



## Quotation Advert

**Opening Date:** 29/01/2024

**Closing Date:** 02/02/2024

**Closing Time:** 11:00

### INSTITUTION DETAILS

**Institution Name:** Ladysmith Hospital

**Province:** KwaZulu-Natal

**Department of entity:** Department of Health

**Division or section:** Supply Chain Management

**Place where goods/  
service is required:** Ladysmith Regional Hospital

**Date Submitted:** 26/01/2024

### ITEM CATEGORY AND DETAILS

**Quotation number:** LSH 1155/23/24

**Item Category:** Goods

**Item Description:** Plastic Tablet Bags

**Quantity (if supplies):** 25000 UNITS PER SIZE

### COMPULSORY BRIEFING SESSION / SITE VISIT

**Select Type:** Not applicable

**Date:**

**Time:**

**Venue:**

**QUOTES CAN BE COLLECTED FROM:** Downloadable from KZN HEALTH WEBSITE

**QUOTES SHOULD BE DELIVERED TO:** DEPOSIT IN THE TENDER BOX SITUATED IN THE  
MAIN SECURITY GATE OR EMAIL: [ladysmith.quotation@kznhealth.gov.za](mailto:ladysmith.quotation@kznhealth.gov.za)  
**ENQUIRIES REGARDING ADVERT MAY BE DIRECTED TO:**

**Name:** Ms. LC Sithole

**Contact number:** 036 637 2111

**Finance Manager Name:** Ms. XL Ntuli

**Finance Manage signature:** \_\_\_\_\_



OFFICIAL PRICE PAGE FOR QUOTATIONS OVER R2 000.01

QUOTE NUMBER: ZNQ /LSH  / 1155 23 24

DESCRIPTION: PLASTIC TABLET BAGS

PREFERENCE POINTS WILL BE ALLOCATED ACCORDING TO THE IMPLEMENTATION OF SPECIFIC GOALS IN TERMS OF PPR 2022:	POINTS ALLOCATED
Promotion of Enterprises manufacturing in the Province of KwaZulu-Natal	20

ICN NUMBER	QUANTITY	UNIT OF MEASURE	DESCRIPTION	BRAND & MODEL	COUNTRY OF MANUFACTUR E	PRICE	
						R	C
	25000	UNITS	PLASTIC TABLET BAGS (104X100) (NO PRINTING REQUIRED)				
	25000	UNITS	PLASTIC TABLET BAGS (104X160) TIMES A DAY _____ HOURLY				
	25000	UNITS	TABLET BAGS PLASTIC (104X120) MORNING, AFTERNOON, NIGHT BEFORE/ AFTER MEALS				
	25000	UNITS	TABLET BAGS PLASTIC (104X120) TIMES A DAY _____ HOURLY				
	25000	UNITS	TABLETS BAGS PLASTIC (104X160) NO PRINTING REQUIRED				
VALUE ADDED TAX @ 15% (Only if VAT Vendor)							
TOTAL QUOTATION PRICE (VALIDITY PERIOD 90 Days)							

DOES THIS OFFER COMPLY WITH THE SPECIFICATION? YES / NO  
 IS THE PRICE FIRM? YES / NO  
 DOES THE ARTICLE CONFORM TO THE S.A.N.S. / S.A.B.S. SPECIFICATION? YES / NO

STATE DELIVERY PERIOD (E.G. 3 DAYS, 1 WEEK) \_\_\_\_\_

NAME OF BIDDER: \_\_\_\_\_ SIGNATURE OF BIDDER: \_\_\_\_\_  
 [By signing this document, I hereby agree to all terms and conditions]

CAPACITY UNDER WHICH THIS QUOTE IS SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

**BIDDER'S DISCLOSURE**

**1 PURPOSE OF THE FORM**

Any person (natural or juristic) may make an offer or offers in terms of this invitation to bid. In line with the principles of transparency, accountability, impartiality, and ethics as enshrined in the Constitution of the Republic of South Africa and further expressed in various pieces of legislation, it is required for the bidder to make this declaration in respect of the details required hereunder.

