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Sikithi Sipho - ?



KZN HEALTH

## KZN Health Intranet

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## AdvertQuote



## Quotation Advert

Opening Date: 2021-12-07

Closing Date: 2021-12-14

Closing Time: 11:00

## INSTITUTION DETAILS

Institution Name: Grey's hospital

Province: KwaZulu-Natal

Department or Entity: Department of Health

Division or section: Central Supply Chain Management

Place where goods / services is required: Grey's Hospital

Date Submitted: 2021-12-07

## ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: GRS 3496/11/21

Item Category: Services

Item Description: One Year Contract to Service CRITICAL CARE Air Conditioning Units in Hospital: (Cath Lab, Radiology, X-Ray, CT Scanner, Labour Ward, Oncology, Switchboard, Main Kitchen Feeds Room, Ward M1 & Ward M2)  
(AS PER SPECIFICATION ATTACHED)

Quantity (if supplies): 10 Areas

## COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Compulsory Site Visit

Date: 2021-12-10

Time: 12:00

Venue: Maintenance Department

QUOTES CAN BE COLLECTED FROM: Departmental Website

QUOTES SHOULD BE DELIVERED TO: Grey's Hospital Tender Box / Fax: 033 897 3006

## ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Sipho Sikithi

Email: No Email / Fax: 033 897 3006

Contact Number: 033 897 3492

Finance Manager Name: Mrs. B.G Anderson

Finance Manager Signature:

No late quotes will be considered

CARS: 3496 / 11 / 21



health

Department:  
Health  
PROVINCE OF KWAZULU-NATAL

Grey's Hospital 201 Town Bush Road,  
Pietermaritzburg, 3201  
Private Bag X 9001,  
Pietermaritzburg, 3200

**ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS  
AT GREY'S HOSPITAL**

**PROJECT SPECIFICATIONS**

1. *NOTES TO TENDERERS*

1.1. SCOPE OF CONTRACT

This Contract is for the complete execution of the project indicated above.

1.2. CONTRACT DRAWINGS

This quotation document is to be read in conjunction with the drawings listed below which is issued together with this document.

Drawing No.: None

These drawings may be updated from time to time during the course of the Contract, and the Contractor must ensure at the time of the installation that he has the latest copy of all drawings. No claim will be considered for work, which requires to be changed due to the use of outdated drawings.

1.3. CONDITIONS OF CONTRACT AND PRELIMINARIES

1.3.1 PERIOD OF CONTRACT: ONE YEAR SERVICE CONTRACT

**ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS AT GREY'S HOSPITAL**

1.3.2 CONTRACT GUARANTEE:

The successful Tenderer will **NOT** be required to submit a contract guarantee.

1.3.3 GUARANTEE PERIOD

**The guarantee period for the structural work and all materials must be for a minimum of three (3) months from the date of first delivery.**

**The guarantee period for Electrical and Mechanical Installations shall be for a minimum of twelve (12) months from the date of first delivery.**

1.3.3 SITE AND MODE OF PROCEDURE

The work contained in this contract will be carried out on the site of the existing Institution.

The Contractor is advised that the existing premises will be occupied throughout the period of the contract.

Damage to existing buildings - Tenderers to note that any damages done or occurring to any of the buildings will be repaired at the expense of the contractor/ Tenderer.

The repairs must be to the satisfaction of the KwaZulu- Natal Department of Health.

**NB:** *Tenderers are advised to examine the drawings and visit the site prior to quoting and to acquaint themselves with the nature of the work to be done and access to the siting of the existing buildings etc., as no claim will be allowed on the grounds of ignorance of the conditions under which the work will be executed.*

1.3.4 SATISFACTORY INSTALLATION

The whole of the installation shall be carried out in accordance with the South African Bureau of Standards Code of Practice for the application of National Building Regulations, the KZNPA Standard Preambles to all Trades, the KZNPA General Electrical Specification, the South African Bureau of Standards Code of Practice for the Wiring of Premises and the Occupational Health and Safety Act 85 of 1993 as amended.

1.3.5 CERTIFICATE OF COMPLIANCE

On completion of the service, a "Test Certificate in accordance with procedures must be submitted to the office of the Chief Engineer –Department of Health: KwaZulu Natal.

1.3.6 **GENERAL**

The Bidder's / Contractors will be responsible for all masonry work associated with the electrical installation and making good of all work related to the electrical installation. The patching and painting must be to the satisfaction of the KwaZulu-Natal Department of Health.

