

Quotation Advert

Opening Date:	2020-07-06
Closing Date:	2020-07-13
Closing Time:	11:00
INSTITUTION DETAILS	
Institution Name:	St Apollinaris hospital
Province:	KwaZulu-Natal
Department or Entity:	Department of Health
Division or section:	Central Supply Chain Management
Place where goods / services is required	ST APOLLINARIS HOSPITAL
Date Submitted	2020-07-03
ITEM CATEGORY AND DETAILS	
Quotation Number:	ZNQ: 66/2020/2012
Item Category:	Services
Item Description:	SERVICE OF LAUNDRY WASHING MACHINES
Quantity (if supplies)	
COMPULSORY BRIEFING SESSION	/ SITE VISIT
Select Type:	Not Applicable
Date:	
Time:	little and the second s
Venue:	IT IS SERVICE PROVIDER RESPONSIBILITY TO VISIT SITE FOR CLARITY BY MAKING AN APPOINTMENT WITH MAINTENANCE DEPARTMENT
QUOTES CAN BE COLLECTED FROM:	N/A
QUOTES SHOULD BE DELIVERED TO:	TENDER BOX / <u>StApollinaris.scm@kznhealth.gov.za</u>
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:
Name:	Ms F S Zuma
Email:	
Contact Number:	hanning a massach makkan kerkelan inskeperker makansamban balan makansakan makankaske bissa bak makan beker be

	0398338054/8091
Finance Manager Name:	MRS M B-KHESWA
Finance Manager Signature:	16
	No late duotes will be considered

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STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000.00
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: ST APOLLINARIS HOSPITAL
DATE ADVERTISED: 06/07/2020 CLOSING DATE: 13/07/2020 CLOSING TIME: 11:00
FACSIMILE NUMBER: N/A E-MAIL ADDRESS: StApollinaris.scm@kznhealth.gov.za
PHYSICAL ADDRESS: CENTOCOW MISSION CREIGHTON 3263
ZNQ NUMBER: 66/2020/2021
DESCRIPTION: SERVICE OF LAUNDRY WASHING MACHINES
CONTRACT PERIOD ONCE OFF VALIDITY PERIOD 60 Days SARS PIN
CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.
UNIQUE REGISTRATION REFERENCE
DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS)
SECURITY TENDER BOX
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 CODENUMBER FACSIMILE 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]

		FOR QUOTATIONS VICE OF LAUNDRY W	'ASHIN			66/2020/202	4 44	
		R		••••••	DATE		******************	
CAPACITY (JNDER WHI	CH THIS QUOTE IS SIGNED		*************		••••••	• • • • • • • • • • • • • • • • • • • •	••••••
Item No	Quantity	Description			Brand &	Country of manufacture	Price	
	11	SERVICE PROVIDER TO SERVICE	LAHMODVI	MACHING	mouei	manufacture	R	C
	 	MACHINES AS PER ATTA						
		WHO THE HOTE ENTER	TOTILD LIC	<u>' </u>				
	†	THE SERVICE PROVIDER MUS	T BE CIDB	GRADE				\top
-		1ME OR ABOVE	.					\top
		PLEASE ATTACH REFERE	NCE LETTE	ER				
		FROM ANY GOVERNMENT I	DEPARTME	NT.				
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	-							+
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	1							+
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ł		15% (Only if VAT Vendor)						
TOTAL QU	OTATION P	RICE (VALIDITY PERIOD 60 Days)						
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Is The Price					.G. E.G. 1day,	N.S. / S.A.B.S. Specifi	cation?	
is the thee	1 81181:		State Delive	y r criod L	io, E.O. ruay,	, MOON		
Contact Pe	rson:MS.F	e <u>quote</u> may be directed to: S.ZUMATel:.0398338	0.544	•	-	ical information may VAMAND a Tel:0		

