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KZN HEALTH

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DISTRICT OFFICES

KZN Health > Components > Supply Chain Management

AdvertQuote

KWAZULU-NATAL PROVIN HEALTH REPUBLIC OF SOUTH AFRICA	Quotation Advert	
Opening Date:	2021-10-19	
Closing Date:	2021-10-26	0000
Closing Time:	11:00	
INSTITUTION DETAILS		
Institution Name:	Eshowe hospital	V
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	Eshowe Hospital	
Date Submitted	2021-10-18	110
ITEM CATEGORY AND DETAILS		CLITA
Quotation Number:	ZNQ: ESW/78/22	
Item Category:	Goods	V
Item Description:	Delivery of: Printers toner catridges and drums for the period of 24 months	
Quantity (if supplies)		
COMPULSORY BRIEFING SESSION /	SITE VISIT	
Select Type:	Not Applicable	V
Date:	N/A	~~loon
Time:	N/A	
Venue:	N/A	
	Y	
QUOTES CAN BE COLLECTED FROM:	Eshowe District Hospital/KZN Health websites	And the second desired to the second desired
QUOTES SHOULD BE DELIVERED TO:	Eshowe District Hospital	Action in the second in the se
ENQUIRIES REGARDING THE ADVER	T MAY BE DIRECTED TO:	
Name:	Zulu B	
Email:	bonga.zulu@kznhealth.gov.za	
Contact Number:	0354734664	
Finance Manager Name:	Mrs. P.G Biyela	
Finance Manager Signature:	PMOMME.	

ESHOWE HOSPITAL

Bids Specification Committee

SPEC NO.: ESH-G7-2021/22

ESW NO.:....

SUPPLY AND DELIVERY OF: PRINTER'S TONER CARTRIDGE(S) AND DRUM(S) TO: ESHOWE HOSPITAL FOR THE PERIOD OF 24 MONTHS

Full description of item/s:

- ✓ TONER CARTRIDGE -Extra High Yield Toner, Laser, Approx. 7000 A4 Pages @5% Declared Yield Value in accordance with ISO and SABS Approved, Black, Shelf life: 2 years, ORIGINAL for Brother HL5240, Laser Printer
- ✓ TONER CARTRIDGE Print Technology: Laser, approximately 8000 A4 pages @ 5⁰/₀ declared yield valve in accordance with ISO and SABS approved, Black in colour, Laser cartridge size: extra high yield print/toner cartridge, Shelf Life-2years, <u>ORIGINAL</u> for <u>brother HL-5350/5340</u> laser printer
- ✓ DRUM UNIT Printer Drum, Laser, Black, 1 year or higher <u>ORIGINAL</u> for Brother HL5240, Laser Printer
- ✓ DRUM UNIT Printer Drum, Laser, Black, 1 year or higher <u>ORIGINAL</u> for Brother HL5340, Laser Printer
- ✓ DRUM UNIT Photoconductor kit ORIGINAL for Lexmark E260 printer

Instruction to Bidders.

- The Bidder is required to make comments on section A and B about service(s) and item(s) the Bidder is prepared to offer:
- All pages must be fully signed
- Failure to sign and comment may disqualify the Bidder
- <u>Fully completed form</u> must be returned back with the Quotation Documents and other supporting documents
- Enquiries regarding quote may be directed to Mrs PG Biyela at 035 473 4598
- Enquiries regarding technical information may be directed to: Mr Bonga Zulu 035 473 4500. Ext. 4664
- All document should be faxed, emailed and hand delivered to tender box of Institution.

