

INVITATION OF QUOTATION

THIS FORM SHOULD BE COMPLETED IN DETAIL AND SHOULD BE ACCOMPANIED BY **VALID TAX COMPLIANCE STATUS PIN /CSD NUMBER and BBBEE**

	QUOTATION NUMBER: R/N/2223/288	VALIDITY PERIOD OF QUOTATION Days
		(To be completed by the Supplier)
i		(10 00 00 mp.otou b) mo obpensi
	CLOSING DATE: 19 JULY 2022	CLOSING TIME: 11:00
ļ		
	DESCRIPTION(SPECIFICATION/S) OF ITEMS/	COMPANY NAME:
ı	SERVICE REQUIRED;	
	SEE SPEC ATTACHED.	TELNIC
		TEL NO:
		FAX NO:
		CONTACT PERSON:
		CONTACT PERSON.
١		CSD :MAAA
	DOES OFFER COMPLY WITH	
ı	SPECIFICATION?	YES/NO
ı	SPECIFICATION:	(DELETE WHICH EVER IS NOT APPLICABLE)
l	DOES ARTICLE COMPLY WITH SABS SPECIFICATION?	
l	HAS IT BEEN INSPECTED BY SABS?	YES/NO
I	THO TO DELIT THOSE ESTABLISHED IN THE STATE OF THE STATE	YES/NO
I		(DELETE WHICH EVER IS NOT APPLICABLE)
l	DELIVERY PERIOD AFTER INITIAL ORDER?	
ı		
İ	IS THE PRICE FIRM	
l		
l	WHERE ARE THE STOCK HELD?	
l	(PHYSICAL ADDRESS , PLEASE)	
ļ		
l		
l	 	
l	QUOTATION PRICE INCLUDING VAT	TOTAL: R
l	(VAT TO BE ADDED BY REGISTERED VAT VENDORS ONLY)	
l		
ŀ		
l	COMPANY OFFICIAL STAMP (COMPULSORY)	
l	COMPANT OFFICIAL STAIMF (COMPOLSORT)	
l		SIGNATURE OF BIDDER
l		STATE OF SISSER
l		
		DATE
1	Quotation to be returned to:	
	Nompumelelo.Luvuno2@kzndard.gov.za	
	Tel. No:033 323 8433	
-	NB: DOCUMENT MUST BE COMPLETED IN FULL	
1		ID RETURNED WITH ALL YOUR SUPPORTING DOCUMENTS.
	The property of the second sec	

COMPAN'	Y NAME :					
ADDRESS	i					
CONTACT	PERSON :					
CONTACT	NUMBER :					
LINE NO.	DESCRIPTION OR SPECIFICATION OF ITEM	REQUIRED QUANTITY	UNIT PRICE E	XCL.	TOTAL PI	RICE
	(Please be very specific and clear)		R	С	R	С
1	Long Sleeve Rectal gloves plastic	10 boxes				
2	Short Sleeve examination latex gloves 8 – 9 L(100 in a box)	10 boxes				
	* LA	ABOUR (IF API	PLICABLE)			
	*DE	LIVERY (IF AP				
***************************************	APPLICABLE TO VAT REGISTERE	D CLIDDLIEDS		OTAL		
*ONLY	APPLICABLE TO VAT REGISTERE	D SUPPLIERS				
			TOTAL P	RICE		
С	IDB Grading (if applicable)					
END-US TELEPI E-MAIL PROPO DELIVE	MUNICIPALITY : Jozini	/Isweli@kzndard : esearch Station		74		v.
*VAT R	egistration No. (Supplier)					
	COMPANY STAMP PRICES A	ARE VALID FOR	Mark one Box	(X)	DAYS	
	SIGN	ATURE				
	DAT	E	••••••			