DECLARATION OF INTEREST

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 wherethe 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. In order to give effect to the above, the following questionnaire must be completed and submitted with the quote. 2.4. Company Registration Number: 2.1. Full Name of bidder/representative..... 2.5. Tax Reference Number: 2.2. Identity 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, ITICK APPLICABLE employee / persal numbers must be indicated in paragraph 3 below. 2.8. Are you or any person connected with the bidder presently employed by the state? 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: 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.) 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 YES NO state in the previous twelve months? 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 YES NO or not they are bidding for this contract? 2.12.1. If so, furnish particulars: 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. **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. Signature Position Name of bidder

"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);
-) provincial legislature;
- d) national Assembly or the national Council of provinces; or
- e) Parliament.

b) any municipality or municipal entity;

[&]quot;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 falled 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.

- 5.5. No quotation/bid sent through the post will be considered if it is received after the closing date and time stipulated in the quotation documentation, and proof of posting will not be accepted as proof of delivery.
- 5.6. Quotation documents must not be included in packages containing samples. Such quotations may be rejected as being invalid.

6. SAMPLES

- 6.1. In the case of the quote document stipulating that samples are required, the supplier will be informed in due course when samples should be provided to the institution. (This decreases the time of safety and storage risk that may be incurred by the respective institution). The bidders sample will be retained if such bidder wins the contract.
- (i) If a company/s who has not won the quote requires their samples, they must advise the institution in writing of such.
- (ii) If samples are not collected within three months of close of quote the institution reserves the right to dispose of them at their discretion.
- 6.2. Samples must be made available when requested in writing or if stipulated on the document.
- (i) If a Bidder fails to provide a sample of their product on offer for scrutiny against the set specification when requested, their offer will be rejected. All testing will be for the account of the bidder.

7. COMPULSORY SITE INSPECTION / BRIEFING SESSION

7.1.	Bidders who fail to attend the compulsory meeting will be disqualified from the evaluation process.											
(i) (ii)	The institution has determined that a compulsory site meeting Date/ Time Place		take place									
Instit	ution Stamp:	Institution Site	Inspection / briefing session Official									
		Full Name:										
		Signature:										
		Date:										

8. STATEMENT OF SUPPLIES AND SERVICES

8.1. The contractor shall, when requested to do so, furnish particulars of supplies delivered or services executed. If he/she fails to do so, the Department may, without prejudice to any other rights which it may have, institute inquiries at the expense of the contractor to obtain the required particulars.

9. SUBMISSION AND COMPLETION OF SBD 6.1

9.1. Should a bidder wish to qualify for preference points they must complete a SBD 6.1 document. Failure by a bidder to provide all relevant information required, will result in such a bidder not being considered for preference point's allocation. The preferences applicable on the closing date will be utilized. Any changes after the closing date will not be considered for that particular quote.

10. TAX COMPLIANCE REQUIREMENTS

- 10.1. In the event that the tax compliance status has failed on CSD, it is the suppliers' responsibility to provide a SARS pin in order for the institution to validate the tax compliance status of the supplier.
- 10.2. In the event that the institution cannot validate the suppliers' tax clearance on SARS as well as the Central Suppliers Database, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17.

11. TAX INVOICE

- 11.1. A tax invoice shall be in the currency of the Republic of South Africa and shall contain the following particulars:
- (i) the name, address and registration number of the supplier;
- (ii) the name and address of the recipient;
- (iii) an individual serialized number and the date upon which the tax invoice is issued;
- (iv) a description and quantity or volume of the goods or services supplied;
- (v) the official department order number issued to the supplier;
- (vi) the value of the supply, the amount of tax charged;
- (vii) the words tax invoice in a prominent place.

12. PATENT RIGHTS

The supplier shall indemnify the KZN Department of Health (hear after known as the purchaser) against all third-party claims of infringement of patent, trademark, or industrial design rights arising from use of the goods or any part thereof by the purchaser.