Where a person/s are listed in the Register for Tender Defaulters and / or the List of Restricted Suppliers, that person will automatically be disqualified from the bid process.

**2 BIDDER'S DECLARATION**

2.1. Is the bidder, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest<sup>1</sup> in the enterprise, employed by the state? **YES / NO**

2.1.1. If so, furnish particulars of the names, individual identity numbers, and, if applicable, state employee numbers of sole proprietor/ directors / trustees / shareholders / members/ partners or any person having a controlling interest in the enterprise, in table below.

FULL NAME	IDENTITY NUMBER	NAME OF STATE INSTITUTION

2.2. Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution? **YES / NO**

2.2.1. If so, furnish particulars: \_\_\_\_\_

2.3. Does the bidder or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise whether or not they are bidding for this contract? **YES / NO**

2.3.1. If so, furnish particulars: \_\_\_\_\_

**3 DECLARATION**

I, the undersigned, (name) \_\_\_\_\_ in submitting the accompanying bid, do hereby make the following statements that I certify to be true and complete in every respect:

- 3.1. I have read and I understand the contents of this disclosure;
- 3.2. I understand that the accompanying bid will be disqualified if this disclosure is found not to be true and complete in every respect;
- 3.3. The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However, communication between partners in a joint venture or consortium<sup>2</sup> will not be construed as collusive bidding.
- 3.4. In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications, prices, including methods, factors or formulas used to calculate prices, market allocation, the intention or decision to submit or not to submit the bid, bidding with the intention not to win the bid and conditions or delivery particulars of the products or services to which this bid invitation relates.
- 3.5. The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening or of the awarding of the contract.
- 3.6. There have been no consultations, communications, agreements or arrangements made by the bidder with any official of the procuring institution in relation to this procurement process prior to and during the bidding process except to provide clarification on the bid submitted where so required by the institution; and the bidder was not involved in the drafting of the specifications or terms of reference for this bid.
- 3.7. I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act No 89 of 1998 and or may be reported to the National Prosecuting Authority (NPA) for criminal investigation and or may be restricted from conducting business with the public sector for a period not exceeding ten (10) years in terms of the Prevention and Combating of Corrupt Activities Act No 12 of 2004 or any other applicable legislation.

I CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 1, 2 and 3 ABOVE IS CORRECT.

I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 6 OF PFMA SCM INSTRUCTION 03 OF 2021/22 ON PREVENTING AND COMBATING ABUSE IN THE SUPPLY CHAIN MANAGEMENT SYSTEM SHOULD THIS DECLARATION PROVE TO BE FALSE.

_____ NAME OF BIDDER	_____ SIGNATURE	_____ POSITION	_____ DATE
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<sup>1</sup> the power, by one person or a group of persons holding the majority of the equity of an enterprise, alternatively, the person/s having the deciding vote or power to influence or to direct the course and decisions of the enterprise.

<sup>2</sup> Joint venture or Consortium means an association of persons for the purpose of combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.

**4. POINTS AWARDED FOR SPECIFIC GOALS**

- 4.1. In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential Procurement Regulations, preference points must be awarded for specific goals stated in the tender. For the purposes of this tender the tenderer will be allocated points based on the goals stated in table 1 below as may be supported by proof/ documentation stated in the conditions of this tender.
- 4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the tender documents, stipulate in the case of—
- (a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or
  - (b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system,
- then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

**Table 1: Specific goals for the tender and points claimed are indicated per the table below.**  
**Note to tenderers: The tenderer must indicate how they claim points for each preference point system.**

The specific goal/s allocated points in terms of this tender	Number of points allocated (80/20 system)	Number of points claimed (80/20 system)
Promotion of South African owned enterprises	20	

