109

	1	STANDARD QUOTE DOCUMENTATION SUPPL	LY CHA	IN MA	NAGE	MEN	T UNDE	RR	30 00	0.00	ZNE	1 2	:33	- ]4
DATE A	RE HEREBY II DVERTISED: RIES MAY BE	IVITED TO QUOTE FOR REQUIREMENTS AT:	INKOSI	FACS CON	T.LUTH SIMILE TACT	NUM NUMI	BER: .03	HOS 31 24 11 24	PITAL 40 116	2				
ZNQ NUI	MBER: .235/18/	19 CLOSING DATE: 29/09	9/2018		0	LOSI	NG TIM	E: 1	1:00					
		Desophageal catheters (box /20)												
THE FO	DLLOWING PA	ARTICULARS MUST BE FURNISHED (FAILURE	TO DO	SO V	VILL R	ESUL	T IN YO	UR	OFFI	ER BEIN	IG DI	SQUA	ALIF	ED)
		NAME & ADDRESS	OF BID	DER	(FIRM	)								
NAME	OF BIDDER												-	
The state of the s	CAL ADDRES	8	DATE											
	ACT NUMBER		FACSIMILE NUMBER											
SIGNATURE OF BIDDER				SARS PIN										
[By signing this document I hereby agree to all terms and conditions]					CENTRAL SUPPLIER DATABASE REGISTRATION (CSD) NO.:							:		
UNIQU	E REGISTRA	ΓΙΟΝ REFERENCE: ↓		لبل	Д,			,				٫	ㅗ	
					Ш				Ш	Ш				
Item Quantity Description				Brand & model			To	Country of		Price				
No	Quantity	Beschphen			1 1			R		С				
01	01 box	Oesophageal catheters (box /20)							134=1					
	2.2.45													
		Will Amade Committee			18									

Item No	Quantity	Description	Brand & model	Country of manufacture	Price		
					R	С	
01	01 box	Oesophageal catheters (box /20)					
						_	
		-					
						-	
			1			+	
						_	
		1540					
VALU	E ADDED TA	X @ 142% (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
Is the price firm?	All delivery costs must be included in the quote price

## SPECIAL CONTRACT CONDITIONS OF QUOTATIONS

- 2.
- The institution is under no obligation to accept the lowest or any quote. 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.
- 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. 10
- 11 All delivery costs must be included in the quote price, for delivery at the prescribed destination
- 12.
- destination.

  Only firm prices will be accepted. Such prices must remain firm for the contract

  20. 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. 13
- be informed in due course.
- 15. 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
  - 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.



## 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

## DETAILED SPECIFICATION FOR THE ITEM REQUSTED NOT BRAND /CODES ATTACHED TO NSI REQUEST FORM

NSI REQUEST FORM		
TEM DESCRIPTION DETAILED	OESOPHAGEAL CATHETERS	
UNIT OF ISSUE	BOX OF 20	
SIZE		
QUALITY STANDARDS		
DETAILED EXPLANATION OF	THE ITEM/ WHAT IS THIS ITEM/PRODUCT USED FOR etc.	
	Patients with difficult in swallowing. Single use item  I THE PRODUCT TO BE EVALUATED (SCOPE)	
None sterile		

## **DECLARATION OF INTEREST**

- 1. Any legal person, including persons employed by the state<sup>1</sup>, 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 as who are involved with the evaluation and or adjudication of the quote

	on whose behalf the declarant acts and persons who are involve				
2.	In order to give effect to the above, the following questionnaire mus	st be	completed and submitted with t	the quote.	
2.1	Full Name of bidder/representative	24	Company Registration Number	er:	
2.1.	Identity Number:	2.5.	Tax Reference Number:		
2.2.	Position occupied in the Company (director, trustee, shareholder²)	:2.6.	VAT Registration Number:		
2.5.	Position occupied in the company (director, hadden, character)				
2.7	The names of all directors / trustees / shareholders / members, the	opir ir	odividual identity numbers, tax i	reference numb	ers and if applicable.
2.1.	employee / persal numbers must be indicated in paragraph 3 belo	W ICII II	idividual identity flumbers, tax i	Cicionoc namo	[TICK APPLICABLE]
28	Are you or any person connected with the bidder presently employ	ved b	ov the state?		YES NO
	.If so, furnish the following particulars:	•			
	Name of person / director / trustee / shareholder/ member:				
	Name of state institution at which you or the person connected to the	he bi	dder is employed:		
	Position occupied in the state institution:		Any other particulars:		
2.8.2	. If you are presently employed by the state, did you obtain the a	ppro	priate authority to undertake rei	munerative work	
	in the public sector?		101		YES NO
2.8.2	1.1. If yes, did you attach proof of such authority to the quote docu	ımen	it?	- 1	
	Failure to submit proof of such authority, where applicable, may res				
2.8.2	2.2. If no, furnish reasons for non-submission of such proof: Did you or your spouse, or any of the company's directors / truste		abarahaldara / mambara ar tha	ir cooucos conc	lust business with the
2.9.	state in the previous twelve months?	ees /	shareholders / members of the	ii spouses cond	YES NO
20	If so, furnish particulars:				TES   NO
2.9.	. Do you, or any person connected with the bidder, have any relation	onshi	n (family, friend, other) with a p	erson employed	by the state and who
2.10	may be involved with the evaluation and or adjudication of this qu			o.co op.o, ca	YES NO
2.10	.1. If so, furnish particulars:				TEO   NO
2.11	. Are you, or any person connected with the bidder, aware of any re	elatio	nship (family, friend, other) bety	veen any other b	oidder and any person
	employed by the state who may be involved with the evaluation a				YES NO
2.11	.1. If so, furnish particulars:				N SE SE SE
2.12	. Do you or any of the directors / trustees / shareholders / members	of th	e company have any interest in	any other relate	
12002	or not they are bidding for this contract?				YES NO
2.12	.1. If so, furnish particulars:	• • • • • • • • • • • • • • • • • • • •			
3.	Full details of directors / trustees / members / shareholders.				
NB:	The Department Of Health will validate details of directors / trus				
	to ensure that their details are up-to-date and verified on CSD. I				on CSD, the quote will
	not be considered and passed over as non-compliant according t	o Na	tional Treasury Instruction Note	4 (a) 2016/17.	
4	DECLARATION				
ιт	HE UNDERSIGNED (NAME)		CERTI	EV THAT TH	E INFORMATION
	RNISHED IN PARAGRAPHS 2.	•••••	CERT	i i ilixi ili	L IN ORMATION
	CCEPT THAT THE STATE MAY REJECT THE QUOTE O	JR A	ACT AGAINST ME SHOUL	LD THIS DEC	LARATION
PK	OVE TO BE FALSE.				
				2000 M	
Nar	ne of bidder Signature		Position	Da	te
1*Sta	te" means –				
a)	any national or provincial department, national or provincial public entity or		) provincial legislature;		
- 100	constitutional institution within the meaning of the Public Finance Management	ď	) national Assembly or the national C	ouncil of provinces;	or
b)	Act, 1999 (Act No. 1 of 1999); any municipality or municipal entity;	е	) Parliament.		

<sup>2&</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.