13. PENALTIES

- 13.1. If at any time during the contract period, the service provider is unable to perform in a timely manner, the service provider must notify the institution in writing/email of the cause of and the duration of the delay. Upon receipt of the notification, the institution should evaluate the circumstances and, if deemed necessary, the institution may extend the service provider's time for performance.
- 13.2. In the event of delayed performance that extends beyond the delivery period, the institution is entitled to purchase commodities of a similar quantity and quality as a substitution for the outstanding commodities, without terminating the contract, as well as return commodities delivered at a later stage at the service provider's expense.
- 13.3. Alternatively, the institution may elect to terminate the contract and procure the necessary commodities in order to complete the contract. In the event that the contract is terminated the institution may claim damages from the service provider in the form of a penalty. The service provider's performance should be captured on the service provider database in order to determine whether or not the service provider should be awarded any contracts in the future.
- 13.4. If the supplier fails to deliver any or all of the goods or to perform the services within the period(s) specified in the contract, the purchaser shall, without prejudice to its other remedies under the contract, deduct from the contract price, as a penalty, a sum calculated on the delivered price of the delayed goods or unperformed services using the current prime interest rate calculated for each day of the delay until actual delivery or performance.

14. TERMINATION FOR DEFAULT

- 14.1. The purchaser, without prejudice to any other remedy for breach of contract, by written notice of default sent to the supplier, may terminate this contract in whole or in part:
- (i) if the supplier fails to deliver any or all of the goods within the period(s) specified in the contract,
- (ii) if the supplier fails to perform any other obligation(s) under the contract; or
- (iii) if the supplier, in the judgment of the purchaser, has engaged in corrupt or fraudulent practices in competing for or in executing the
- 14.2. In the event the purchaser terminates the contract in whole or in part, the purchaser may procure, upon such terms and in such manner as it deems appropriate, goods, works or services similar to those undelivered, and the supplier shall be liable to the purchaser for any excess costs for such similar goods, works or services.
- 14.3. Where the purchaser terminates the contract in whole or in part, the purchaser may decide to impose a restriction penalty on the supplier by prohibiting such supplier from doing business with the public sector for a period not exceeding 10 years.
- 15. FAILURE TO COMPLY WITH ABOVE WILL RESULT IN YOUR QUOTE BEING PASSED OVER.

PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2017

This preference form must form part of all quotes invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (B-BBEE) Status Level of Contribution

NB: BEFORE COMPLETING THIS FORM, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF B-BBEE, AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.

1. GENERAL CONDITIONS

- 1.1 The following preference point systems are applicable to all quotes:
 - the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- 1.2 The value of this quote is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the 80/20 preference point system shall be applicable.
- 1.3 Points for this quote shall be awarded for:
 - (a) Price; and
 - (b) B-BBEE Status Level of Contributor.
- 1.4 The maximum points for this quote is allocated as follows:

	POINTS
PRICE	80
B-BBEE STATUS LEVEL OF CONTRIBUTOR	20
Total points for Price and B-BBEE must not exceed	100

- Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the quote, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.
- 1.6 The purchaser reserves the right to require of a bidder, either before a quote is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

2. DEFINITIONS

- (a) "B-BBEE" means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic Empowerment Act;
- (b) "B-BBEE status level of contributor" means the B-BBEE status of an entity in terms of a code of good practice on black economic empowerment, issued in terms of section 9(1) of the Broad-Based Black Economic Empowerment Act;
- (c) "bid" means a written offer in a prescribed or stipulated form in response to an invitation by an organ of state for the provision of goods or services, through price quotations, advertised competitive bidding processes or proposals;
- (d) "Broad-Based Black Economic Empowerment Act" means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003);
- (e) "EME" means an Exempted Micro Enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (f) "functionality" means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- (g) "prices" includes all applicable taxes less all unconditional discounts;
- (h) "proof of B-BBEE status level of contributor" means:
 - 1) B-BBEE Status level certificate issued by an authorized body or person;
 - 2) A sworn affidavit as prescribed by the B-BBEE Codes of Good Practice;
 - 3) Any other requirement prescribed in terms of the B-BBEE Act;
- (i) "QSE" means a qualifying small business enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (j) "rand value" means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

