENT OF HEALTH
MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES**

PART ONE
ZNQ
EMMAUS HOSPITAL
INVITATION TO QUOTE

REMOVE OLD EPOXY FREEZER ROOMX1 AND COLD ROOM X 1
AND 1 X RAMP REPLACE WITH NEW EPOXY AND INSTALL TWO
DRAINS

ENQUIRIES: G.L.P. VILJOEN
DATE:

REF:
ZNQ

CONTRACTOR:

1. On behalf of the KwaZulu-Natal Department of Health, we hereby invite you to quote for the above service.
2. Your quotation must be submitted to the following address:

IF POSTED

IF HAND DELIVERED

Department of Health
HOSPITAL MANAGER
EMMAUS HOSPITAL
P/BAG X16
WINTERTON
3740

Department of Health
HOSPITAL MANAGER
TENDER BOX IN
MANAGEMENT OFFICE

In a sealed envelope, the front of the envelope being clearly endorsed with the Contract Number and the service type as stated above, not later than 11h00 on

3. The quotation shall be fully detailed as follows:
 - 3.1 Itemised list of additional Material/Spare parts required by the Contractor, showing costs and contracts mark-up.
 - 3.2 Labour hours, rate and total travelling costs.
 - 3.3 Kilometres, Rate and Total Travelling Cost (specify number of trips).
 - 3.4 Subsistence: Number of Days, Rate and Total Subsistence Costs.
4. Kindly complete the attached document and return all pages as per paragraph two above, each page being initialled by the Contractor's authorized signatory.
5. The Contractor's attention is drawn to the following, which under no circumstances will be acceptable and will result in the automatic disqualification of the quotation.
 - 5.1 Use of correcting fluid i.e. Tippex on the quotation documents.
 - 5.2 Faxed quotations
 - 5.3 Photocopies of quotations

Only the original document, duly signed and completed in its entirety will be given any consideration.

**PROVINCE OF KWAZULU-NATAL
DEPARTMENT OF HEALTH
MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES**

REMOVE OLD EPOXY FREEZER ROOMX1 AND COLD ROOM X 1
AND 1 X RAMP REPLACE WITH NEW EPOXY AND INSTALL TWO
DRAINS

PART TWO

ZNQ

**QUOTATION FORM, LABOUR, SUBSISTENCE,
TRAVEL AND TRANSPORT**

**MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES**

| | | | |
|--|---|-------------------|---|
| KWAZULU-NATAL PROVINCIAL GOVERNMENT – DEPARTMENT OF HEALTH | | | |
| QUOTATION FORM FOR: | | | |
| We hereby quote for the above service | | | |
| Materials, component/ancillary parts: A detailed list of materials etc. showing unit costs shall be provided. | | | |
| <u>ITEMS</u> | | | |
| A. | Labour, Travelling, Subsistence and Transport This price shall be firm | R | |
| B. | Quote for Scheduled items | R | |
| C. | Quote for Non-Scheduled items | R | |
| | | Sub-Total | R |
| | | VAT @ 14% | R |
| | | TOTAL COST | R |
| <u>Note:</u> | | | |
| This tender shall remain binding and valid for a period of 90 days calculated from the closing date of this quote. | | | |
| (Should there be additions or omissions to the works quoted for, this price shall be adjusted accordingly). | | | |
| Time required for completion, concurrent with structural work, from receipt of official order. | | | |
| FULL NAME AND ADDRESS OF FIRM: | | | |
| CONTRACTOR'S AUTHORISED SIGNATURE: | | | |
| NAME IN BLOCK LETTERS: | | DATE: | |

NOTE: If your price is not considered acceptable, the Department reserves the right to

reject this quotation, in which case an estimated amount will be allocated, and actual costs with supporting documentation shall apply.

**SUPPLY AND INSTALL ONE UPS IN THEATER
MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES
LABOUR, SUBSISTENCE, TRAVEL AND TRANSPORT**

