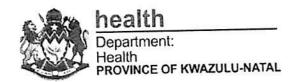
## STANDARD QUOTE DOCUMENTATION SUPPLY CHAIN MANAGEMENT UNDER R30 000.00 200 481/19/20

DATE ADVERTISED: 29 January 2020. FACSIMILE NUMBER: 031 240 1162 EMAIL: Nolwazi.mthembu@ialch.co.za

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# Specifications Template

### Prepared by:

Initial and Surname	Designation	Signature	Date
L.Kakana	Ward Clerk		13.01.2020

## Reviewed by Supervisor/Operational Manager:

Designation	Signature	7)	Date
	100	ODA	13.01.2020
	Designation Operational Manager	Designation Signature Operational Manager	Designation 5

Item details	Specification
Item description	TRACHEOSTOMY MINI TUBE NEONATE SIZE 2.5;3.0;3.5 & 4.0
Size	SIZE 2.5;3.0; 3.5 & 4.0
Colour	WHITE
Material	PLASTIC
Packaging (unit/box)	UNIT
Functionality/performance	Soft & flexible neck flange with 2ways -15mm connector -thin walled radio opaque curved cannula -has an obturator
Purpose	Used when access to the respiratory tract through a tracheostomy is required & access into trachea via incision where devices is placed
Other:	

### Approved by specifications committee chairperson:

Initial and Surname	Portfolio	Signature	Date
N.P. Mthembu	Sump	(2ha)	21.01-20

#### **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. Ir	order to give effect to the above, t	ne following questionnaire must	be co	mpleted and submitted with the	quote.		
21	Full Name of bidder/representativ	e	2.4.	Company Registration Number	r:		
22	Identity Number		2.5.	Tax Reference Number:			
2.3.	Position occupied in the Company	(director, trustee, shareholder2)	:2.6.	VAT Registration Number:			
2.7.	The names of all directors / truste	ees / shareholders / members, th	eir in	dividual identity numbers, tax re	eference numbe	ers and, if a	applicable,
	employee / persal numbers must	be indicated in paragraph 3 belo	w			TICK APP	
2.8.	Are you or any person connected	with the bidder presently employ	yed b	y the state?		YES	NO _
2.8.	<ol> <li>If so, furnish the following particular Name of person / director / trustee</li> </ol>	ars:					
	Name of person / director / trustee Name of state institution at which	/ snareholder/ member:	ho hie	tder is employed:			
	Position occupied in the state insti	you or the person connected to t	ne bit	Any other naticulars:			
2.0	<ol> <li>If you are presently employed I</li> </ol>	w the state, did you obtain the a	nnror	riate authority to undertake rem	unerative work	outside er	nolovment
2.8.	in the public sector?	by the state, did you obtain the a	ppiop	mate authority to undertake ren	ancialite from	YES	NO
2.8	2.1. If yes, did you attach proof of	such authority to the quote docu	ımeni	?		LILO	INO
(Note:	Failure to submit proof of such auth	nority, where applicable, may res	ult in	the disqualification of the quote.	.)		
28	2.2 If no furnish reasons for non	-submission of such proof:					
2.9	Did you or your spouse, or any o	f the company's directors / truste	es/	shareholders / members or their	r spouses cond	uct busine	ss with the
	state in the previous twelve mont	hs?				YES	NO
2.9	1. If so, furnish particulars:						
2.10	). Do you, or any person connected	with the bidder, have any relation	onship	o (family, friend, other) with a pe	rson employed		
200	may be involved with the evaluat	ion and or adjudication of this qu	ote?			YES	NO
2.1	0.1. If so, furnish particulars:	J. 10. 0 1. J. J		askin (family friend ather) behave	oon any other h	iddor and	onu noroon
2.1	<ol> <li>Are you, or any person connecte employed by the state who may</li> </ol>	d with the bidder, aware of any re	ndor	adjudication of this quote?	sen any other b		
2.1	1.1. If so, furnish particulars:	be involved with the evaluation a	na oi	adjudication of this quote:		YES	NO
2.1	2. Do you or any of the directors / tr	istees / shareholders / members	of the	company have any interest in a	any other relate	d compani	es whether
2.1	or not they are bidding for this co		01 1111	s company mare any interest in t	2, 00. , 0.0.0	YES	NO
21	2.1. If so, furnish particulars:						
70.275							
<b>3.</b> NB	Full details of directors / trusted: The Department Of Health will vato ensure that their details are unot be considered and passed or	lidate details of directors / trus p-to-date and verified on CSD. I	f the	Department cannot validate the	information of	uppliers' re n CSD, the	sponsibility quote wil
4	DECLARATION						
I, T	THE UNDERSIGNED (NAME)			CERTIF	Y THAT TH	E INFOR	MATION
FU	RNISHED IN PARAGRAPHS	2.					
	CCEPT THAT THE STATE MOVE TO BE FALSE.	AY REJECT THE QUOTE (	OR A	CT AGAINST ME SHOUL	D THIS DEC	LARATIO	ON
Na	me of bidder	Signature		Position	Dat	e	
*St	ate" means -						
a) b)	any national or provincial department, constitutional institution within the mear Act, 1999 (Act No. 1 of 1999); any municipality or municipal entity;	national or provincial public entity or ing of the Public Finance Management	c) d) e)		uncil of provinces;	or	

<sup>&</sup>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.