3. POINTS AWARDED FOR PRICE

3.1 THE 80/20 PREFERENCE POINT SYSTEMS

A maximum of 80 points is allocated for price on the following basis:

$$Ps = 80 \left(1 - \frac{Pt - P\min}{P\min}\right)$$
 Where

Ps = Points scored for price of bid under consideration

Pt = Price of bid under consideration Pmin = Price of lowest acceptable bid

4. POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR

4.1 In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for attaining the B-BBEE status level of contribution in accordance with the table below:

B-BBEE Status Level of Contributor	Number of points (80/20 system)
1	20
2	18
3	14
4	12
5	8
6	6
7	4
8	2
Non-compliant contributor	0

5. BID DECLARATION

- 5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:
- 6. B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1
- 6.1 B-BBEE Status Level of Contributor: =(maximum of 20 points)

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.

7.	SUB-CONTRACTING	(Tick applicable box)
7.1	Will any portion of the contract be sub-contracted?	YES NO
7.1.1	If yes, indicate:	
	i) What percentage of the contract will be subcontracted	
8.	Whether the sub-contractor is an EME or QSE	(Tick applicable box)

iv) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations,2017:

Designated Group: An EME or QSE which is at last 51% owned by:

EME

QSE

Designated Group: An EME or QSE which is at last 51% owned by:	EME √	QSE
Black people		
Black people who are youth		
Black people who are women		
Black people with disabilities		
Black people living in rural or underdeveloped areas or townships		
Cooperative owned by black people		
Black people who are military veterans		
OR		
Any EME		
Any QSE		

9.	DECLA	RATION WITH REGARD TO COMPANY/FIRM										
9.1	Name	of company/firm:										
9.2	VAT r	egistration number:										
9.3	Comp	any registration number:										
9.4	TYPE	OF COMPANY/ FIRM [TICK APPLICABLE BOX	ΧĮ									
		Partnership/Joint Venture / Consortium One person business/sole propriety Close corporation Company (Pty) Limited										
9.5		RIBE PRINCIPAL BUSINESS ACTIVITIES										
9.6												
		Manufacturer Supplier Professional service provider Other service providers, e.g. transporter, etc.										
9.7	Total r	number of years the company/firm has been in b	usiness:									
9.8	I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based of the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we acknowledge that:											
	i) T	he information furnished is true and correct;										
	ii) T	he preference points claimed are in accordance	with the General Conditions as indicated in paragraph 1 of this form;									
	iii) Ir b	n the event of a contract being awarded as a res e required to furnish documentary proof to the s	sult of points claimed as shown in paragraphs 1.4 and 6.1, the contractor ma atisfaction of the purchaser that the claims are correct;									
	iv) If h	the B-BBEE status level of contributor has beer ave not been fulfilled, the purchaser may, in add	n claimed or obtained on a fraudulent basis or any of the conditions of contractition to any other remedy it may have –									
	(a)	disqualify the person from the bidding process	s;									
9.1 9.2 9.3 9.4 9.5 9.6	(b)	recover costs, losses or damages it has incur	red or suffered as a result of that person's conduct;									
	(c)	cancel the contract and claim any damages varrangements due to such cancellation;	which it has suffered as a result of having to make less favourable									
	(d)	who acted on a fraudulent basis, be restricted	shareholders and directors, or only the shareholders and directors by the National Treasury from obtaining business from any organ after the audi alteram partem (hear the other side) rule has been									
	(e)	forward the matter for criminal prosecution.										
.8	WITN	ESSES	SIGNATURE(O) OF PROPERCIO									
	1		SIGNATURE(S) OF BIDDERS(S) DATE:									
	2		ADDRESS									



Off Centocow main road, Centocow, CREIGHTON, 3263 Private Bag 206, Creighton, 3263 Tel.: 039 833 8085 Fax. 039 833 8054 Email: mpe.malinga@kznhealth.gov.za

SUPPLY CHAIN MANAGEMENT

Date: 11 June 2020

ZNQ Number: 66/2020/204

TERMS OF REFERENCE

www.kznhealth.gov.za

ITEM SPECIFICATION: Service provider to service laundry washing machines as per attached list CIDB grade 1ME or above.

