

INVITATION OF QUOTATION ABOVE R30, 000.00

THIS FORM SHOULD BE COMPLETED IN DETAIL AND SHOULD BE ACCOMPANIED BY A VALID TAX

COMPLIANCE STATUS PIN AND VALID BBBEE VERIFICATION CERTIFICATE/AFFIDAVIT

| QUOTATION NUMBER: R/S/1819/1558 | VALIDITY PERIOD OF QUOTATION Days |
|---|--|
| CLOCING DATE DE los losses | (To be completed by the Supplier) |
| CLOSING DATE: 27/03/2020 | CLOSING TIME: 11H00 |
| DESCRIPTION(SPECIFICATION/S) OF ITEMS/ SERVICE REQUIRED: | COMPANY NAME: |
| SUPPLY, DELIVER AND OFFLOAD CHAINSAWS AS PER SPECIFICATIONS. | TEL NO: |
| | FAX NO: |
| | CONTACT PERSON: |
| | CSD REG NUMBER |
| | MAAA |
| DOES OFFER COMPLY WITH SPECIFICATION? | YES/NO |
| SPECIFICATIONS | (DELETE WHICH EVER IS NOT APPLICABLE) |
| DOES ARTICLE COMPLY WITH SABS SPECIFICATION? | |
| HAS IT BEEN INSPECTED BY SABS? | YES/NO |
| | YES/NO (DELETE WHICH EVER IS NOT APPLICABLE) |
| DELIVERY DEPLOY ASTER INVENTAGE | (DELETE WHICH EVER IS NOT APPLICABLE) |
| DELIVERY PERIOD AFTER INITIAL ORDER? | |
| IS THE PRICE FIRM | |
| WHERE ARE THE STOCK HELD? | |
| (PHYSICAL ADDRESS , PLEASE) | |
| QUOTATION PRICE INCLUDING VAT | |
| (VAT TO BE ADDED BY REGISTERED VAT VENDORS ONLY) | TOTAL: R |
| COMPANY OFFICIAL STAMP (COMPULSORY) | |
| ,, | SIGNATURE OF BIDDER |
| | |
| | DATE |
| NUMBER OF PAGES FAXED BACK TO THE DEPARTMENT BY THE SUPPLER | (Supplier to complete) |
| CHRAIT CHARACTER TO THE TOTAL | and ashlar to combiete) |

NB: SUBMIT QUOTATION FOR THE ATTENTION OF: LINDELA NGWENYA @ TEL: 033 343 8306

NB: ALL QUOTATIONS MUST BE SUBMITTED IN A BID BOX LOCATED AT 04 PIN AOK AVENUE, HILTON. FAXED OR E-MAILED QUOTATIONS WILL NOT BE ACCEPTED.

NB:

THE ATTACHED SBD4 & SBD9 FORMS MUST BE COMPLETED IN FULL.
THIS REQUEST FOR QUOTATION (RFQ) MUST BE COMPLETED AND RETURNED WITH ALL YOUR QUOTATION DOCUMENTS.

ANNEXURE A

| Addres | 98 ' | | | | | |
|-------------|--|----------------------|-----------|-------|-------|-------|
| | ct Person : | | | | | |
| | ct Number : | | | | | |
| Fax Nu | | | | | | |
| E-Mail | Address : | | | | | |
| LINE NO. | DESCRIPTION OR SPECIFICATION OF ITEM | REQUIRED QUANTITY | UNIT P | | TOTAL | PRICE |
| | (Please be very specific and clear) | | R | С | R | С |
| | SUPPLY, DELIVER, OFF-LOAD AND DEMONSTRATE THE FOLLOWING AS PER ATTACHED SPECIFICATIONS: | | | | | |
| 1. | A commercial forestry chainsaw | 7 | | | | |
| 2. | Replacement chainsaw chains | 14 | | | | |
| 3. | Sharpening tools | 7 | | | | |
| 4. | SABS safety helmets complete | 7 | | | | |
| | | * I ADOLLD (IF) | NDD 10.45 | | | |
| | | * LABOUR (IF A | | | | - |
| | | | | TOTAL | | - |
| *ONLY | APPLICABLE TO VAT REGISTE | RED SUPPLIER | RS 14% | VAT | | |
| | | | TOTAL | PRICE | | |
| AT Regi | istration No. (Supplier): رام | | | | | |
| nen Rec | quired (Requester): (31/8/2018 | | | | | |
| | quired (Requester) Cedara | | | | | |
| ntact d | etails of requester: Alistair - 033 3 | 559192 | | | | |
| | OMPULSORY) MPANY STAMP PRICES | S ARE VALID FOR | DAY | s | | |
| | | TURE | | | | |
| | | | | | | |