2. **TECHNICAL SPECIFICATION**

2.1 **GENERAL**

THE TECHNICAL SPECIFICATION shall be read in conjunction with all other sections of the SPECIFICATION and cognisance shall be taken of the clauses relevant to this particular service, whether any specific clauses are referred to or not

2.2 The bidder shall submit accreditation certificate from ECB/DOL.

2.3 The Bidder shall submit Letter of Good Standing from Department of Labour.

3. **SCOPE OF WORK**

3.1. The work comprises of  
**MAJOR SERVICE AND REPAIRS**

- Clean and decontaminate air filters of indoor units including treatment with antibacterial spray
- Check Isolator switch
- Check the condition of the power supply cable
- Generally clean equipment covers
- Check mounting brackets
- Check conditions of evaporator coil – Clean with chemicals and decontaminate
- Check condition of condensing coil – Clean with chemicals and decontaminate
- Check condensate drip trays and drains – Treat for corrosion and decontaminate
- Condensate pump maintenance including decontamination of pump filter
- Check fan blades – Balance/ secure/ corrosion free/ chips and dents etc.
- Clean the fan blades for evaporator and condenser.
- Check – Head (HP) and suction (LP) pressure/ adjust refrigerant volume if required
- Check fan motor – Running freely/ true/ bearings/ oil where necessary.
- Check compressor – Suspended freely/ grommets and bushes condition/ overload protector/ over heating/ take amp. reading
- Check thermostat's switch and contactors – Operating/ elements/ exhaust/ damper/ wiring/ connections
- Check refrigeration system – Leaks/ tubing is clear of other components
- Check amp's – All amp readings comply with manufacturer's specification
- Clean weather seal – Leaks
- Observe operation in all its functions

- Check and tighten – Pipe fittings
- Treat for rust on outdoor Condensing units
- Measure on & off coil temperatures (outdoor & indoor)
- Clean equipment and area

**NOTE: The contractor shall carryout month to month service for a period of 12 months.**

**3.2** Supply report and certificate on completion of services, Maintenance Plan of one year and warrantee.

**3.3** The Bidder shall carry out all work according to the Standard Preambles to all Trades. The standard preambles can be obtained from Department of Health Facilities Management

**3.4** The Bidder shall submit accredited certificate for the technician to operate on Electric Machinery.

**3.5** The Bidder shall submit certified copy of Technician competence certificate.

**3.6** The Bidder shall submit the Letter of Good Standing from Department of Labour



QUOTATION FORM

ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS  
AT GREY'S HOSPITAL

ALTERNATIVES

It is required that the Contractor's main offer be in accordance with the specification. However, should Contractors wish to make alternative offers these must only be made on this form or copies thereof as necessary.

Note that all of the information required in this document must be supplied for all alternative offers as well.

Where the Contractor does not wish to submit alternatives, the word "NIL" shall be inserted against each section and the page signed by the Contractor.

ALTERNATIVE NO

ALTERNATIVE PRICE  
(IN WORDS)

DETAIL VARIATIONS FROM SPECIFICATION

DETAIL BENEFITS TO OWNER IN TERMS OF THE ALTERNATIVE OFFER

REMARKS

CONTRACTORS'S AUTHORISED SIGNATURE / FULL NAME AND ADDRESS OF FIRM

NAME IN BLOCK LETTERS \_\_\_\_\_

DATE \_\_\_\_\_



QUOTATION FORM

ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS  
AT GREY'S HOSPITAL

DEVIATIONS FROM SPECIFICATION

If the Contractor's main offer contains any deviations from the specification these deviations must be listed below:

Where no deviations from specification occur, the word "NIL" shall be entered under Deviation, and the page signed by the Contractor.

CLAUSE NO	DEVIATION

CONTRACTOR'S AUTHORISED SIGNATURE

\_\_\_\_\_

FULL NAME AND ADDRESS OF FIRM:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

NAME IN BLOCK LETTERS: \_\_\_\_\_

DATE: \_\_\_\_\_



PROVINCE OF KWAZULU-NATAL  
DEPARTMENT OF HEALTH

ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS  
AT GREY'S HOSPITAL

SCHEDULE OF RATES

3.1 ITEMS AND PRICING

The Department reserves the right to place an order for any quantities of items included in the Schedules. The Schedule of Rates must also not be assumed to include and describe every detail of the supply requirement, but must be taken and read in conjunction with the other parts of the document. Thus the supplier shall not have claim for further payment in respect of any order which may be described or implied in the contract, although apparently no corresponding items are given in the Schedule of Rates. The supplier shall be deemed to have satisfied himself before quoting as to the correctness and sufficiency of his quote for the contract and of the rates and prices stated in the Schedule of Rates.

