11001

STANDARD QUOTE DOCUMENTATION SUP	PLI CHAIN MANAGEMENT UNDER RS0 000.00
YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS AT DATE ADVERTISED: 28/11/2018	F. INKOSI ALBERT LUTHULI CENTRAL HOSPITAL FACSIMILE NUMBER: 031 204 1162
ENQUIRIES MAY BE DIRECTED TO: NOLWAZI MTHEMBU	CONTACT NUMBER: 031 - 240 1254
PHYSICAL ADDRESS: 800 VUSI MZIMELA ROAD, MAYVILLE, 4091	
PHYSICAL ADDRESS: 1000 YOU MELINIESS NOOD, MINI VIEES, 4001	
ZNQ NUMBER: ZNQ 405/18/19	12/2018 CLOSING TIME: 11:00
ZNQ NUMBER: ZNG 400/10/19	1229.19CLOSING TIME: 11:00
DESCRIPTION 18 Units, ACD formula 500 ML	
THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILUR	E TO DO SO WILL RESULT IN YOUR OFFER BEING DISQUALIFIED)
NAME & ADDRES	S OF BIDDER (FIRM)
NAME & ADDRES NAME OF BIDDER	S OF BIDDER (FIRM)
	OF BIDDER (FIRM) DATE
NAME OF BIDDER	
NAME OF BIDDER PHYSICAL ADDRESS	DATE
NAME OF BIDDER PHYSICAL ADDRESS CONTACT NUMBER SIGNATURE OF BIDDER	DATE FACSIMILE NUMBER SARS PIN
NAME OF BIDDER PHYSICAL ADDRESS CONTACT NUMBER SIGNATURE OF BIDDER [By signing this document I hereby agree to all terms and conditions]	DATE FACSIMILE NUMBER
NAME OF BIDDER PHYSICAL ADDRESS CONTACT NUMBER SIGNATURE OF BIDDER	DATE FACSIMILE NUMBER SARS PIN

Item No	Quantity	Description	Brand & model	Country of manufacture	Price	
					R	С
01	18 Units	ACD formula 500 ML				
						_
						_
				 		_
VALU	 E ADDED TAX	X @ 14% (Only if VAT Vendor)				+
		N PRICE (VALIDITY PERIOD 60 Days)				

Does this offer comply with the specification? State delivery period e.g. E.g. 1day, 1week All delivery costs must be included in the quote price Is the price firm?

SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

- 1. 2. 3.

4.

The institution is under no obligation to accept the lowest or any quote.

16. The price quoted must include VAT (if VAT vendor).

The department reserves the right to evaluate all quotations excluding VAT as some Bidders may not be VAT vendors.

The Bidder must ensure the correctness & validity of quote: that the price(s), rate(s) & 17. 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.

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.

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- tor the due fulfilment 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. 10
- All delivery costs must be included in the quote price, for delivery at the prescribed 11. destination
- 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.
 If samples / compulsory site inspection / briefing session are required, the supplier will
 21.
- 14 be informed in due course.
- The supplier shall furnish any information, when requested.

- 16. 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 validate the tax
- compliance status of the supplier.
 The supplier shall indemnify the KZN Department of Health (aka the purchaser) against all third-party claims of infringement of patent, trademark, or industrial design
- rights arising from use of the goods or any part 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 goods within the period(s) specified in the contract fails 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 undelivered, 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 restriction penalty on the supplier by prohibiting such supplier from doing business with the public sector for a 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 have multiple companies and are quoting (cover-quoting) for this bid. In such instances only the cheapest bid according to specification will be considered.

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NEW SPECIFICATION FORM IALCH SUPPLY CHAIN DEPARTMENT

Postal Address: Private Bag x03 Mayville Physical Address 800 vusi Mzimela Road Mayville Tel.:0312402094, Fax.0312401050

Email.:nolwazi.mthembu@ialch.co.za www.kznhealth.gov.za

SPEC FOR: ACD FORMULA 500ML

Material no.:

SPEC NO:

ZNO: 2017/2018

or Lo No.	21102. 2017/2010
ITEM DESCRIPTION	ACD FORMULA 500ML
UNIT OF ISSUE	18 UNITS
SIZE	500ML
QUALITY STANDARDS	SOUTH AFRICAN BEREU OF STANDADARS (SABS) OR INTERNATIONAL STANDARDS (ISO) APPROVED
ESTIMATED PRICE	

WHAT IS THIS ITEM/PRODUCT USED FOR?