Please attach the proof that shows you have done the similar work in any government department.

Name & Surname	Designation	Signature
1.CS Mbanjwa	SMO	@ -
2.N Somhlahlo	AMN	
3.MV Mathanda	SCC	A LONG
4 NH Ntoyakhe	Infection Control	Heliand

SPECIFICATION TERMS AND CONDITIONS

- 1. Only bidders that fully meet the specification shall be considered
- 2. The institution is under no obligation to accept the lowest or any quote
- The quality of products must be SABS / SANS/ CKS approved and a certificate of compliance must be submitted when required
- 4. The bidder must ensure the correctness and validity quote: the prices, rates & preference quoted cover all of the work and accept that any mistake regarding with the price calculations will be at the bidder's risk
- 5. If the information supplied is found to be incorrect or false then the KZN department of Health, in addition to the remedies it may have, may recover from the contractor all cost, losses and damages incurred by the department as a result of the award of the contract, and / or cancel the contract and claim any damages
- 6. Defaulting suppliers in terms of delivering, will be dealt with and will be reported at Treasury
- 7. The evaluation criteria for the quotation above R30 000 will be 80/20 for the price and points certified BBBEE certificates and original tax clearance.
- 8. Incomplete declaration of interest and quotation form will not be considered
- 9. Orders will be cancelled if the supplier fail to meet the set standards and lead time
- 10. All quotations requiring registration with certain Bodies must be returned together with the following:
 - Valid tax clearance
 - Proof of registration with CSD
 - CK certificate / Cipro certificate
 - CIDB registration and grading with relevant job category
 - Reference letter (from where the supplier did the same job successfully)
 - Letter of good standing
 - Current proof of registration with relevant bodies
 - Sworn statement
- 11. All conditions indicated in the quotation form will be applicable upon evaluation, and should be attached to evaluation criteria
- Quotation form must be completed and signed in full, any omissions or incomplete information and signatures will automatically disqualify the quotation
- 13. Bill of quantity should be fully completed and all segments must be filled per item
- 14. A guarantee / warrantee must be provided on appliances, services and repairs
- 15. All these conditions are binding and service providers must complied with
- 16. Samples must be provided with documents unless indicated otherwise.
- 17. For services requiring site inspection, no late bidders will be allowed to join briefing
- 18. It is advisable to get all necessary information before quotation closing date

Chairperson

1166/2000

End user

CFO

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Date

Fighting Disease, Fighting Poverty, Giving Hope

PREVENTIVE MAINTENANCE SCHEDULE DEPARTMENT OF PUBLIC WORKS PROVINCE OF KWAZULU-NATAL

: AIR COMPRESSORS : INDUSTRIAL AIR

INSTALLATION NAME

SCHEDULE FREQUENCY

SCHEDULE FOR TYPE OF SERVICE

CODE : IA1-001 REF : IA

ZNT2234-55G: 2011-2013 4 3 12 <u>:</u> <u></u> ထ Ø Ģ 4 ω Ņ TEM P.M. SERVICE SERVICE PROVIDER Check and record compressor cut-in and cut-out pressures. Adjust if Check operation of, and drain all condensate traps and receivers Check for compressed air leaks (including outlet points) Check condition of air inlet filte Check pilot lights Check and note motor amperages Check for noisy compressor motor bearings Check by touch that motors do not run hot Check for loose components Check pulley alignment and correct if necessary Check condition of belts Check belt tension and correct if necessary INSTRUCTION: CHECK, ADJUST, CLEAN AS REQURIED Check for undue noise or vibration Check plantroom louvres and screens and clean ORDER (Apply for V.O. as Applicable)
OTHER NON-SPECIFIED TIME
RUNNING REPAIRS DONE TAKEN RUNNING REPAIRS DESCRIPTION OF SPARES USED EX EX
SITE FIRMS
STOCK STOCK QUANTITY SUBMIT QUOTATION OTHER REPAIRS DESCRIPTION OF OTHER REPAIRS REQUIRED REF ORDER No.: EST. TIME REQ. DESCRIPTION OF SPARES REQUIRED REO 구