3.2 TAX AND DUTIES

Prices, quoted and paid, must include all customs, excise and import duties, and any other tariffs or taxes levied by the government or statutory body having jurisdiction on the goods provided under this contract, **including Value Added Tax (applicable to the current rate).**

3.3 RATES

Except where provision is made in the Schedule of Rates, the rates and prices inserted shall be the full rates and prices for the service delivered described under the respective items and shall cover all labour, transport, overhead charges and profit, etc. as well as the general liabilities, obligations and risks arising out of the Conditions of Contract, the overhead charges and profit being spread proportionately over the rates of the relative items in the Schedule of Rates.



**SCHEDULE OF RATES**

**WORK TO BE DONE AND SCHEDULE OF PRICES:**

Item	DESCRIPTION:	UNIT	QTY	RATE/ UNIT		TOTAL	
				R	c	R	c
	<p><b>ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS AT GREY'S HOSPITAL</b></p>						
	<p><b>NOTES:</b>                      All items to be priced fully inclusive of all charges: e.g. labour, plant, profit, etc., but <b>excluding</b> Value Added Tax.                      The Administration reserves the right to negotiate prices in the Bill of Quantities.                      All materials used in this contract shall be that which is specified, or other approved by the Department of Health.                      Contractors are advised to visit site to acquaint themselves with the site and the layout of the institution as no claims on the grounds of ignorance of the locality/siting of the institution will be entertained later.                      Contractors are informed that living on the institutions premises during the contract is not allowed and arrangements for accommodation will have to be allowed for.</p>						
	<p><b><u>INSTITUTION:</u></b>  <b>ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS AT GREY'S HOSPITAL</b></p>						
1)	MAJOR SERVICE AND REPAIRS TO DOMESTIC AIRCON UNITS IN CRITICAL AREAS (CATH LAB,RADIOGRAPHY,CT SCANNER,X RAY ,LABOUR WARD,ONCOLOGY,M1 ,M2,MAIN KITCHEN STORE ROOM AND FEEDS ROOM,SWITCHBOARD		50				
2)	CONSUMABLES		SUM				
3)	LABOUR AND TRAVELLING (MONTH TO MONTH VISIT FOR PERIOD OF 12 MONTHS CONTRACT		SUM				
4)	SAFETY FILE		01				
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
13)							
Carried To Collection Summary				PS 1		R	



**COLLECTION SUMMARY**

**INSTITUTION:** GREYS HOSPITAL  
**PROJECT DESCRIPTION:** ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS AT GREY'S HOSPITAL

**NOTE:**

THIS COLLECTION SUMMARY MUST BE COMPLETED IN FULL BY THE CONTRACTOR AND RETURNED TOGETHER WITH THE QUOTATION FORM.

Collection Summary PS 1	R	
<b><u>SUB-TOTAL:</u> CARRIED TO QUOTATION FORM</b>	R	

**IMPORTANT**  
*THIS FORM IS ONLY TO BE INCLUDED AND COMPLETED WHEN APPLICABLE TO THE QUOTATION.*

**OFFICIAL BRIEFING SESSION / SITE INSPECTION CERTIFICATE**

Site/building/institution involved: **GREY'S HOSPITAL**  
Quotation No.:  
Service: **ONE YEAR SERVICE CONTRACT TO DOMESTIC AIRCONDITIONING UNITS IN CRITICAL AREAS AT GREY'S HOSPITAL**

THIS IS TO CERTIFY THAT..... OF (STATE NAME OF TENDERER)  
..... VISITED AND INSPECTED THE SITE ON  
..... (DATE) AND IS THEREFORE FAMILIAR WITH THE CIRCUMSTANCES AND  
THE SCOPE OF THE SERVICE TO BE RENDERED.

.....  
**SIGNATURE OF TENDERER OR AUTHORISED REPRESENTATIVE**

DATE : .....

.....  
**SIGNATURE OF DEPARTMENTAL REPRESENTATIVE**

**DEPARTMENTAL STAMP:**

DATE : .....

## STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00 incl VAT

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT: .....

DATE ADVERTISED: ..... FACSIMILE NUMBER: **033 897 3006** ..... EMAIL: **NO EMAIL** .....

ENQUIRIES REGARDING THE QUOTE: ..... CONTACT NUMBER: .....

ENQUIRIES REGARDING TECHNICAL INFORMATION: ..... CONTACT NUMBER: .....

