



KZN HEALTH

### KZN Health Intranet

HOME CORPORATE INFORMATION COMPONENTS DIRECTORY DISTRICT OFFICES HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

#### AdvertQuote



### Quotation Advert

Opening Date:

Closing Date:

Closing Time:

#### INSTITUTION DETAILS

Institution Name:

Province:

Department or Entity:

Division or section:

Place where goods / services is required:

Date Submitted:

#### ITEM CATEGORY AND DETAILS

Quotation Number:

Item Category:

Item Description:

Quantity (if supplies):

#### COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type:

Date:

Time:

Venue:

QUOTES CAN BE COLLECTED FROM:

QUOTES SHOULD BE DELIVERED TO:

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

Name:

Email:

Contact Number:

Finance Manager Name:

Finance Manager Signature:

No late quotes will be considered

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT OVER R30 000.00

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: SUNDUMBILI CHC

DATE ADVERTISED: 05 AUGUST 2021 CLOSING DATE: 17 AUGUST 2021 CLOSING TIME: 11:00

FACSIMILE NUMBER: 032 454 0121 E-MAIL ADDRESS: nozipho.mthembu2@kznhealth.gov.za

PHYSICAL ADDRESS: A 632 MSOMUHLE ROAD SUNDUMBILI T/SHIP MANDINI 4490

ZNQ NUMBER: SUN140/21/22

DESCRIPTION: SERVICING OF AIR CONDITIONING UNITS

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

CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.

Grid for CSD registration number

UNIQUE REGISTRATION REFERENCE

Grid for unique registration reference

DEPOSITED IN THE QUOTE BOX SITUATED AT (STREET ADDRESS)

TENDER BOX SITUATED AT THE MAIN ENTRANCE OF SUNDUMBILI CHC

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 grid

[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: **SUN140/21/22**

DESCRIPTION: **SUPPLY AND DELIVER SEVICING OF AIR CONDITIONING UNITS**

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
	153	SERVICING OF AIR CONDITIONING UNITS AT SUNDUMBILI CHC, AMATKULU PHT AND CLINICS				
		CIDB 1ME AND ABOVE IS REQUIRED TO QUOTE				
		NB: SUBMIT A CERTIFIED COPY OF CIDB CERTIFICATE				
		NB: QUOTE ON THE BREAKDOWN OF AIRCONS AND WRITE THE TOTAL QUOTATION PRICE ON THIS OFFICIAL PRICE PAGE				
		NB: SUBMIT A COPY OF SWORN AFFIDAVIT OR VALID B-BBEE CERTIFICATE AND TAX CLEARANCE CERTIFICATE				
		NB: ALSO ATTACH THE CSD SUMMARY REPORT REFLECTING CORE BUSINESS FAILURE TO COMPLY WITH ABOVE REQUIREMENTS WILL RESULT IN YOUR QUOTE BEING DISQUALIFIED				
		NB: IT IS ADVISABLE THAT THE TENDER DOCUMENTS BE PHYSICALLY DEPOSITED ON THE TENDER BOX SITUATED ON THE MAIN ENTRANCE AS EMAILS MAY BE DOWN DUE TO NETWORK PROBLEM OR LOAD SHEDDING				
VALUE ADDED TAX @ 15% (Only if VAT Vendor)						
TOTAL QUOTATION PRICE (VALIDITY PERIOD 60 Days)						

Does This Offer Comply With The Specification? Is The Price Firm?	Does The Article Conform To The S.A.N.S. / S.A.B.S. Specification? State Delivery Period E.G. E.G. 1day, 1week
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<p>Enquiries regarding the <u>quote</u> may be directed to:</p> <p>Contact Person: <b>NOZIPHO</b> Tel: <b>0324540066</b></p> <p>E-Mail Address: .....</p>	<p>Enquiries regarding <u>technical information</u> may be directed to:</p> <p>Contact Person: <b>BHORAT</b> Tel: <b>0324540066</b></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.....
  - 2.2. 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.
- 2.8. Are you or any person connected with the bidder presently employed by the state? [TICK APPLICABLE]

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
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- 2.8.2.1. If yes, did you attach proof of such authority to the quote document?
 