30.	29.	28.	27.	26.	25.	24	23.	22.	21.	20.	19	18.	17.	16.	15.			0
Check receiver internally and externally for corrosion and pit marks (annually)	Do pressure test in accordance with M.O.S. Act (36 monthly), stamp test plate and complete test certificate	Complete plant logbook	Check calibration of all pressure gauges, etc. Re-calibrate as required	Clean, remove loose paint and scale and re-paint	Check and tighten compressor and motor pulley grub screws	Tighten all electrical terminals	Lubricate motor bearings if required	Clean out air ways of motor	Check and tighten all mounting bolts etc.	Check compressor oil using approved type according to manufacturer's specification	Check operation of warning light system	Check operation and settings of safety valve/s. Adjust if necessary and note settings	Check operation and settings of pressure reducing valve/s. Adjust if necessary and note settings	Clean plant, plantroom and drain receiver	Change over lead - lag	ADJUST, CLEAN AS REQUIRED	ļ ģ	D M SEBVIOR
osion an	n accord 36 month nd comp	gbook	of all pre	ose paint	n compre	sal termii	earings i	s of moto	n all mou	or oil usir cording t ecificatio	of warnin	and setti	and setting valve/s	room an	- lag units	AS RE	<u> </u>	
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	TO:	TIME OUT:	AME (BLOCK	NAME/S OF ASSISTANT/S: UNSKILLED:	NAME/S OF ASSISTANT/S: SEMI SKILLED:	NAME OF SERVICEMAN (BLOCK LETTERS):		HAT THE SPE	oressure (N	Pressure reducing valve settings	Safety valve setting/s	Warning light pressure switch settings	pressor cut	a) Motor amperages	NOTE THE FOLLOWING:
		OUT:	(LETTERS):	: UNSKILLE	S: SEMI SKILI	BLOCK LETI		CIFIED SERV	1.O.S. Act)	ng valve se	ting/s	essure swit	in and cut	SS	ING:
	KM: TO:	TIME ON SITE:	170) :	ED:	ERS):	VICE WAS CARRIED O	I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT	Test pressure (M.O.S. Act) (36 monthly)	ttings		ch settings	Compressor cut-in and cut-out pressures	:	
KM:	KM: TOTAL	DATE:				SIGNATURE:	JUT								
	SIGNATURE:	NAME OF RESPONSIBLE OFFIC					OFFICIAL STAMP:								PAGE 3 OF 3
		OFFICIAL ON													ω.

1A1-001 PAGE 3 OF 3

PREVENTIVE MAINTENANCE SCHEDULE PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH

TYPE OF SERVICE
SCHEDULE FOR
SCHEDULE FREQUENCY
INSTRUCTION: CHECK

: LAUNDRY EQUIPMENT : 4x WASHING MACHINES

: ANNUAL

	ADJUST, CLEAN AS REQURIED	ADJUST AS REQUIRED	RUNNING REPAIRS DONE	DESCRIPTION OF SPARES USED
	Combine with Lubrication schedule L3-004/LUB	1000		
. -	Check all safety devices,			
	door switch, stop button,			
	electrical isolator			
2	Check drum door catches			
ω	Check and report any	700		
·	excessive noise			
4.	Clean machine			
Çn	Check for steam, water, air			
,o	Remove covers and clean	7.4		
	machine			
7.	Check oil level in gearbox &			
	change as per			
	manufacturers			

corrosion, treat and touch	
Check machine for	18.
Meg-ohm test all motors	17.
positioning correctly	
Test run machine with load and check for basket	ō
Check mounting bolts	15.
Clean motor airways	14
Check overload settings	13.
Check indicator lamps and electrical controls.	12.
Check and tighten all electrical connections	≓
correct position) (check inching)	
Check and adjust brake	10.
Check and tension drive belts and pulley alignment	, o
Grease bearings	œ
specification	

