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KWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA

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AdvertQuoteKWAZULU-NATAL PROVINCE
HEALTH
REPUBLIC OF SOUTH AFRICA**Quotation Advert**

Opening Date: 2021-07-27 **28**

Closing Date: 2021-08-03

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: 2021-07-27

ITEM CATEGORY AND DETAILS

Quotation Number: ZNQ: GRS 742/06/21

Item Category: Goods

Item Description: (a) Printer with scanner

Quantity (if supplies): (a) 1 unit

COMPULSORY BRIEFING SESSION / SITE VISIT

Select Type: Not Applicable

Date:

Time:

Venue:

QUOTES CAN BE COLLECTED FROM: Departmental website

QUOTES SHOULD BE DELIVERED TO: Grey's Hospital, 201 Town bush Road, PMB, 3201

ENQUIRIES REGARDING THE ADVERT MAY BE DIRECTED TO:

Name: Pearl Msomi

Email: no email

Contact Number: 033 897 3482

Finance Manager Name: Mrs B.G Anderson

Finance Manager Signature:

No late quotes will be considered

GRS 7492/06/21

M **BROTHER MFC-L2740DW 4-IN-1 MONO LASER MULTIFUNCTION**

Value Meets Reliability:

- Duplex Print, Duplex Copy, Duplex Scan, Fax
- 30 Pages per Minute
- USB / Ethernet / Wireless
- 64MB Memory
- 250 Sheet Paper Tray
- 35 Sheet Auto Document Feeder
- 6.8cm Touch Screen
- SME & Corporate
- Toner: TN-2355 (2,600 pages)
- Drum: DR-2305 (12,000 pages)

Office copy!



A4 04/06/2021

CODE MFC-L2740DW DESCRIPTION Brother MFC-L2740DW 4-in-1 Mono Laser Multifunction

brother at your service **LASER**

BRI **SM**

The A3 All-in-One

- A3 & A4
- 35 Minute
- USB / Ethernet
- 128MB Memory
- 250 Sheet
- Manual Feeder
- 35 Sheet
- Home & Office

A3 CODE MFC-L3530

brother **BRD**

BROTHER MFC-L2740DW 4-IN-1 FOLIO B1 LSPR

DECLARATION OF INTEREST

- 1. Any legal person, including persons employed by the state, or persons having a kinship with persons employed by the state...
2. In order to give effect to the above, the following questionnaire must be completed and submitted with the quote.

2.1. Full Name of bidder/representative... 2.4. Company Registration Number...
2.2. Identity Number... 2.5. Tax Reference Number...
2.3. Position occupied in the Company... 2.6. VAT Registration Number...
2.7. The names of all directors / trustees / shareholders / members...
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:
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?
2.8.2.1. If yes, did you attach proof of such authority to the quote document?
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?
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?
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?
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?
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

"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.

"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.