YES	NO
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- (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
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- 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
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- 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 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.

- 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) The institution has determined that a compulsory site meeting  **NO** take place
- (ii) Date  /  /  Time  Place

Institution Stamp:	Institution Site Inspection / briefing session Official  Full Name: .....  Signature: .....  Date: .....
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**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;<br>(ii) the name and address of the recipient;<br>(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;<br>(v) the official department order number issued to the supplier;<br>(vi) the value of the supply, the amount of tax charged;<br>(vii) the words tax invoice in a prominent place. |
|---|---|

**12. PATENT RIGHTS**

The supplier shall indemnify the **KZN Department of Health** (here 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 contract.
- 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**

SBD 6.1

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
<b>Total points for Price and B-BBEE must not exceed</b>	<b>100</b>

- 1.5 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:

$$P_s = 80 \left( 1 - \frac{P_t - P_{\min}}{P_{\min}} \right) \text{ Where}$$

- P<sub>s</sub> = Points scored for price of bid under consideration
- P<sub>t</sub> = Price of bid under consideration
- P<sub>min</sub> = 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	<input type="checkbox"/>	NO	<input type="checkbox"/>
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7.1.1 If yes, indicate:

- i) What percentage of the contract will be subcontracted.....%
- ii) The name of the sub-contractor.....
- iii) The B-BBEE status level of the sub-contractor.....

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:

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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Designated Group: An EME or QSE which is at least 51% owned by:	EME √	QSE √
Black people	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Black people who are youth	<input type="checkbox"/>	<input type="checkbox"/>
Black people who are women	<input type="checkbox"/>	<input type="checkbox"/>
Black people with disabilities	<input type="checkbox"/>	<input type="checkbox"/>
Black people living in rural or underdeveloped areas or townships	<input type="checkbox"/>	<input type="checkbox"/>
Cooperative owned by black people	<input type="checkbox"/>	<input type="checkbox"/>
Black people who are military veterans	<input type="checkbox"/>	<input type="checkbox"/>
OR		
Any EME	<input type="checkbox"/>	<input type="checkbox"/>
Any QSE	<input type="checkbox"/>	<input type="checkbox"/>

9. **DECLARATION WITH REGARD TO COMPANY/FIRM**

9.1 Name of company/firm:.....

9.2 VAT registration number:.....

9.3 Company registration number:.....

9.4 **TYPE OF COMPANY/ FIRM [TICK APPLICABLE BOX]**

- Partnership/Joint Venture / Consortium
- One person business/sole propriety
- Close corporation
- Company
- (Pty) Limited

9.5 **DESCRIBE PRINCIPAL BUSINESS ACTIVITIES**

9.6 **COMPANY CLASSIFICATION [TICK APPLICABLE BOX]**

- Manufacturer
- Supplier
- Professional service provider
- Other service providers, e.g. transporter, etc.

9.7 Total number of years the company/firm has been in business:.....

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 on 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) The information furnished is true and correct;
- ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;
- iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have –
  - (a) disqualify the person from the bidding process;
  - (b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
  - (c) cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;
  - (d) recommend that the bidder or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted by the National Treasury from obtaining business from any organ of state for a period not exceeding 10 years, after the *audi alteram partem* (hear the other side) rule has been applied; and
  - (e) forward the matter for criminal prosecution.