ACD is used as an anticoagulant in blood that is taken from the patient for a red cell mass study to
calculate the patient's red cell and plasma volumes. Once the blood is drawn, ACD is added, then a
radiopharmaceutical is added and the blood is re-injected into the patient after being centrifuged. The
ACD is essential to prevent coagulation of the blood.

SPECIAL CONDITIONS

- Please submit sample when requested to do so, should you fail to submit, your quotation will be disqualified
- The Department is not compelled to accept lowest price only, evaluation criteria of your bid / quote will be based on Price, Functionality, and as prescribed on Broad Based Black Economic Act and Preferential Procurement Policy

FEATURES EXPECTED FROM THE PRODUCT TO BE EVALUATED (SCOPE)

 1 Box containing 18 units. Make sure there is no leakage from bag. Liquid must be clear in color. Inner bag maintains sterility of product. Each 500ml bag is enclosed in an outer bag which serves as a moisture barrier.

AUTHORISED BY BID/QUOTATION SPECIFICATION COMMITTEE

Initials and Surname	Portfolio	Signature	Date
Chairperson. N. Mthembu	Chairperson	A C	27/11/18
Matron. T Hunter	Member	Mullinto	
Sister. K.A Biggins	Member	2	2)/11/18
Sister. D Duma	Member		

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

any municipality or municipal entity;

- 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 abo	ove, the following questionnaire	must be	completed and sub-	mitted with the quote.	
2.1.	Full Name of bidder/representa	ative	. 2.4.	Company Registra	ation Number:	
2.2.	Identity Number:				ımber:	
2.3.	Position occupied in the Comp	any (director, trustee, sharehol		VAT Registration	Number:	
	The names of all directors / truemployee / persal numbers mu	ust be indicated in paragraph 3	below.	one-common to a common to a common to a second common to a second common to a second common to a second common	mbers, tax reference nu	mbers and, if applicable [TICK APPLICABLE]
	Are you or any person connect		nployed b	y the state?		YES NO
2.8.1	. If so, furnish the following parti	culars:				
	Name of person / director / trust	ee / shareholder/ member:				
	Name of state institution at which	th you or the person connected	to the b	dder is employed:		
	Position occupied in the state in					
2.8.2	2. If you are presently employe	d by the state, did you obtain t	ne appro	priate authority to ur	idertake remunerative w	
200	in the public sector?	of auch authority to the quote	daauman	+2		YES NO
	2.1. If yes, did you attach proof Failure to submit proof of such a				of the quote \	
	2.2. If no, furnish reasons for n					
2.0.2	Did you or your spouse, or any	of the company's directors / t	rustees /	shareholders / mem	thers or their snouses of	anduct husiness with the
2.5.	state in the previous twelve mo		iusices i	shareholders / men	ibera or their apouace or	YES NO
291	. If so, furnish particulars:		0.56703691971		79070970	TEO NO
	. Do you, or any person connect					yed by the state and who
70.66	may be involved with the evalu				å # # #	YES NO
2.10	.1. If so, furnish particulars:	·······		· · · · · · · · · · · · · · · · · · ·		
2.11	. Are you, or any person connec					er bidder and any persor
	employed by the state who ma					YES NO
2.11	.1. If so, furnish particulars:					
2.12	. Do you or any of the directors /		bers of th	e company have any	y interest in any other rel	
	or not they are bidding for this					YES NO
2.12	.1. If so, furnish particulars:					
3.	Full details of directors / trus	tees / members / shareholde	rs.			
NB:	The Department Of Health will to ensure that their details are not be considered and passed	up-to-date and verified on CS	D. If the	Department cannot	validate the informatio	n on CSD, the quote wil
4	DECLARATION					
	HE UNDERSIGNED (NAM RNISHED IN PARAGRAPH				CERTIFY THAT	THE INFORMATION
	CCEPT THAT THE STATE OVE TO BE FALSE.	MAY REJECT THE QUO	ΓE OR A	CT AGAINST M	E SHOULD THIS DI	ECLARATION
	ne of bidder	Signature		Position		Date
a)		nt, national or provincial public entite eaning of the Public Finance Manager			the national Council of provinc	es; or

^{*}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.