agriculture & rural development

Department:
agriculture
& rural development
PROVINCE OF KWAZULU-NATAL

SPECIFICATIONS FOR A COMMERCIAL FORESTRY CHAINSAW

| | REQUIREMENTS | DOES YOUR OFFER MEET SPEC'S? YES/NO | GIVE ACCURATE DETAILS OF YOUR OFFER AND SPECIFICATIONS |
|-----|--|--|--|
| | Supply, deliver and off-load the following as per specifications below: | Number required: | Make: |
| | A COMMERCIAL FORESTRY | | Model: |
| | CHAINSAW | 7 | |
| | REPLACEMENT CHAINSAW CHAINS | 14 | |
| | SHARPENING TOOLS | 7 | |
| | SABS SAFETY HELMETS COMPLETE | 7 | |
| | Given the nature of the equipment, the number of items procured and the service and maintenance required, you should be a registered Agent for the given make/ brand | | Please attach proof of your agency |
| 1 | ENGINE | | |
| 1.1 | Displacement 70 – 75 cm ³ | | |
| 1.2 | Power 3.6 – 4.0 kW | | |
| 1.3 | Carburetor: diaphragm type with integral fuel pump | | |
| 1.4 | Power to weight ratio 1:6 | | 1 |
| 1.5 | Max power speed 11 000 – 13 000 rpm | | |
| | | | |

| | BAR & CHAIN | |
|-----|---|--|
| 2.1 | 45 - 50 cm length | |
| 2.2 | Standard chain pitch 3/8"/058 | |
| 2.3 | Weight 6.0 - 7.0 kg - excluding cutting safety equipment | |
| 2.4 | Equipped with an inertia activated chain brake | |
| 2.5 | Equipped with a side mounted chain tensioner | |
| 2.6 | A SABS safety helmet, complete with integral face and ear protection | |
| 3 | WARRANTEE AND SERVICING | |
| 3.1 | A comprehensive warrantee for at least 12 months from date of delivery | |
| 3.2 | Please indicate who underwrites the warrantee as mentioned above | |
| 3.3 | Please indicate the length of period (in years) that your Company has supplied and serviced commercial chainsaws | |
| 3.4 | Include in your quote one service, inclusive of labour and replacement of scheduled replacement parts, as to upheld the warrantee for 12 months | |
| 3.5 | Please attach a list of Service Agents/ Dealers and their location in KZN. | |
| | Included in your final quote must be: inclusive of labour and replacement of scheduled replacement parts, cost for a 25 hour service cost for a 50 hour service cost for possible other services required as to upheld the warrantee for a period of 12 months. | State costs of services required to upheld warrantee. Hour service Cost25 hr R50 hr Rhr R |

| 4 | DELIVERY AND TRAINING | |
|-----|--|---|
| 4.1 | Variable in the last of the la | |
| 4.1 | Your delivery period to be within 30 calendar days after the receipt of an official order | |
| 4.2 | Supply, deliver and off-load the following as per specifications below: | |
| | 7X A COMMERCIAL FORESTRY CHAINSAWS | |
| | 14X REPLACEMENT CHAINSAW CHAINS | |
| | 7X SHARPENING TOOLS | |
| | 7X SABS SAFETY HELMETS COMPLETE | |
| 4.3 | Delivery to be made to Cedara Farm Section, Admin Block, within official working hours: 07h45 – 16h15. | |
| | Please confirm delivery telephonically at 033 355 8252 | |
| | | 1 |
| | | |
| | | |

DATE

BIDDER's SIGNATURE