<p>WITNESSES</p> <p>1. ....</p> <p>2. ....</p>
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<p>.....</p> <p>SIGNATURE(S) OF BIDDERS(S)</p> <p>DATE: .....</p> <p>ADDRESS.....</p> <p>.....</p> <p>.....</p>
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ITEM	AREA: BARCODE AND NAME	UNIT	AMOUNT
<b>SUNDUMBILI COMMUNITY HEALTH CENTRE:</b>			
<b>X-RAY BUILDING</b>			
1.	SECURITY OFFICE	GMC	
2.	DOH1036526 PHARMACY STOREROOM	TCL	
3.	DOH1036528 X-RAY ROOM	NEOCOOL	
4.	DOCTORS OVERNIGHT ROOM	TCL	
<b>HUMAN RESOURCE PARKHOME</b>			
5.	DOH980163 TRANSPORT OFFICE	TCL	
6.	DOH980164 H R OFFICE	TCL	
7.	DOH980165 I T SERVER ROOM	TCL	
8.	DOH980167 H R OFFICE	FRAVEGA	
9.	DOH980168 FINANCE OFFICE	FRAVEGA	
10.	DOH980169 H R OFFICE	CARRIER	
<b>COMMUNITY HEALTH CENTRE</b>			
11.	DOH1036523 ROOM 12 DENTAL CLINIC	NEOCOOL	
12.	DOH1036524 ROOM 13 DENTAL CLINIC	TCL	
13.	DOH1036525 ROOM 15 PHARMACY BULK STORE	NEOCOOL	
14.	GENERAL WARD: ROOM G17 WAITING AREA OUTSIDE ROOM 24	TCL	
15.	DOH1036302 ROOM 24 DUTY ROOM	MIDEA	
16.	GENERAL WARD: ROOM 25	TCL	
17.	GENERAL WARD: ROOM 26	TCL	
18.	GENERAL WARD: ROOM G17 WAITING AREA OUTSIDE ROOM 25	TCL	
19.	GENERAL WARD: ROOM G17 WAITING AREA OUTSIDE ROOM 26	TCL	
20.	DOH1036534 ROOM 38 LAUNDRY ROOM	SIESTA	
21.	DOH1036541 ROOM27 DOCTORS OFFICE	DAIKIN	
22.	DOH1036558 ROOM 28 CONSULTATION ROOM 5	L G	
23.	DOH1036557 ROOM 29 CONSULTATION ROOM 4	GMC	
24.	DOH1036556 ROOM 30 CONSULTATION ROOM 3	GMC	
25.	DOH1036555 ROOM 31 CONSULTATION ROOM 2	GMC	
26.	DOH1036554 ROOM 32 CONSULTATION ROOM 1	L G	
27.	DOH1036553 ROOM 33 ISOLATION ROOM	L G	
28.	DOH1036541 ROOM 47	TCL	
29.	DOH1036516/5/4 ROOMS 77, 80 AND 81	DAIKIN MULTI	
30.	DOH1036517/8/9 ROOMS 78, 79 AND 82	DAIKIN MULTI	
31.	MATERNITY WAITING AREA: OPPOSITE ROOM 71	TCL	
32.	MATERNITY WAITING AREA: OPPOSITE ROOM 70	TCL	
33.	MATERNITY WAITING AREA: OPPOSITE ROOM 68	TCL	
34.	DOH1036510 ROOM 71 CONSULTING ROOM 1	CARRIER	
35.	DOH1036511 ROOM 70 EXAMINATION ROOM 1	CARRIER	
36.	DOH1036512 ROOM 69 EXAMINATION ROOM 2	CARRIER	
37.	DOH1148745 ROOM 52 COUNSELLING ROOM	TCL	
38.	DOH1036546 ROOM 66: AMN'S OFFICE	CARRIER	
39.	DOH1036507 ROOM 56: LABOUR WARD UNIT 1	TCL	
PAGE 1 SUB TOTAL			