(035 474 9439, bonga.zulu@kznhealth.gov.za, 40 Kangela Street, Eshowe, 3815

SECTION A: SPECIFICATION

- 1. ITEM ON THIS BID
 - A. SUPPLY AND DELIVERY OF: PRINTER'S TONER CARTRIDGE(S) AND DRUM(S) TO: ESHOWE HOSPITAL FOR THE PERIOD OF 24 MONTHS

BIDDER'S COMMENTS:	

TONER CARTRIDGE -Extra High Yield Toner, @5% Declared Yield Value in accordance with IS Shelf life: 2 years, ORIGINAL for Brother HL52 BIDDER'S COMMENTS:	SO and SABS Approved, Black,
■ TONER CARTRIDGE - Print Technology: Laser @ 5º/₀ declared yield valve in accordance with IS in colour, Laser cartridge size: extra high yield polyears, ORIGINAL for Brother HL-5350/5340 la	O and SABS approved, Black rint/toner cartridge, Shelf Life-
BIDDER'S COMMENTS:	
 DRUM UNIT - Printer Drum, Laser, Black, 1 yea Brother HL5240, Laser Printer BIDDER'S COMMENTS: 	ar or higher <u>ORIGINAL</u> for
■ DRUM UNIT - Printer Drum, Laser, Black, 1 year Brother HL5340, Laser Printer BIDDER'S COMMENTS:	ar or higher <u>ORIGINAL</u> for
■ DRUM UNIT - Photoconductor kit <u>ORIGINAL</u> f	or Lexmark E260 printer
BIDDER'S COMMENTS:	
This bid requires that all bid prices offered are firm and all costs (inclusive of V.A.T) must be included on BIDDER'S COMMENTS:	for the duration of a contract
	4.

2.

item(s) on t BIDDER'S C			
The Item(s) BIDDER'S C	on this Bid must be DMMENTS:	according to SA	BS and/ Approved
	to deliver/ Order by	-	er the item on this Bid as per the Hospital
✓ The De ✓ Sample	partment shall not be s must be clearly mark Name of the Compar Item Description Brand Name Bid number re to comply will sure	obliged to pay for ked ny	
BIDDER'S C	OMMENTS:		
		· · · · · · · · · · · · · · · · · · ·	
	Eshowe District Hos		24 Months Service Level Agreem
-			
	N-8.		

8.	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: ✓ if the supplier fails to deliver any or all of the goods within the period(s) specified in the contract, or within any extension thereof granted by the purchaser ✓ If the supplier, in the judgment of the purchaser, has engaged in corrupt or fraudulent practices in competing for or in executing the contract. BIDDER'S COMMENTS:
9.	In emergency cases, the Department of Health reserves the right to request the successful bidder/s to effect deliveries at any given time including Saturdays, Sundays and public holidays BIDDER'S COMMENTS:
10.	(i) For TONER CARTRIDGE ORIGINAL for Brother HL5240, Laser Printer the total estimated usage for the duration of Contract is: 43 units (ii) For TONER CARTRIDGE, ORIGINAL for brother HL-5350/5340 laser printer, Laser Printer the total estimated usage for the duration of Contract is: 11 units (iii) For DRUM UNIT ORIGINAL for Brother HL5240, Laser Printer, Laser Printer, the total estimated usage for the duration of Contract is:13 units (vi) For DRUM UNIT, ORIGINAL for Brother HL5340, Laser Printer, Laser Printer the total estimated usage for the duration of Contract is: 02 units (v) For DRUM UNIT ORIGINAL for Lexmark E260 printer, Laser Printer, the total estimated usage for the duration of Contract is: 04 units The Eshowe Hospital is under no obligation to purchase any stock, which is in excess of the indicated quantities of each item. The quantities reflected in the bid forms are estimated quantities and no guarantee is given or implied as to the actual quantity which will be ordered. BIDDER'S COMMENTS:
	BIDDER 3 COMMENTS.

				ESW NO	D.:
11.	The Eshowe Hospital also outside the contract if: a) The minimum packing than that of an institution! b) The item(s) are urgentle; An emergency arises. d) The Bidder fails to deli	or minimum o s requirement. y required and	order quantity specif	ied by the co	ontractor be more
	BIDDER'S COMMENTS:				
12.	The Bidder must quote Quotation) BIDDER'S COMMENT		g/ unit of issue as p	er (Refer to	attached
	WWW.Managham.		***************************************	- 200	
13.	The Quantities to be del Hospital and will be on a BIDDER'S COMMENT	the Instructio			
14.	Only Bidders whose cor Supply/ Servicing of the BIDDER'S COMMENT	required iten			
15.	Payment will be made so by Eshowe District Hosp BIDDER'S COMMENT	pital	30 Days from the c	late the Val	id invoice received
					· · · · · · · · · · · · · · · · · · ·

ESW	NO	.:.							٠.		
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SECTION B: CONDITIONS OF THIS BID

THE BIDDER IS REQUIRED TO COMMENT BY TICKING ONLY ONE BLOCK PER ROW (CLAUSE) BELOW

			Comment: I Comply?
nse		TICK ONE	(v)
Clause No.	Description	YES	NO
aE1	The Supplier must supply product that is new, no defect, product of the most recent or current models, and that incorporate all recent improvements in design and materials.		
aE2	Bidders must submit their offers in line with the bid specifications. Offers exceeding specification are also deem to be in line with the specification. NB: Failure to comply shall invalidate the bid	The state of the s	
aE3	Bids must be for supply ex duty paid stocks held in the Republic of South Africa during the contract period. The Eshowe Hospital is under no obligation to purchase any stock, which is in excess of the indicated quantities of each item. The quantities reflected in the bid forms are estimated quantities and no guarantee is given or implied as to the actual quantity which will be ordered.		
.:	The Eshowe Hospital also reserves the right to purchase its requirements elsewhere outside the contract if: a) The minimum packing or minimum order quantity specified by the contractor be more than that of an institution's requirement. b) The item(s) are urgently required and not immediately available. c) An emergency arises.		
aE4	 d) The Bidder fails to deliver the required items as per instruction to deliver 		
aE5	The Supplier must honour the proposed delivery date and any delays must be approved by Eshowe District Hospital. The Eshowe District Hospital may then extend the delivery date, if and as it deems fit. Should the Contractor fail to supply the offer within the time stated in his bid, or within the extended time allowed to him, the Eshowe District Hospital reserves the right to cancel the order		
aE6	Product(s) shall be delivered on Weekdays between 07:30 and 16:00. No goods or service will be received on Saturdays, Sundays and public holidays.		
aE7	The Supplier must comply with the General Conditions of Contract by Treasury Department, Environmental Management Act no.107 of 1998, Occupational Health and Safety Act no.83 of 1995, Food, Cosmetics and Disinfectants Act no.54 of 1972, Hazardous Substances Act no.15 of 1973 and other relevant regulations		The second control con
aE8	The Bidder must specify the product code or catalogue number and Brand name of the item willing to offer		
aE9	All applicable Items on this bid (quote) must be SABS and ISO Approved.		

ESW NO	.:
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		Bidder'	s Comment:
as I		Offer w	ill Comply?
Clause No.		TICK OF	lE(√)
S Sa	Description	YES	NO
aE10	The Bidder must specify the country of Manufacture on Official Price Page		
	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:		
	 ✓ if the supplier fails to deliver any or all of the goods within the period(s) specified in the contract, or within any extension thereof granted by the purchaser ✓ If the supplier, in the judgment of the purchaser, has engaged in 		at the second se
aE11_	corrupt or fraudulent practices in competing for or in executing the contract.		
	Where the sample is required, it must be submitted at the Bidders' expense		
	and risk for the purpose of visual screening of products during the		
	evaluation phase. Hence, all samples submitted for visual screening must		
	be a true representation of the product which will be supplied.		
aE12	NB: Sample should be marked with: Company name and contacts, ZNQ number, Brand Name, Product Code		
aE13	This Bid must be accompanied by samples for each product quoted for.		
	 ✓ Sample shall be supplied by the Bidder at his/her own risk and expense ✓ The Department shall not be obliged to pay for such sample ✓ Samples must be clearly marked 		
	Name of the Company Item Description		
	Brand Name		
	Bid number		
	NB: Failure to comply will surely invalidate the Bid.		
aE14	Document of Undertaking		
	In the event of the Bidder not being the actual manufacture and will be sourcing the product(s) from another company, a letter from that company (i.e.)/ supplier(s) confirming firm's supply arrangement(s) including lead times in this regard, must accompany your bid at closing date and time. The said company/ manufacturer/ supplier issuing such letter must confirm that it has familiarized itself with item description/ specification and bid conditions.		
	If the Bidder is the Manufacturer must also indicate in writing (attach letter). The institutional Bid Evaluation might request to visit the Bidder's warehouse/ factory prior making award to confirm if the Bidder is actually the Manufacturer.		
	NB: Failure to comply will result to the bid being passed over		

ESW	N	O.	::	٠.	٠.	٠	٠.	٠.		٠.			٠.			•
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Packaging:

aE15

The following information must be clearly and indelibly printed on all inner and outer packaging:-

- > The product name, product code as relevant, quantity of contents (e.g box of 100units), expiry date (if applicable).
- > Size of the product, date of manufacture and trademark or trade name of the manufacture
- ➤ All products must be packed in acceptable containers/packets/box/bale, where applicable, specifically developed for the product
- > The word "sterile" (where applicable)
- > The warning information, instructions and conditions under which the product must be stored
- ➤ Labels for consumable items must be clearly marked for occupational health and safety purposes

DECLARATION

I ACCEPT THAT THE STATE MAY REJECT THE	BID OR ACT	AGAINST N	JE IN TERM	S OF PARAGR	APH 2
OF THE GENERAL CONDITIONS OF CONTRAC	T SHOULD T	THIS DECLA	RATION PRO	OVE TO BE FA	LSE.
NAME OF THE BIDDER (COMPANY):					• • • • • • • • • • • • • • • • • • • •
CENTRAL DATABASE REGISTRATION NUMBE	R:				
UNIQUE REGISTRATION REFERENCE NUMBE	R (36 DIGIT	S):			**********

BIDDER'S AUTHORIZED REPRESENTATIVE NA					
Date:	• •	*			

OFFICIAL PRICE PAGE FOR QUOTATIONS		

DESCRIPTION: SUPPLY AND DELIVERY OF: PRINTER'S TONER CARTRIDGE(S) AND DRUM(S) TO: ESHOWE HOSPITAL FOR THE PERIOD OF 24 MONTHS

SIGNATURE OF THE BIDDER:	DATE:
CAPACITY UNDER WHICH THIS QUOTE IS SIGNED:	•••••••

ITEM	DESCRIPTION	Packaging /	<u>Brand</u>	Country of	Price Per
NO.		Unit of Issue	and and	<u>Manufacture</u>	Packaging /
			<u>Model</u>		<u>Unit of Issue</u>
					Excl. Vat
01	TONER CARTRIDGE -Extra				
	High Yield Toner, Laser, Approx.				
	7000 A4 Pages @5% Declared				
	Yield Value in accordance with				
	ISO and SABS Approved, Black,				
	Shelf life: 2 years, <u>ORIGINAL</u> for	Unit			
	Brother HL5240, Laser Printer				
02	TONER CARTRIDGE - Print			************	
	Technology: Laser, approximately	***************************************			
	8000 A4 pages @ $5^{0}/_{0}$ declared yield			1	
	valve in accordance with ISO and				
	SABS approved, Black in colour,				
	Laser cartridge size: extra high			Act of the second	
	yield print/toner cartridge, Shelf				
	Life-2years, ORIGINAL for	Unit		ia, pieninga, para pi	
	brother HL-5350/5340 laser			And the second s	
	printer			4.00	
03	DRUM UNIT - Printer Drum,			**************************************	
	Laser, Black, 1 year or higher				.]
	ORIGINAL for Brother HL5240,	Unit			
	Laser Printer				
04	DRUM UNIT - Printer Drum,				
	Laser, Black, 1 year or higher		;		
	ORIGINAL for Brother HL5340,	Unit			
	Laser Printer				
05	DRUM UNIT - Photoconductor kit	Unit		_	
	ORIGINAL for Lexmark E260		. 1 -		
	printer				

	ESW NO.:	• • • • •
SUPPLIER VAT NUMBER (IF VAT VENDOR):		
VALIDITY PERIOD: 60 DAYS.		
Does this offer comply with specification?	Does the article conform to S.A.N.S. /	
	S.A.B.S. Specification?	
Is the price firm?	Delivery period will be specified in the SLA	

Enquiries Regarding Quote may be directed to:	Enquiries Regarding technical information may
Contact Person: Mrs P.G. Biyela	be directed to:
 Tel: 035 473 4598	Contact Person: Mr. B. Zulu
Email Address: gugu.biyela@kznhealth.gov.za	Tel: 035 473 4664/4720
Email Address. gugu.biyela@kzimeaith.gov.za	Email Address: bonga.zulu@kznhealth

DECLARATION OF INTEREST.

法国际的 医多种性 化二氯甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基	학교 구선 회에 선생님 사람들이 어떻게 되었다. 그 사람들이 사용하는 사람들이 되었다. 나는 사람들이 되었다.		사용 통합 경험 소리 시간 사람들은 가장 하는 것이 되었다. 그 사람들은 그 그 등 가장 하는 사람들은 사람들이 되었다. 그 가장 하나 가장 하는 사람들이 없다.
relationship, may make quote or proposal). In vi by the state, or to person position in relation to the the bidder is employed the legal person on evaluation and or adjustice behalf the dec	an offer or offers in terms of this inview of possible allegations of favouritins connected with or related to them, evaluating/adjudicating authority which by the state; and/or whose behalf the bidding document udication of the quote(s), or where it larant acts and persons who are invo	tation to quote (includes a price q sm, should the resulting quote, or it is required that the bidder or hi ere- is signed, has a relationship with is known that such a relationship of lived with the evaluation and or ad	
In order to give effect to	the above, the following questionnair	e must be completed and submitte	ed with the quote.
2.2. Identity Number:	epresentative he Company (director, trustee, share	2.5. Tax Reference Num	ıber:
employee / persal nu 2.8. Are you or any perso 2.8.1. If so, furnish the follo Name of person / dire Name of state instituti Position occupied in the 2.8.2. If you are presently in the public sector	mbers must be indicated in paragrap n connected with the bidder presently wing particulars: ctor / trustee / shareholder/ member: on at which you or the person connect the state institution: / employed by the state, did you obta ?	h 3 below. y employed by the state? cted to the bidder is employed: Any other particular the appropriate authority to und	bers, tax reference numbers and, if applicable, [TICK APPLICABLE] YES NO Ilars: lertake remunerative work outside employment YES NO YES NO Ilars:
Note: Failure to submil proof 2.8.2.2. If no, furnish rea 2.9. Did you or your spou state in the previous	iach proof of such authority to the que of such authority, where applicable, i sons for non-submission of such proc ise, or any of the company's director twelve months? ulars:	<u>nay result in the disqualification of</u> if: s / trustees / shareholders / memb	Fihe quote.) ers or their spouses conduct business with the YES NO
2.10. Do you, or any personal may be involved with a 10.1. If so, furnish partic 2.11. Are you, or any personal employed by the state 2.11. If so, furnish partic 2.11.	in connected with the bidder, have an the evaluation and or adjudication of ulars: on connected with the bidder, aware of the who may be involved with the evaluates: ulars: directors / trustees / shareholders / m	y relationship (family, friend, other f this quote? of any relationship (family, friend, o uation and or adjudication of this q	nterest in any other related companies whether YES NO
NB: The Department Of I to ensure that their of	ors / trustees / members / shareho lealth will validate details of directo letails are up-lo-date and verified on id passed over as non-compliant acc	rs / frustees / members / shareho CSD. If the Department cannot v	olders on CSD. It is the suppliers' responsibility alldate the information on CSD, the quote will silon Note 4 (a) 2016/17:
I, THE UNDERSIGNED FURNISHED IN PARA	D (NAME) GRAPHS 2		CERTIFY THAT THE INFORMATION
	STATE MAY REJECT THE QU	OTE OR ACT AGAINST ME	SHOULD THIS DECLARATION
Name of bidder	Signature	Position	Dale
			a national Council of provinces; or