PART A INVITATION TO BID

		EQUIREMENTS OF THE		PARTMENT/ PUBL						
BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)										
BIDDING PROCEDURE	ENQUIRIES MAY B	E DIRECTED TO	TECHNICAL	ENQUIRIES MAY	BE DIF	RECTED TO:				
CONTACT PERSON	Nompumeleio Lu	vuno	CONTACT PI	ERSON		MR BF MSV	WELI			
TELEPHONE NUMBER	033 323 8433		TELEPHONE	NUMBER		076 9366 91	7			
FACSIMILE NUMBER			FACSIMILE N	NUMBER						
E-MAIL ADDRESS	Nompumelelo.Lu	vuno2@kzndard.gov.za	E-MAIL ADDI	RESS						
SUPPLIER INFORMATIO)N				10.0					
NAME OF BIDDER										
POSTAL ADDRESS										
STREET ADDRESS										
TELEPHONE NUMBER	CODE			NUMBER						
CELLPHONE NUMBER										
FACSIMILE NUMBER	CODE			NUMBER						
E-MAIL ADDRESS										
VAT REGISTRATION NUMBER			4							
SUPPLIER COMPLIANCE STATUS	TAX COMPLIANCE			CENTRAL SUPPLIER						
COMPLIANCE STATUS	SYSTEM PIN:		OR	DATABASE						
				No:	MAAA	\				
ARE YOU THE ACCREDITED										
REPRESENTATIVE IN				OREIGN BASED OR THE GOODS		□Yes	□No			
SOUTH AFRICA FOR	□Yes	□No		WORKS OFFEREI)?					
THE GOODS /SERVICES /WORKS	[IF YES ENCLOSE	PROOFI				[IF YES, ANSWER QUESTIONNAIRE				
OFFERED?	[D22011 j			
QUESTIONNAIRE TO BIL	DDING FOREIGN S	JPPLIERS								
IS THE ENTITY A RESIDE	ENT OF THE REPU	BLIC OF SOUTH AFRICA	(RSA)?			YES	NO			
DOES THE ENTITY HAVE	A BRANCH IN TH	ERSA?				☐ YES ☐ N	10			
DOES THE ENTITY HAVE	A PERMANENT E	STABLISHMENT IN THE F	RSA?			☐ YES ☐	ОИ			
DOES THE ENTITY HAVE	ANY SOURCE OF	INCOME IN THE RSA?				YES [ON			
IS THE ENTITY LIABLE IN IF THE ANSWER IS "NO SYSTEM PIN CODE FRO	" TO ALL OF THE	ABOVE, THEN IT IS NOT	A REQUIREM E (SARS) AND	IENT TO REGISTE IF NOT REGISTE	ER FOR	YES NE A TAX COMPLIAI PER 2.3 BELOW.				

PART B TERMS AND CONDITIONS FOR BIDDING

1. BID SUBMISSION:

- 1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.
- 1.2. ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED—(NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.
- 1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.
- 1.4. THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).

2. TAX COMPLIANCE REQUIREMENTS

- 2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.
- 2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS.
- 2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE WWW.SARS.GOV.ZA.
- 2.4 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.
- 2.5 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.
- 2.6 WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.
- 2.7 NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE."

NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PA	ARTICULARS MAY RENDER THE BID INVALID.
SIGNATURE OF BIDDER:	<u>,</u>
CAPACITY UNDER WHICH THIS BID IS SIGNED: (Proof of authority must be submitted e.g. company resolution)	Signature (11) 111 111 111 111 111 111 111 111 11
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.

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~	12.	~~	ПΦ	F'C	ana	CI!	arat	ากท
4.	-	ш	46		uc	will	aı aı	IVII

- 2.1 Is the bidder, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest1 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, leading to the procuring institution? YES/NO	nave a relationship with any person who is employed
2.2.1	lf so, furnish particulars:	

2.3		/ shareholders / members / partners or any person any interest in any other related enterprise whether YES/NO
2.3.1	If so, furnish particulars:	
2.3.1	If so, furnish particulars:	

¹ 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.

3 DECLARATION

- 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 consortium2 will not be construed as collusive bidding.
- 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.
- 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.
- 3.5 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.
- 3.6 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

Signature	Date
Position	Name of hid

DECLARATION PROVE TO BE FALSE.

² 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.

CONTRACT FORM - PURCHASE OF GOODS/WORKS

THIS FORM MUST BE FILLED IN DUPLICATE BY BOTH THE SUCCESSFUL BIDDER (PART 1) AND THE PURCHASER (PART 2). BOTH FORMS MUST BE SIGNED IN THE ORIGINAL SO THAT THE SUCCESSFUL BIDDER AND THE PURCHASER WOULD BE IN POSSESSION OF ORIGINALLY SIGNED CONTRACTS FOR THEIR RESPECTIVE RECORDS.