<u>ITEM</u>	<u>AREA: BARCODE AND NAME</u>	<u>UNIT</u>	<u>AMOUNT</u>
40.	DOH1036507 ROOM 56: LABOUR WARD UNIT 2	TCL	
41.	ROOM 58 LABOUR WARD OFFICE	TCL	
42.	DOH1036508 ROOM 61: OPD DUTY ROOM / PRE L	TCL	
43.	DOH1036513 RECEPTION	LG	
44.	DOH1036521 ROOM 20 PUBLIC RELATIONS OFFICE	DAIKIN	
45.	DOH1036520 ROOM 21 PHARMACIST OFFICE	DAIKIN	
46.	DOH1036519 ROOM 23 PHARMACY DISPENSARY	CARRIER	
47.	PHARMACY DISPENSARY STORE ROOM 1	DAIKIN	
48.	PHARMACY DISPENSARY STORE ROOM 2	DAIKIN	
<b><u>FILE ROOM</u></b>			
49.	FILE ROOM UNIT 1	NEOCOOL	
50.	FILE ROOM UNIT 2	NEOCOOL	
51.	FILE ROOM UNIT 3	NEOCOOL	
<b><u>ICDM PARKHOME</u></b>			
52.	DOH980116 CONSULTATION ROOM 1	MIDEA	
53.	DOH980117 BLOOD ROOM UNIT 1	MIDEA	
54.	DOH980117 BLOOD ROOM UNIT 2	CARRIER	
55.	DOH980118 BLOOD ROOM UNIT 3	MIDEA	
56.	DOH1036531 CONSULTING ROOM 2	TCL	
57.	DOH1262130 VITAL SIGNS ROOM	TCL	
58.	DOH980121 OPERATIONAL MANAGERS OFFICE	CARRIER	
59.	DOH980122 CONSULTING ROOM	TCL	
60.	DOH980123 WAITING ROOM	TCL	
61.	DOH980124 DOCTORS CONSULTING ROOM 2	CARRIER	
62.	DOH980125 DOCTORS CONSULTING ROOM 1	MIDEA	
63.	DOH980126 CONSULTING ROOM 3	CARRIER	
<b><u>SOCIAL WORKERS PARKHOME</u></b>			
64.	DOH980160 NUTRITION	CARRIER	
65.	DOH980159 VCT CONSULTING	CARRIER	
66.	DOH980156 SASA DOCTOR	CARRIER	
67.	DOH980155 OUTREACH	CARRIER	
68.	DOH980154 SOCIAL WORKER	CARRIER	
69.	DOH980157 SOCIAL WORKER	TCL	
70.	DOH980158 VCT CONSULTING	TCL	
71.	DOH980161 NUTRITIONIST	CARRIER	
72.	DOH1148733 EMPLOYEE WELLNESS PRACTITIONER	TCL	
<b><u>EYE CLINIC PARKHOME</u></b>			
73.	DOH979348 EYE CLINIC WAITING AREA	INVENTOR	
74.	DOH980128 HEALTH AND SAFETY OFFICER	TCL	
75.	DOH980129 QUALITY ASSURANCE MANAGER	TCL	
76.	DOH980130 EYE CLINIC	MIDEA	
77.	DOH980131 REFRACTION ROOM	MIDEA	
78.	DOH980133 MDR OFFICE UNIT 1	TCL	
79.	DOH980133 MDR OFFICE UNIT 2	MIDEA	
PAGE 2 SUB TOTAL			

<u>ITEM</u>	<u>AREA: BARCODE AND NAME</u>	<u>UNIT</u>	<u>AMOUNT</u>
<b><u>MOBILE PARKHOME</u></b>			
80.	RECEPTION UNIT 1	TCL	
81.	RECEPTION UNIT 2	MIDEA	
82.	DOH980135 PHARMACY	FRAVEGA	
83.	DOH980136 AUDIOLOGY	TCL	
84.	DOH980137 OPERATIONAL MANAGER	CARRIER	
85.	DOH980138 LABORATORY	TCL	
86.	DOH980139 SCHOOL HEALTH	MIDEA	
87.	DOH980140 HUMAN RESOURCE DEVELOPMENT	TCL	
88.	DOH980141 LABORATORY	TCL	
<b><u>ARV PHARMACY PARKHOME</u></b>			
89.	ARV PHARMACY UNIT 1	TCL	
90.	ARV PHARMACY UNIT 2	TCL	
91.	DOH980144 DATA MANAGEMENT	TCL	
92.	DOH980145 I V FLUIDS STORE ROOM	INVENTOR	
93.	DOH980146 BULK STOREROOM 2 UNIT 1	TCL	
94.	DOH980147 BULK STOREROOM 1	CARRIER	
<b><u>MANAGEMENT PARKHOME</u></b>			
95.	DOH980103 MANAGEMENT SECRETARY	INVENTOR	
96.	DOH980105 ASSISTANT MANAGER NURSING PHC	MIDEA	
97.	DOH980105 PHC TRAINER OFFICE	MIDEA	
98.	DOH980106 CHIEF EXECUTIVE OFFICER	TCL	
99.	DOH980107 CHIEF HUMAN RESOURCE	DAIKEN	
100.	DOH980110 FINANCE MANAGER	MIDEA	
101.	DOH980111 EVALUATION AND MONITORING	TCL	
102.	DOH980112 SYSTEMS MANAGER	TCL	
103.	DOH980113 SUPPLIERS OFFICE	MIDEA	
104.	DOH979301 ACCOUNTS	TCL	
105.	DOH980102 BOARDROOM UNIT 1	SAMSUNG	
106.	DOH980102 BOARDROOM UNIT 2	TCL	
107.	DOH980109 DEPUTY MANAGER NURSING	TCL	
108.	DOH980108 INFORMATICS	TCL	
109.	DOH980104 MAINTENANCE MANAGER	TCL	
<b><u>KHOSELA</u></b>			
110.	DOH979318 PHYSIOTHERAPY	INVENTOR	
111.	AA804995 WAITING ROOM	TCL	
112.	DOH979366 STORE ROOM	TCL	
113.	DOH979367 OCCUPATIONAL THERAPIST	MIDEA	
114.	DOH979229 KHOSELA MALE RESIDENCE	MIDEA	
115.	DOH979237 KHOSELA FEMALE RESIDENCE	MIDEA	
<b><u>HTA SINIKITHEMBA CLINIC</u></b>			
116.	CONSULTING ROOM	DAYTEK	
117.	CONSULTING ROOM	DAYTEK	
PAGE 3 SUB TOTAL			

