

## Quotation Advert

Opening Date: 24/07/2020  
Closing Date: 31/07/2020

Closing Time: 11:00

### INSTITUTION DETAILS

Institution Name: UNTunjambili Hospital  
Province:  
Department or Entity: Department of Health  
Division or section: Central Supply Chain Management  
Place where goods / services is required: UNTunjambili Hospital  
Date Submitted:

### ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ 174/2020/21  
Date submitted: 22/07/2020  
Item Category:  
Item Description: SERVICE  
ANNUAL AND HALF YEARLY SERVICNG OF  
HOT PLANTS FOR MALE, FEMALE, O.P.D  
AND MATERNITY-(SPEC ATTACHED)  
REQUIRED CIBD GRADING ME/EB

### COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: n/a  
Date: n/a  
Time: Venue: n/a  
QUOTES CAN BE COLLECTED FROM: Untunjambili Hospital  
QUOTES SHOULD BE DELIVERED TO: Untunjambili Hospital

### ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: PORTIA BUTHELEZI  
Email: Makhosazane.jange@kznhealth.gov.za  
ContactNumber: 033 444 0818

Finance Manager Name:

Finance Manager

MAKHOSAZANE JANGE

Finance Manager Signature:





OFFICIAL PRICE PAGE FOR QUOTATIONS

ZNQ NUMBER: 174/2020/21

DESCRIPTION: ANNUAL AND HALF YEARLY SERVICING OF HOT PLANTS FOR MALE,FEMALE,O.P.D AND MATERNITY

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
1		ANNUAL SERVICING OF HOT WATER PLANTS FOR MALE,FEMALE,				
	04 UNITS	O.P.D. AND MATERNITY				
		ANNUAL SERVICING OF HOT WATER PLANTS FOR MALE,FEMALE,				
	04 UNITS	O.P.D. AND MATERNITY				
		(AFTER SIX MONTHS FROM DATE OF ANNUAL SERVICE)				
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

<p>Enquiries regarding the <u>quote</u> may be directed to:</p> <p>Contact Person: <u>Ms. N.P. Buthelezi</u> Tel: <u>0334440818</u></p> <p>E-Mail Address: <u>nokulunga.buthelezi@kznhealth</u></p>	<p>Enquiries regarding <u>technical information</u> may be directed to:</p> <p>Contact Person: <u>MR MUTHWA</u> Tel: <u>0334440818</u></p>
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DECLARATION OF INTEREST

1. Any legal person, including persons employed by the state<sup>1</sup>, 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<sup>2</sup>):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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<sup>1</sup>"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.  |

<sup>2</sup>"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 ciliandi 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 & fulfillment of all obligations conditions devolving on under this agreement, as the Principal (s) liable for the due fulfillment 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 products 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. 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 initialed.  
 4.6. Use of correcting fluid is prohibited.  
 4.7. Quotation will be opened in public 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.

INSTITUTION :		
CODE: HWB - 03		
TYPE OF SERVICE : Hot Water System		
FREQUENCY : Weekly/Bi-annual/Annual		
SCHEDULE FOR : Hot Water Circulating Pump		
ITEM	INSTRUCTION	CHECK
Weekly		
1	Check pumps/ have not tripped	
2	Check for undue noise and vibration	
3	Check for water leaks. Repack glands if necessary	
4	Check for loose components	
5	Check that all bearings are running quietly, smooth and cool	
6	Check by touch motors are not overheating	
7	Check drive guard is in position	
8	Change over lead/lag units where applicable	
9	Check pump inlet and outlet pressures	
10	Check steam, chilled and condenser water inlet/outlet pressures	
11	Check calibration of gauges	
12	Clean plant and plant-room area	
Bi-Annual		
1	All the above plus the following	
2	Check oil level in pump basing housing	
3	Check and clean drip tray and drain piping	
4	Check mounting bolts and anti-vibration mountings	
5	Check and clean out strainers	
Annual (Contractor)		
1	All the above plus the following	
2	Check pump/motor alignment	
3	Remove motor cover and clean out airways	
4	Clean and remove loose paint, rust, scale and paint as required	
Date :		
Name :		
Signature :		

<b>INSTITUTION :</b>			CODE: HWB - 04
<b>TYPE OF SERVICE : Hot Water System</b>			
<b>SCHEDULE FOR : Hot Water Cylinder</b>			
<b>FREQUENCY : Weekly/Annual</b>			
<b>ITEM</b>	<b>INSTRUCTION</b>	<b>CHECK</b>	<b>COMMENTS</b>
<b>Weekly</b>			
1	Check cylinder lagging/cladding		
2	Check for water leaks		
3	Check temperature and note temperature		
4	Check cylinder air vents (where applicable)		
5	Check all flanges and fittings for leaks		
6	Clean plant and plant-room area		
<b>Annual (Contractor)</b>			
1	All the above plus the following		
2	Check safety valves and test valve release pressure		
3	Check condition of all valves		
4	Remove inspection cover (where applicable) and check for scale and corrosion, de-scale as required		
5	Clean and remove loose paint, rust, scale and paint as required		
<b>Date :</b>			
<b>Name :</b>			
<b>Signature :</b>			