PHYSICAL ADDRESS: .....

QUOTE NUMBER: ..... CLOSING DATE: ..... CLOSING TIME: **11:00**

DESCRIPTION: .....

THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO MAY RESULT IN YOUR OFFER BEING DISQUALIFIED)

NAME & ADDRESS OF BIDDER (FIRM)	
NAME OF BIDDER:	DATE:
PHYSICAL ADDRESS:	EMAIL ADDRESS:
CONTACT NUMBER:	FACSIMILE NUMBER:
SIGNATURE OF BIDDER:	SARS PIN:
[By signing this document, I hereby agree to all terms and conditions]	CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.: ↓
UNIQUE REGISTRATION REFERENCE: ↓	

Does this offer comply with the specification?	State delivery period, e.g. <i>1day, 1week</i>
Is the price firm?	All delivery costs must be included in the quoted price

Item No	Quantity	Description	Brand & model	Country of manufacture	Price	
					R	c
<b>VALUE ADDED TAX @ 15% (Only if VAT Vendor)</b>						
<b>TOTAL QUOTATION PRICE (VALIDITY PERIOD 60 Days)</b>						

1. **SPECIAL CONTRACT CONDITIONS OF QUOTATIONS**
- 1.1. The Department is under no obligation to accept the lowest or any quote.
- 1.2. The Department reserves the right to communicate in writing with vendors in cases where information is incomplete or where there are obscurities regarding technical aspects of the offer, to obtain confirmation of prices or preference claims in cases where it is evident that a typing, written, transfer or unit error has been made, to investigate the vendor's standing and ability to complete the supply/service satisfactorily.
- 1.3. **ALL DECISIONS TAKEN BY THE DEPARTMENT ARE FINAL, INCLUDING THE AWARD OF THIS QUOTATION.**
- 1.4. 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.
- 1.5. The bidder must ensure the correctness & validity of the quotation:
  - (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
  - (ii) it is the responsibility of the bidder to confirm receipt of their quotation and to keep proof thereof.
- 1.6. 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.
- 1.7. This quotation will be evaluated based on the 80/20 points system, specification, correctness of information and/or functionality criteria. All required documentation must be completed in full and submitted.
- 1.8. Offers must comply strictly with the specification.
- 1.9. Only offers that meet or are greater than the specification will be considered.
- 1.10. Late offers will not be considered.
- 1.11. Expired product/s will not be accepted. All products supplied must be valid for a minimum period of six months.
- 1.12. Used/ second-hand products will not be accepted.
- 1.13. A bidder not registered on the Central Suppliers Database or whose verification has failed will not be considered.
- 1.14. All delivery costs must be included in the quoted price for delivery at the prescribed destination.
- 1.15. 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.
- 1.16. In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- 1.17. In the event of a bidder having multiple quotes, only the cheapest according to specification will be considered.
- 1.18. Verification will be conducted to identify if bidders have multiple companies and are cover-quoting for this bid.
- 1.19. In such instances, the Department reserves the right to immediately disqualify such bidders as cover-quoting is an offence that represents both corruption and acquisition fraud.
2. **SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF THIS QUOTATION.**
- 2.1. 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.
- 2.2. 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.
- 2.3. The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated.
- 2.4. Quotations submitted must be complete in all respects; however, where it is identified that information in a bidder's response is incomplete in any respect, the said supplier meets all specification requirements and is lowest to quote, the Department reserves the right to request the bidder to complete/submit such information.
- 2.5. Any alteration made by the bidder must be initialled. Failure to do so may render the response invalid.
- 2.6. Use of correction fluid is prohibited and may render the response invalid.
- 2.7. Quotations will be opened in public as soon as practicable after the closing time of quotation.
- 2.8. Where practical, prices are made public at the time of opening quotations.
- 2.9. 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.
- 2.10. The Department is under no obligation to pay suppliers in part for work done if the supplier can no longer fulfil their obligation.
3. **SPECIAL INSTRUCTIONS REGARDING HAND-DELIVERED QUOTATIONS**
- 3.1. Quotations shall be lodged at the address indicated no later than the closing time specified for their receipt and in accordance with the directives in the quotation documents.
- 3.2. 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.
- 3.3. 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.
- 3.4. 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.
- 3.5. 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.
- 3.6. Quotation documents must not be included in packages containing samples. Such quotations may be rejected as being invalid.

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<sup>2</sup>): .....
- 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. [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? YES  NO

*(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);  
 b) any municipality or municipal entity;  
 c) provincial legislature;  
 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.