ITEM	AREA: BARCODE AND NAME	UNIT	AMOUNT
<b>NDULINDE CLINIC</b>			
118.	LABOUR WARD	L G	
119.	DRESSING ROOM	TCL	
120.	DATA CAPTURER	L G	
121.	CONSULTING ROOM 1	L G	
122.	CONSULTING ROOM 2	L G	
123.	CONSULTING ROOM 3	L G	
124.	PHARMACY	CARRIER	
<b>DOKODWENI CLINIC</b>			
125.	PHARMACY	CARRIER	
126.	DOH979654 FILE ROOM	YORK	
127.	DOH979655 TREATMENT ROOM	YORK	
128.	DOH979652 EMERGENCY ROOM	YORK	
129.	DOH979651 MAIN OFFICE	YORK	
130.	DOH979650 ACUTE	YORK	
131.	DOH979649 HTC COUNSELLING ROOM	YORK	
132.	DOH979646 CONSULTING ROOM 1 CHRONIC MEDICATION COLLECTION	YORK	
133.	DOH979645 CONSULTING ROOM 2 ACUTE CARE	YORK	
<b>ISITHEBE CLINIC</b>			
134.	DOH979842 MATERNITY ROOM	AIRTRONIC	
135.	DOH979851 CONSULTING ROOM 1 VITAL SIGNS MATER	AIRTRONIC	
136.	DOH979852 CONSULTING ROOM 2 A N C ROOM	AIRTRONIC	
137.	DOH979853 CONSULTING ROOM 3 IMCI	AIRTRONIC	
138.	DOH979854 CONSULTING ROOM 4 IMMUNIZATION	AIRTRONIC	
139.	DOH979855 OFFICE DUTY ROOM	NEOCOOL	
140.	DOH979856 CONSULTING ROOM 5 COUNSELLING ROO	AIRTRONIC	
141.	DOH979857 CONSULTING ROOM 6 DOCTORS ROOM	AIRTRONIC	
142.	DOH979858 CONSULTING ROOM 7 SCHOOL HEALTH	AIRTRONIC	
143.	DOH979 RECEPTION FILE ROOM	JET AIR	
144.	TREATMENT ROOM	AIRTRONIC	
145.	DOH979872 CONSULTING ROOM 8 EMERGENCY ROOM	AIRTRONIC	
146.	DOH979871 CONSULTING ROOM 9 MINOR AILMENTS	AIRTRONIC	
147.	DOH979870 CONSULTING ROOM 10 CHRONIC	AIRTRONIC	
148.	DOH1256196 CONSULTING ROOM 11 CHRONIC & TB	AIRTRONIC	
149.	DOH979867 CCMDD	AIRTRONIC	
150.	INFORMATICS	JET AIR	
151.	DOH979866 STORE 1 MAIN PHARMACY	TCL	
152.	DOH979865 OPERATIONAL MANAGER	JET AIR	
153.	DOH979864 DISPENSARY	TCL	
<b>ISITHEBE CLINIC PARKHOME</b>			
154.	CONSULTING ROOM 1	TCL	
155.	CONSULTING ROOM 2	TCL	
156.	KHETEMPILO	TCL	
157.	STOREROOM	TCL	
PAGE 4 SUB TOTAL			