**DECLARATION WITH REGARD TO COMPANY/FIRM**

- 4.3. Name of company/firm: \_\_\_\_\_
- 4.4. Company registration number: \_\_\_\_\_
- 4.5. TYPE OF COMPANY/ FIRM [tick applicable box]
- Partnership/Joint Venture / Consortium
  - One-person business/sole propriety
  - Close corporation
  - Public Company
  - Personal Liability Company
  - (Pty) Limited
  - Non-Profit Company
  - State Owned Company

- 4.6. I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I 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 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;
  - iv) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may have –
    - (a) disqualify the person from the tendering 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 tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted from obtaining business from any organ of state for a period not exceeding 10 years, after the audi alleram partem (hear the other side) rule has been applied; and
    - (e) forward the matter for criminal prosecution, if deemed necessary.

_____ <b>SIGNATURE(S) OF TENDERER(S)</b>	
SURNAME AND NAME:	_____
DATE:	_____
ADDRESS:	_____
	_____
	_____

OUT OF REACH OF CHILDREN • ZWIVHETSHELWE KULE MAMANA • KEEP OUT OF REACH  
WAGGINENI KANLE EZINGANENI • BEKA KUDE EBANTWANENI BEBING WAGGINENI KANLE

One or more SA PAT Nos may apply: One or more SA PAT Nos may apply; more SA PAT Nos may  
25, 98/8773, 2003/7291, 2008/09365 92/10024, 98/8325, 98/8773, 2003/7291, 2008/325, 98/8773, 2003/72  
B.131 B.

E BANA • MAINGAFIKELELEKI KUBANTWANA • KEEP OUT OF REACH OF CHILDREN • ZW  
 REACH • MOU BUIE KINDERS SE BEREIK • WAGCINENI KAHLE EZINGANENI • BEKA

SCHEDULE	ITEM DESCRIPTION	QTY

BN/LOT: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

TAKE  TABLET(S) TIMES  A DAY  
 THATHA  AMA/PHILISI  NGELANGA \_\_\_\_\_ HOURLY

PATIENT NAME: \_\_\_\_\_ PATIENT NO: \_\_\_\_\_

DISPENSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

LADYSMITH REGIONAL HOSPITAL, 36 MALCOLM ROAD, LADYSMITH 3370  
 PHONE: 036 637 2111

One or more SAPAT Nos. may apply:  
 10037291, 200610036592/10024, 998325, 998773, 20037291, 200610036592/10024, 998325, 98/87  
 B. 131

KE CHILDREN • ZWAKHETSHELEWE KULE HA VHANA • BEA HOLE LE BANA • MANSAFHELE  
QAKHEH • BEKA KUDE EBANTWANENI • KEEP OUT OF CHILDREN'S REACH • HOU BANTW

SCHEDULE	ITEM DESCRIPTION	QTY

BN/LOT: \_\_\_\_\_ EXP. DATE: \_\_\_\_\_

TAKE  TABLET(S) TIMES  A DAY \_\_\_\_\_ HOURLY  
THATHA  AMAPHILISI  NGELANGA \_\_\_\_\_

PATIENT NAME: \_\_\_\_\_ PATIENT NO: \_\_\_\_\_

DISPENSED BY: \_\_\_\_\_ DATE: \_\_\_\_\_

LADYSMITH REGIONAL HOSPITAL, 36 MALCOLM ROAD, LADYSMITH 3370  
PHONE: 036 837 2111

One or more SA PAT Nos may apply: One or more SA PAT Nos may apply:  
2006/0036592/10024, 08/0325, 08/0773, 2003/7291 2006/0036592/10024, 08/0325, 08/0773.  
B.132 B.132



OF CHILDREN - ZWIKHETSHELWE KULE HA VHANA - BEA HOLE LE BANA • MINGAPIKEL  
GAMENI • BEKA KUDE EBANTWANENI • KEEP OUT OF CHILDREN'S REACH • KOV BUIT

One or more SAPAT Nos may apply:  
00325, 006773, 20037291, 2006/0036502/10024, 000325, 006773, 20037291, 2006/0036502/10  
0.13E