| D. | LABOUR (RATE PER HOUR) | TOTAL HOURS | RATE R c | TOTAL AMOUNT R c |
|----|--|-------------|-------------|---------------------|
| a) | Artisans | | | |
| b) | Apprentice | | | |
| c) | Semi-skilled | | | |
| d) | Unskilled | | | |
| e) | Supervisor | | | |
| f) | Inspection and report back (by Supervisor or Artisan per hour) | | | |
| E | SUBSISTENCE | TOTAL DAYS | RATE | |
| a) | Artisans | | | |
| b) | Apprentice | | | |
| c) | Semi-skilled | | | |
| d) | Unskilled | | | |
| F | TRANSPORT: MOTOR VEHICLE LDV 1 TON | TOTAL KM | RATE | |
| a) | From Contractor's base stations to site Motor Vehicle trips @ km per trip | | | |
| b) | LDV 1 ton trips @ km per trip | | | |
| c) | Truck 5 or 10 ton trips @ km per trip | | | |
| d) | From accommodation to site trips @ km per trip | | | |
| G | TRANSPORT (ADDITIONAL) | TOTAL KM | RATE | |
| a) | Haulage to site trips @ km per trip | | | |
| b) | Cranage to site trips @ km per trip | | | |
| c) | Cranage on sitehrs | | | |

TOTAL AMOUNT CARRIED OVER TO QUOTATION FORM, PART TWO (A) R _____

**MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES**

PART THREE

ZNQ

**REMOVE OLD EPOXY FREEZER ROOM X 1 AND COLD ROOM X 1
AND 1 X RAMP REPLACE WITH NEW EPOXY AND INSTALL TWO
DRAINS**

SCOPE OF WORK

**MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES**

1. SCOPE OF WORK

The work to be carried out in terms of this section of the project comprises the supply and installation of all the materials necessary, as per the Bill of Quantities and Drawings

1 GB.

1. CHIP AWAY OLD EPOXY FROM FREEZER ROOM 2600MM X 280MM AND COLD ROOM 2400MM X 2800MM
2. CLEAN ALL SURFACES
3. SCREED FLOOR WITH CONCRETE
4. EPOXY COAT FLOOR WHEN DRY WITH GREY EPOXY 4MM THICKNESS
5. REMOVE RAMP AT ENTRANCE TO FREEZER ROOMS CHIP EPOXY ON FLOOR 1400MM X 1400MM X 350MM
6. REDO RAMP AND EPOXY 4MM THICK NEW EPOXY ON RAMP
7. SUPPLY AND INSTALL ONE DRAIN IN FREEZER ROOM AND ONE IN COLD ROOM
8. REMOVE OLD CONCRETE AND OLD EPOXY FROM HOSPITAL PREMISES

**MAINTENANCE, SERVICING, REPAIR, UPGRADING,
REPLACEMENT AND MINOR NEW WORKS FOR STRUCTURAL WORK
AT ALL KWAZULU-NATAL PROVINCIAL HEALTH FACILITIES**

PART FOUR

REMOVE OLD EPOXY FREEZER ROOMX1 AND COLD ROOM X 1
AND 1 X RAMP REPLACE WITH NEW EPOXY AND INSTALL TWO
DRAINS

BILLS OF QUANTITIES

MAINTENANCE, SERVICING, REPAIR, UPGRADING, REPLACEMENT AND MINOR NEW
WORKS FOR STRUCTURAL WORK AT ALL KWAZULU-NATAL PROVINCIAL HEALTH
FACILITIES

BILLS OF QUANTITIES

| ITEM | DESCRIPTION | QTY | SUPPLY RATE | SUB TOTAL | TOTAL |
|------|---|-----|----------------|-----------|-------|
| 1 | CHIP AWAY OLD EPOXY FROM FREEZER ROOM AND COLD ROOM | | | | |
| 2 | CLEAN ALL SURFACES | | | | |
| 3 | SCREED FOOR WITH CONCRETE | 2 | | | |
| 4 | SUPPLY AND INSTALL TWO DRAINS 50MM WASTE PIPE FOR WATER FROM FLOOR | | | | |
| 5 | EPOXY COAT FLOOR WHEN DRY WITH GREY EPOCXY 4MM TICKNESS | | | | |
| 6 | REMOVE RAMP AT ENTRANCE TO FREEZER ROOMS CHIP EPOXY ON FLOOR | 1 | | | |
| 7 | REDO EPOXY ON RAMP | 1 | | | |
| | REMOVE OLD CONCRETE AND EPOXY FROM HOSPITAL PREMISES | 1 | | | |



Department:

Health
PROVINCE OF KWAZULU-NATAL

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 Chicago, IL 60607-7143
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 URL: <http://www.math.uic.edu>
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 Fax: (773) 997-7143
 WWW: <http://www.math.uic.edu/~math>

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DIRECTORATE

EPWP STAFF EMPLOYED BY CONTRACTOR

[illegible]