SIGN AND RERTUN THIS DOCUM		NAME/S OF ASSISTANT/S: UNSKILLED: COMPANY NAME (BLOCK LETTERS):	NAME/S OF ASSISTANT/S: SEMI SKILLED:	NAME OF SERVICEMAN (BLOCK LETTERS):	21. Ensure you leave the machine working properly	absorber in one washing machine(Electrolux)	ļ	up with paint
SIGN AND RERTUN THIS DOCUMENT WITH QUOTATION FAILURE TO DO SO WILL RESULT ON YOUR DOCUMENT NOT BEING CONSIDERED:	TIME ON SITE: DATE:	LLED:	SKILLED:	AS CARRIED OUT	IV .			
SIGNATURE: SEING CONSIDERED:	NAME OF RESPONSIBLE OFFICIAL OF			OFFICIAL STAMP:				

PROVINCE OF KWAZULU-NATAL DEPARTMENT OF HEALTH PREVENTIVE MAINTENANCE SCHEDULE

TYPE OF SERVICE SCHEDULE FOR

: LAUNDRY EQUIPMENT : 2 STEAM TUMBLE DRIER

AND 1 ELECTRIC DRIER

SCHEDULE FREQUENCY : ANNUAL INSTRUCTION CHECK, CHECK AND

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 Check and replace indicator lamps and electrical controls in order for machine to operate in a good working order	Meg-ohm test all motors (Annual)	Check overload settings	Check all electrical connections and tighten	Check and replace steam strainers, steam traps and safety valve per dryer	Check and tension drive belts and replace belts (6 BELTS)	Grease main bearings and lubricate drive	Clean motor airways	Check for steam, water, air and oil leaks	Clean lint drawer	Remove covers and clean (also air blow steam coils)	Combine with Lubrication schedule L3-004/LUB	ADJUST, CLEAN AS REQURIED
												D ADJUST AS REQUIRED
												OTHER NON-SPECIFIED RUNNING REPAIRS DONE
												DESCRIPTION OF SPARES USED

FROM: TO: SIGN AND RERTUN THIS DOCUMENT WITH	NAME/S OF ASSISTANT/S: UNSKILLED: COMPANY NAME (BLOCK LETTERS): TIME IN: TIME OUT:	NAME OF SERVICEMAN (BLOCK LETTERS): NAME/S OF ASSISTANT/S: SEMI SKILLED:	I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT	17. Ensure all guards and cover panels are in place and secure	16. Remove/clean any lubricant	15. Check machine for corrosion, degrease, de-rust treat and touch up with paint	14. On electric heated machines, check air flap switch and note total current draw (amps)	13. Check machine under load and note temperature after 15 mins (laundry must come from hydro or washer extractor)	12. Check all safety devices, door switches and electrical isolator	NOTE: Compressed air not to be used for cleaning
RE TO DO SO WILL RESULT ON YOUR DOCUMENT NOT BEING CON	NAME	RS): SIGNATURE:	VAS CARRIED OUT							