		PART 1 (TO BE FILLED IN BY THE E	HDDER)
1.	institution)at the price/s quot	ke to supply all or any of the goods and/or works describedin accordance with the requirements a ted. My offer/s remain binding upon me and open for acceptant the closing time of bid.	nd specifications stipulated in bid number
2.	The following docu	uments shall be deemed to form and be read and construed as	s part of this agreement:
3.	(ii) General Co (iii) Other (spec	Invitation to bid; Tax clearance certificate; Pricing schedule(s); Technical Specification(s); Preference claims for Broad Based Black Economic Emperemental Procurement Regulations 2011; Declaration of interest; Declaration of bidder's past SCM practices; Certificate of Independent Bid Determination Special Conditions of Contract; and cify) e satisfied myself as to the correctness and validity of my bid ified in the bidding documents; that the price(s) and rate(s) and rate(s) and rate(s) and calculations will be at my own risk.	; that the price(s) and rate(s) quoted cover all the goods
4.	I accept full respon as the principal liab	sibility for the proper execution and fulfilment of all obligation le for the due fulfilment of this contract.	s and conditions devolving on me under this agreement
5.	I declare that I have	e no participation in any collusive practices with any bidder or	any other person regarding this or any other bid.
ô.	I confirm that I am o	duly authorised to sign this contract.	
	NAME (PRINT)		WITNESSES
	SIGNATURE		1

NAME OF FIRM

DATE

2.

SBD 7.1

CONTRACT FORM - PURCHASE OF GOODS/WORKS

PART 2 (TO BE FILLED IN BY THE PURCHASER)

1.	reference nut	ımberdate	in my capac	ity asfor the supply of go	oods/works indicated hereu	accept your bid under nder and/or further specified in
2.	An official or	der indicating delivery ir	structions is fortho	oming.		
3.	I undertake t days after re	o make payment for the ceipt of an invoice acco	goods/works delive mpanied by the del	ered in accordance with ivery note.	n the terms and conditions o	of the contract, within 30 (thirty)
	ITEM NO.	PRICE (ALL APPLICABLE TAXES INCLUDED)	BRAND	DELIVERY PERIOD	B-BBEE STATUS LEVEL OF CONTRIBUTION	MINIMUM THRESHOLD FOR LOCAL PRODUCTION AND CONTENT (if applicable)
4.	I confirm that	l am duly authorized to	sign this contract.			
SIGNE	O AT					
NAME (PRINT) .		*******			
SIGNAT	URE .					
OFFICIA	AL STAMP			WITNE	SSES	
				1.		
				2.		

DATE

CONTRACT FORM - RENDERING OF SERVICES

THIS FORM MUST BE FILLED IN DUPLICATE BY BOTH THE SERVICE PROVIDER (PART 1) AND THE PURCHASER (PART 2). BOTH FORMS MUST BE SIGNED IN THE ORIGINAL SO THAT THE SERVICE PROVIDER AND THE PURCHASER WOULD BE IN POSSESSION OF ORIGINALLY SIGNED CONTRACTS FOR THEIR RESPECTIVE RECORDS.

PART 1 (TO BE FILLED IN BY THE SERVICE PROVIDER)

1.	institution) Bid Numbe	y undertake er y period indicate	at t	he price	in accor e/s quoted.	dance with th My offer/s r	ne requ emain	vireme bindin		ask direc	ctives /		pecific		
2.	The follow	ing documents	shall be	deeme	d to form a	and be read a	and co	nstrue	d as part	t of this a	greem	ent:			
	(iv) (v) (vi)	- Tax - Prior - Fille - Prei - Dec - Dec - Ceri	tation to clearan ing sche d in tast ference ferential daration daration difficate o cial Con litions of	bid; ce certi edule(s) d directi claims Procum of inten of bidde f Indepo ditions	ive/propositive/propositive/proposition for Broad ement Regest; er's past Sendent Bid of Contract	Based Black julations 201 CM practices Determinati	1; s;	omic I	Empower	rment Sta	atus Lo	evel of Con	tributic	n in tern	ns of the
3.	specified in	at I have satisfi the bidding do and calculation	cuments	s; that th	he price(s)										
4.		I responsibility cipal liable for th					t of all	obliga	tions and	d conditio	ons de	volving on n	ne und	er this ag	reement
5.	I declare th	at I have no pa	rticipatio	n in an	y collusive	practices wi	th any	bidder	r or any o	other pers	son reç	garding this	or any	other bid	

6.

I confirm that I am duly authorised to sign this contract.

CONTRACT FORM - RENDERING OF SERVICES

PART 2 (TO BE FILLED IN BY THE PURCHASER)

1.	reference number annexure(s).	dated	ny capacity as for the rende	ering of services indi	cated hereunder and	accept your bid under or further specified in the
2.	An official order ind	dicating service delivery inst	ructions is forthcoming.			
3.	I undertake to mak after receipt of an i	e payment for the services r nvoice.	rendered in accordance	with the terms and c	onditions of the contr	act, within 30 (thirty) days
	D	ESCRIPTION OF SERVICE	PRICE (ALL APPLICABLE TAXES INCLUDED)	COMPLETION DATE	B-BBEE STATUS LEVEL OF CONTRIBUTION	MINIMUM THRESHOLD FOR LOCAL PRODUCTION AND CONTENT (if applicable)
4.	I confirm that I am	duly authorized to sign this	contract.			
SIGNE	O AT TA	ON				
NAME (PRINT)					
SIGNAT	TURE					
OFFICI/	AL STAMP			WITNES	SES	
				1	***************************************	
				2 DATE:		

CONTRACT FORM - SALE OF GOODS/WORKS

THIS FORM MUST BE FILLED IN DUPLICATE BY BOTH THE SUCCESSFUL BIDDER (PART 1) AND THE SELLER (PART 2), BOTH FORMS MUST BE SIGNED IN THE ORIGINAL SO THAT THE SUCCESSFUL BIDDER AND THE SELLER WOULD BE IN POSSESSION OF ORIGINALLY SIGNED CONTRACTS FOR THEIR RESPECTIVE RECORDS.

PART 1 (TO BE FILLED IN BY THE BIDDER)

1.	I hereby undertake to purchase all or any of the goods and/or works described in the attached bidding documents from (name or
	institution) in accordance with the requirements stipulated in (bid number) at the price/s
	quoted. My offer/s remain binding upon me and open for acceptance by the seller during the validity period indicated and calculated from
	the closing time of bid.

- 2. The following documents shall be deemed to form and be read and construed as part of this agreement:
 - (vii) Bidding documents, viz
 - Invitation to bid;
 - Tax clearance certificate;
 - Pricing schedule(s);
 - Declaration of interest;
 - 1 Declaration of bidder's past SCM practices;
 - Special Conditions of Contract;
 - General Conditions of Contract; and (viii)
 - (ix) Other (specify)
- I confirm that I have satisfied myself as to the correctness and validity of my bid; that the price(s) quoted cover all the goods and/or works 3. specified in the bidding documents; that the price(s) cover all my obligations and I accept that any mistakes regarding price(s) and calculations will be at my own risk.
- I accept full responsibility for the proper execution and fulfilment of all obligations and conditions devolving on me under this agreement 4. as the principal liable for the due fulfillment of this contract.
- 5. I undertake to make payment for the goods/works as specified in the bidding documents.
- 6. I declare that I have no participation in any collusive practices with any bidder or any other person regarding this or any other bid.
- 7. I confirm that I am duly authorised to sign this contract.

NAME (PRINT)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
CAPACITY		WITNESSES		
OAFAOITI		1		
SIGNATURE		3.		
NAME OF FIRM		DATE:		
DATE				

CONTRACT FORM - SALE OF GOODS/WORKS

PART 2 (TO BE FILLED IN BY THE SELLER)

1.	Ireference n	amber	dated	acity as for the pur	chase of good	ts/works indicated hereunde	. accept your bid under er and/or further specified in		
2.	I undertake	undertake to make the goods/works available in accordance with the terms and conditions of the contract.							
	ITEM NO.	3	DESCRIPTION	PRICE (ALL A TAXES INC					
3.	I confirm tha	i am duly autho	orised to sign this contract						
SIGNE			ON						
NAME	(PRINT)								
SIGNA	TURE								
OFFICIAL STAMP					WITNESSE	ES .			
					3				
					4				
					DATE				