ITEM	AREA: BARCODE AND NAME	UNIT	AMOUNT
<b>MACAMBINI CLINIC:</b>			
158.	DOH979489 PARKHOME ROOM 1	TCL	
159.	DOH1262723 PARKHOME ROOM 2	TCL	
160.	DOH1257454 DISPENSARY	MIDEA	
161.	RECEPTION	YORK	
162.	DOH979459 OFFICE 1 ROOM 2 OPERATIONAL MANAGER	ALASKA	
163.	CONSULTING ROOM 3 MINOR AILMENTS	ALASKA	
164.	DOH979461 DOOR 4 CONSULTING ROOM 4	ALASKA	
165.	LABOUR WARD	YORK	
166.	DOH1262704 ROOM 9 CHRONICS ISOLATION ROOM	TCL	
167.	DOH1257251 ROOM 10 MCWH	TCL	
168.	ROOM 11	YORK	
169.	ROOM 13	YORK	
<b>AMATIKULU PHT CENTRE:</b>			
170.	STORES GARAGE 1	AUX	
171.	STORES GARAGE 2	AUX	
172.	STORES STOCKROOM 1	AUX	
173.	STORES STOCKROOM 2		
174.	LIBRARY OFFICE C2	SIESTA	
175.	LIBRARY C4	SIESTA	
176.	LIBRARY C1	ALLIANCE	
177.	C9 HALL	CARRIER	
178.	C7 HALL	CARRIER	
179.	LECTURE ROOM AT KITCHEN	CARRIER	
180.	OFFICE	AUX	
181.	OFFICE	AUX	
182.	OFFICE	AUX	
183.	OFFICE	AUX	
184.	OFFICE	AUX	
185.	OFFICE	AUX	
186.	OFFICE	AUX	
187.	OFFICE	AUX	
188.	OFFICE	AUX	
189.	OFFICE	AUX	
190.	OFFICE	AUX	
191.	OFFICE	AUX	
192.	OFFICE	AUX	
193.	OFFICE	AUX	
194.	OFFICE	AUX	
<b>OHWEBEDE CLINIC:</b>			
195.	ROOM 2 PHARMACY STORE	CARRIER	
196.	ROOM 5 OPERATIONAL MANAGER	AIRTRONIC	
197.	ROOM 9 CONSULTING ROOM	AIRWELL	
198.	ROOM 10 MATERNAL CHILD WOMENS HEALTH	AIRWELL	
199.	ROOM 11 CHRONICS	AIRWELL	
200.	ROOM 12 TREATMENT ROOM	AIRWELL	
PAGE 5 SUB TOTAL			

<u>ITEM</u>	<u>AREA: BARCODE AND NAME</u>	<u>UNIT</u>	<u>AMOUNT</u>
<b><u>HLOMENDLINI CLINIC:</u></b>			
201.	DOH979734 ROOM 1 RECEPTION	LG	
202.	DOH979735 ROOM 2 TREATMENT ROOM	LG	
203.	DOH979737 ROOM 4 ACUTE CARE	LG	
204.	DOH979738 ROOM 5 ACUTE CARE	LG	
205.	DOH979739 ROOM 6 CHRONIC CARE	LG	
206.	DOH979748 ROOM 10 PHARMACY	NEOCOOL	
207.	ROOM 15 HCT	TCL	
208.	DOH979743 ROOM 19 MEDICAL STORE	LG	
<b><u>MANDINI CLINIC:</u></b>			
209.	FILE ROOM	TCL	
210.	RECEPTION	TCL	
211.	CONSULTING ROOM 1	TCL	
212.	CONSULTING ROOM 2	KELON	
213.	CONSULTING ROOM 3	NEOCOOL	
214.	CONSULTING ROOM 4	TCL	
215.	PHARMACY	FRAVEGA	
PAGE 6 SUB TOTAL			