PLEASE RETURN THIS DOCUMENT SIGNED WITH YOUR QUOTATION

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		THE OF SERVICE: Laundry Equipment CHEDULE FOR: Steam Roll Ironer and electric roller iro REQUENCY: Annually INSTRUCTION Check unit is running Check for undue noise and vibration (safety device) Check for undue noise and vibration Check and grease all bearings and leake appear and clear and on tolls Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all indicator lamps and check and grease all dealings and lubricate chain drives Check and grease all indicator lamps and clear machine Check and grease all indicator lamps and clear machine Check and grease all hearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease all bearings and lubricate chain drives Check and grease and advances Check and grease and deleters Check and grease and deleters Check and grease and advances Check and grease and advances Check and grease and advances Check and grease and deleters Check	ıgis
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		PRE OF SERVICE: Laundry Equipment CHEDULE FOR: Steam Roll Ironer and electric roller REQUENCY: Annually Check unit is running Check for undue noise and vibration Check for undue noise and vibration Check for undue noise and vibration Check for steam, water, air and oil leaks Check for gap piece and solute if necessary Check and replace all steam traps, air vents and check and replace all steam traps, air vents and check and clear and oils Check and grease all bearings and lubricate chain drives Check and teplace all steam traps, air vents and check and replace all steam traps, air vents and check and replace all steam traps, air vents and check and replace all steam traps, air vents and check and seafely valves Check and replace all steam traps, air vents and check and replace all indicator lamps and lubricate chain drives Check and replace all steam traps, air vents and check and grease all bearings and lubricate chain drives Check and replace all steam traps, air vents and check and setting Check and replace all steam traps, air vents and check and selectrical controls Check and replace all steam traps, air vents and check and Check and replace all steam traps, air vents and check and Check and replace all steam traps, air vents and check and Check and replace all steam traps, air vents and check and Check and replace all steam traps, air vents and check and Check and replace and adjust and steam and	tsQ
		ean plant and plant area	ID 6
		lean motor airways) 9I
		peck overload setting	12 C
		heck and tighten all nuts and bolts	14 C
	TIEM INSTRUCTION CHECK CO. 1 Check unit is running 2 Check for undue noise and vibration 3 Check for undue noise and vibration 4 Check tor steam, water, air and oil leaks 5 Check and teplace and selvers 6 Check and teplace and selvers 7 Check and teplace and selvers 8 Check and teplace and selver in the ecessary 9 Check and teplace and selver lamps and electrical controls 10 Check and teplace all steam rachine 11 Check and teplace all steam tape, air vents and check and 12 Check and teplace all seam frape, air vents and check and 13 Check and teplace all steam tape, air vents and check and 14 Check and teplace all steam tape, and electrical controls 15 Check and teplace all steam tape, and tother 16 Check and teplace all steam tape, and there are and check and 17 Check and teplace all steam tape, and tother 18 Remove covers and clean machine 19 Check and teplace all steam tape, and there are and check and 20 Check and teplace all steam tape, and there are all steam tape and there are all steam tape and the serions 21 Check and teplace all steam tape, and there are all steam to tell and the serions 22 Check and teplace and selling 23 Check and teplace and selling 24 Check and teplace and selling 25 Check and teplace and selling 26 Check and teplace and selling 27 Check and teplace and selling 28 Remove covers and telling 29 Check and teplace and selling 20 Check and teplace and selling 20 Check and teplace and selling 20 Check and teplace and telling 27 Check and telling 28 Check and telling 29 Check and telling 20 Check and telling 21 Check and telling 22 Check and telling 23 Check and telling 24 Check and telling 25 Check and telling 26 Check and telling 27 Check and telling 28 Check and telling 29 Check and telling 20 C		
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		Sheck and grease all bearings and lubricate chain drives	11 (
		eplace safety valves neck and replace all steam traps, air vents and check and	101
	Check on the description of the control of the co		
		Check tape guide tensioners	1 2
		Check A/C drive unit for smooth increase and decreasing in	9
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	or steam, water, air and oil leaks Old drive unit for smooth increase and decreasing in pe guide tensioners ap piece and adjust it necessary Indien fans on rolls afety valves Indiense all bearings and lubricate chain drives		Þ
		Check finger guard for correct operation (safety device)	ε
		Check for undue noise and vibration	2
		Check unit is running	L
COMMENTS	СНЕСК	иоттемі	M∃TI
	ller ironer	EDULE FOR: Steam Roll Ironer and electric ro	PCH
CODE: F - 01		E OF SERVICE : Laundry Equipment	qYT

Prepared by IS Gwamanda (Chief Artisan)

Contractor representative name:

Contractor name: Contractor Signature: