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CORPORATE INFORMATION COMPONENTS DIRECTORY DISTRICT OFFICES HEALTH FACILITIES

KZN Health > Components > Supply Chain Management

AdvertQuote

HEALTH REPUBLIC OF SOUTH AFRICA	Quotation Advert	
Opening Date:	2021-10-13	
Closing Date:	2021-10-21	
Closing Time:	11:00	42
INSTITUTION DETAILS		
Institution Name:	Provincial Pharmaceutical Supply Depot	V
Province:	KwaZulu-Natal	
Department or Entity:	Department of Health	
Division or section:	Central Supply Chain Management	
Place where goods / services is required	Provincial Pharmaceutical Supply Depot	
Date Submitted	2021-10-13	===
ITEM CATEGORY AND DETAILS		2242
Quotation Number:	ZNQ: 0040/22	
Item Category:	Goods	V
Item Description:	DESPATCH RELEASE NOTE REGISTER (RE-ADVERTISEMENT)	
Quantity (if supplies)	400	
COMPULSORY BRIEFING SESSION	/ SITE VISIT	
Select Type:	Select	
Date :		
Time:		H-1111
Venue:		
QUOTES CAN BE COLLECTED FROM:	PPSD	
QUOTES SHOULD BE DELIVERED TO:	PPSD TENDER BOX OR EMAIL TO: manda.vanheerden@kznhealth.	.gov.za
ENQUIRIES REGARDING THE ADVE	RT MAY BE DIRECTED TO:	
Name: Email:	Nonjabulo Gumede	
	nonjabulo.gumede2@kznhealth.gov.za	
Contact Number:	031 467 8339	
Finance Manager Name: Finance Manager Signature:	Wr. S Naicker	

Print this page

Site Updated:12 October, 2021, 02:21 pm

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Contact the Web Administrator

STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00

DATE ADVERTISED 13/10/2021 FACSIMILE NUMBER: D3/146983172 EMAIL: Imanda vanheerden@kznhealth:gov.za ENQUIRIES MAY BE DIRECTED TO: NONJABULC/PRIMROSE CONTACT NUMBER: D3/14698339 CONTACT NUMBER: D1/140/2021 CLOSING DATE: D3/14698339 CONTACT NUMBER: D1/140/2021 CLOSING TIME: 11/100 CSCRIPTION, DISPATCH RELEASE NOTE REGISTER (RE-ADVERTISEMENT) THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO WILL RESULT IN YOUR OFFER BEING DISQUALIFIED) NAME & ADDRESS OF BIDDER (FIRM) IAME OF BIDDER: DATE: PHYSICAL ADDRESS: EMAIL ADDRESS: CONTACT NUMBER: FACSIMILE NUMBER: SONTACT NUMBER: SARS PIN: EMAIL ADDRESS: SARS PIN: D3/14698339 CONTACT NUMBER: D4/15 CONTACT NUMBER: SARS PIN: D5/15 CONTACT NUMBER: SARS PIN: D5/16 CONTACT NUMBER: SARS PIN: D5/16 CONTACT NUMBER: SARS PIN: D5/16 CONTACT NUMBER: SARS PIN: D6/16 CONTACT NUMBER: SARS PIN: D7/16 CONTACT NUMBER: SARS PIN: D8/16 CO	YOU AF	E HEREBY INVI	TED TO QUOTE FOR REQUIREMENTS AT	r.[PROVINCIAL PH	ARMACE	ITICAL	SUPP	Y DEP	OT.							
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PHYSICAL ADDRESS: 11 HIGGINSON HIGHWAY; MOBENI; 40522 Q NUMBER: 6040/22	ENQUIF	RIES MAY BE DIF	RECTED TO: NONJABULO/PRIMROSE			CONTA	ACT NU	MBER: J	0314698	3339						
Q NUMBER: 0040/22	PHYSIC	AL ADDRESS: [1 HIGGINSON HIGHWAY, MOBENI, 4052			,,,,,,,,,										
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			BEE REP	PORT												
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- The institution is under no obligation to accept the lowest or any quote. The price guoted must include VAT (if VAT vendor).
- The department reserves the right to evaluate all quotations excluding VAT as some bidders may not be VAT
- Venduls.
 The bidder must ensure the correctness & validity of quote: 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
- The bidder must accept full responsibility for the proper execution & fulfilment of all obligations conditions 1.5

- The bidder must accept full responsibility for the proper execution & fulfillment of all obligations conditions devolving on under this agreement, as the Principal (s) liable for the due fulfillment of this contract. This quotation will be evaluated specification & correctness of information. Only offers that comply with or greater than specification will be considered. Late quotes will not be considered.

 All products supplied must be valid for a minimum period of six months. A bidder not registered on the Central Suppliers Database or verification has failed will not be considered. All delivery costs must be included in the quote price, for delivery at the prescribed destination. 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.

 In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- for each delivery point
- 1.14 If samples / compulsory site inspection / briefing session are required, the supplier will be informed in due course

- course.

 The supplier shall furnish any information, when requested.

 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 veilidate the tax compliance status of the supplier.

 The supplier shall indemnify the KZN Department of Health (ake the purchaser) against all third-party claims of infingement of patent, trademark, or industrial design rights arising from use of the goods or any part thereof by the purchaser.
- thereof by the purchaser. 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. The purchaser may also consider termination of the contract.

 The purchaser, may terminate this contract in whole or in part if the supplier fails to deliver any or all of the conductable the period of the period of the contract.
- one purchaser, may terminate this contract in whole or in part it the supplier hals to center any of all of the goods within the period(s) specified in the contract dial to perform any other obligation(s) under the contract, or has engaged in corrupt or fraudulent practices in competing for or in executing the contract.

 The purchaser may procure, upon such terms and in such manner as it deems appropriate, goods, works or services similar to those undeflivered, and the supplier shall be liable to the purchaser for any excess costs for such similar goods, works or services.

 Where the purchaser terminates the contract in whole or in part, the purchaser may decide to impose a 1.20

- period not exceeding 10 years.

 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 having multiple companies and are quoting (cover-quoting) for this bid. In such instances only the cheapest bid according to specification will b 1.22
- SPECIAL INSTRUCTIONS AND NOTICES TO SUPPLIERS REGARDING THE COMPLETION OF THIS QUOTATION.
- QUOTATION.
 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.
 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 or such photocopies.
 The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated. Quotation submitted must be complete in all respects.
 Any alteration made by the bidder must be initialled.

- 2.5 2.6

- Any alteration made by the bioder must be initialled.

 Use of correcting fluid is prohibited

 Quotation will be opened in public as soon as practicable after the closing time of quotation.

 Where practical, prices are made public at the time of opening quotations.

 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.
- SPECIAL INSTRUCTIONS REGARDING HAND DELIVERED QUOTATIONS
- SPECIAL INSTRUCTIONS REGARDING HAND DELUPERED QUOTATIONS

 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.

 Each quotation shall be addressed in accordance with the directives in the quotation documents and shall be lodged in a separate seaded 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.
- rejected as being fivalid.

 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 assortained, 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 dosing 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.

- as being invalid.

DECLARATION OF INTEREST

- 1. Any legal person, including persons employed by the state¹, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to quote (includes a price quotation, advertised competitive quote, limited quote or proposal). In view of possible allegations of favouritism, should the resulting quote, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority 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	pe completed and submitted with the quote.	
	. Full Name of bidder/representative		
2.3	Position occupied in the Company (director, trustee, shareholder²):2	2.6. VAT Registration Number:	
2.7		eir individual identity numbers, tax reference numbers and, if applicabl w. ITICK APPLICABL	
2.8	. Are you or any person connected with the bidder presently employe		늬
2.8	.1.If so, furnish the following particulars:		
		ne bidder is employed:	
2.8		opropriate authority to undertake remunerative work outside employme	
2.0	in the public sector?	YES NO	7
2.8	.2.1. If yes, did you attach proof of such authority to the quote docum	ment?	_
(Note	Failure to submit proof of such authority, where applicable, may result	ult in the disqualification of the quote.)	
	.2.2. If no, furnish reasons for non-submission of such proof:		
2.9		es / shareholders / members or their spouses conduct business with the	ne
20	state in the previous twelve months? 1. If so, furnish particulars:	YES NO	\Box
2.0	0. Do you, or any person connected with the bidder, have any relations	nship (family, friend, other) with a person employed by the state and wh	hο
	may be involved with the evaluation and or adjudication of this quote		Ü
	0.1. If so, furnish particulars:		
2.1		ationship (family, friend, other) between any other bidder and any person	on
	employed by the state who may be involved with the evaluation and		
2.1	1.1. If so, furnish particulars:	of the company have any interest in any other related companies wheth	
	or not they are hidding for this contract?	VES NO	픠
2.1	2.1. If so, furnish particulars:	125 NO	_
3.	Full details of directors / trustees / members / shareholders.		
	: The Department Of Health will validate details of directors / truste	tees / members / shareholders on CSD. It is the suppliers' responsibilithe Department cannot validate the information on CSD, the quote we National Treasury Instruction Note 4 (a) 2016/17.	
4	DECLARATION		
	THE UNDERSIGNED (NAME) RNISHED IN PARAGRAPHS 2.		N
	CCEPT THAT THE STATE MAY REJECT THE QUOTE OR OVE TO BE FALSE.	R ACT AGAINST ME SHOULD THIS DECLARATION	
	me of bidder Signature	Position Date	
1"S1	ate" means –		
a) b)	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); any municipality or municipal entity;	c) provincial legislature; d) national Assembly or the national Council of provinces; or e) Parliament.	

^{2&}quot;Shareholder" means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

Provincial Pharmaceutical Supply Depot

Prepared by:

Initial and Surname	Designation	Signature	Date				
N N Ncwane	Pharmacist		19 08/21				

Reviewed by Supervisor/Operations Manager:

Initial and Surname	Designation Signature		Date		
S B Nhlapo	Assistant Manager	Our	19/8/2021		

Item details	Specification			
Specification Number	23/07/2021			
Item description	Despatch Release Note Register			
Size	 A4 inclusive of spine, including a backing board 50 sequentially numbered page in triplicate (Total = 150 pages) 			
Color	 Cardboard cover: Brown Color of pages in order: White Carbon Back Blue Carbon Front and Back Pink Carbon Front 			
Material	Carbonised paper Cardboard cover			
Printing Requirements	 Front Cover and Inside Front Cover Printing requirements: as per the attached sample. Page Printing requirements: as per attached sample with sequential numbers to be provided by PPSD. All registers to be numbered 			
Packaging (unit/box)	150 pages per Register			
Functionality/performance	Finishing: side perforation 25mm from spine for white and blue pages only. Written information is recorded in triplicate.			
Purpose	To keep a record of number of boxes released to institutions by the various releasing departments.			
Other:	 Locally manufactured. Supplier to provide sample print before approval. 			

Approved by specifications committee chairperson:

Initial and Surname	Portfolio	Signature	Date
M Lutchman	Pharmacist: Demands	ekken	6.8.21
Members:	Ms N Ncwane	65	
	Ms NP Majola	<i>X</i> 1	-
	Ms PT Xate	grate	
	Ms NY Gumede	(6)	



Department: Health PROVINCE OF KWAZULU-NATAL

PHARMACEUTICAL SERVICES DESPATGE RELEASENDIE REGISTER:

leri Stationers (027 202 4 144)

Provincial Pharmaceutical Supply Depot

Number: 74234 **DESPATCH RELEASE NOTE** Section : _____ Name of Hospital/ Clinic / CHC / Other _____ Requisition Number/s / Reference Number /s COOLER PPSD REPACKED BAGS BUCKETS BUNDLES LOCATION DRUMS BOXES CARTONS **DESPATCH CAGE COLD ROOM** SECTION (HR / DR) **SUB TOTAL TOTAL Authority & Action** Name Signature Date Time PPSD: Checked Released **PPSD: Router Check** SECURITY: Check COURIER : Checked Received **SECURITY STAMP**

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PAPER WITH THIS BOOK

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THE EXTENDED BACK COVER
MUST BE USED AS A WRITING SHIELD

THIS IS AN INTACTIVE TAKEN BY THE CENTERAL PROVINCIAL SPORE TO FACILITY BY THE