PAGE 1 SUB TOTAL	
PAGE 2 SUB TOTAL	
PAGE 3 SUB TOTAL	
PAGE 4 SUB TOTAL	
PAGE 5 SUB TOTAL	
PAGE 6 SUB TOTAL	
PAGE 1 TO PAGE 6 SUB TOTAL TO QUOTATION PAGE	

**KINDLY NOTE:**

1. THE OPERATIONAL MANAGER, RESPONSIBLE PERSON OF THE DEPARTMENT OR OCCUPANTS OF AN AREA OR OFFICE IS TO BE INFORMED OF THE SERVICE PROCEDURE ON ARRIVAL AT THE FACILITY OR DEPARTMENT.
2. THE OPERATIONAL MANAGER, RESPONSIBLE PERSON OF THE DEPARTMENT OR OCCUPANTS OF AN AREA OR OFFICE IS TO COMPLETE THE SCHEDULE FOR AIR CONDITIONERS IN THAT DEPARTMENT OR FACILITY.
3. INSTALLATION NAME ON SCHEDULE IS TO CORRESPOND WITH ITEM AND DESCRIPTION ON LIST WHEN FORWARDING REPORT.



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

TYPE OF SERVICE : AIR CONDITIONING  
 SCHEDULE FOR : ROOM AIR CONDITIONERS - MAJOR SERVICE  
 SCHEDULE FREQUENCY :  
 REF : ACC  
 CODE : ACC1-003A

INSTALLATION NAME :  
 SERVICE PROVIDER :  
 REF :  
 ORDER No. :

P.M. SERVICE		RUNNING REPAIRS (Apply for V.O. as Applicable)				OTHER REPAIRS REQUIRED SUBMIT QUOTATION					
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TIME TAKEN	DESCRIPTION OF SPARES USED	QTY. EX SITE STOCK	QTY. EX FIRMS STOCK	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	QTY REQ.
1.	Check selector switch operation, all modes										
2.	Check thermostat operation										
3.	Clean filter media										
4.	Check and observe operation of reversing solenoid where applicable										
5.	Check compressor termination and overload klixon										
6.	Lubricate fan motor bearings where applicable										
7.	Check all "start" and/or "run" capacitors										
8.	Clean evaporator										
9.	Clean condenser										
10.	Test for refrigerant leaks/restrictions										

P.M. SERVICE		RUNNING REPAIRS (Apply for V.O. as Applicable)				OTHER REPAIRS REQUIRED SUBMIT QUOTATION					
ITEM	INSTRUCTION: CHECK, ADJUST, CLEAN AS REQUIRED	IN ORDER	OTHER NON-SPECIFIED RUNNING REPAIRS DONE	TIME TAKEN	DESCRIPTION OF SPARES USED	QTY. EX SITE STOCK	QTY. EX FIRMS STOCK	DESCRIPTION OF OTHER REPAIRS REQUIRED	EST. TIME REQ.	DESCRIPTION OF SPARES REQUIRED	QTY REQ.
11.	Check operation of resistance heater and overheat stats										
12.	Check de-icing stat where applicable										
13.	Check operation of baffle board and air vent/exhaust control										
14.	Check for vibration/undue noise										
15.	Scrape, treat and paint all rust including outside grille and architraves										
16.	Replace all perished or missing pipe insulation										
17.	Check that condensate drain is free of blockages										

I CERTIFY THAT THE SPECIFIED SERVICE WAS CARRIED OUT

NAME OF SERVICEMAN (BLOCK LETTERS):		SIGNATURE:	
NAME/S OF ASSISTANT/S: SEMI SKILLED:			
NAME/S OF ASSISTANT/S: UNSKILLED:			
COMPANY NAME (BLOCK LETTERS):			
TIME IN:	TIME OUT:	TIME ON SITE:	DATE:
FROM:	TO:	KM:	TOTAL KM:
NAME OF RESPONSIBLE OFFICIAL ON SITE:			SIGNATURE: