



PART A
INVITATION TO BID

YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (EASTERN CAPE DEPARTMENT OF HEALTH)					
BID NUMBER:	SCMU3-25/26-0069-HO	CLOSING DATE:	28 November 2025	CLOSING TIME:	11H00
DESCRIPTION	REQUEST FOR SUPPLY AND DELIVERY, INSTALL, COMMISSIONING AND MAINTENANCE OF MAGNETIC RESONANCE IMAGING (MRI) IN ECDoh FACILITIES FOR A PERIOD OF 36 MONTHS				
BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)					
SUBMISSION OF BIDS SHOULD BE MADE THROUGH ETENDER PORTAL AND NO PHYSICAL BID DOCUMENTS WILL BE ACCEPTED (www.etenders.gov.za)					
BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO			TECHNICAL ENQUIRIES MAY BE DIRECTED TO:		
CONTACT PERSON	M MAGULA		CONTACT PERSON	Mr M Magula	
TELEPHONE NUMBER	0605579601		TELEPHONE NUMBER	0605579601	
FACSIMILE NUMBER			FACSIMILE NUMBER		
E-MAIL ADDRESS	Mzuhleli.magula@echealth.gov.za		E-MAIL ADDRESS	Mzuhleli.magula@echealth.gov.za	
SUPPLIER INFORMATION					
NAME OF BIDDER					
POSTAL ADDRESS					
STREET ADDRESS					
TELEPHONE NUMBER	CODE		NUMBER		
CELLPHONE NUMBER					
FACSIMILE NUMBER	CODE		NUMBER		
E-MAIL ADDRESS					
VAT REGISTRATION NUMBER					
SUPPLIER COMPLIANCE STATUS	TAX COMPLIANCE SYSTEM PIN:		OR	CENTRAL SUPPLIER DATABASE No:	MAAA
<i>ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES OFFERED?</i>	☐ Yes ☐ No [IF YES ENCLOSE PROOF]		<i>ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES OFFERED?</i>		☐ Yes ☐ No [IF YES, ANSWER THE QUESTIONNAIRE BELOW]
QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS					
IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?				☐ YES ☐ NO	
DOES THE ENTITY HAVE A BRANCH IN THE RSA?				☐ YES ☐ NO	
DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?				☐ YES ☐ NO	
DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?				☐ YES ☐ NO	

IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?

☐ YES ☐ NO

IF THE ANSWER IS "NO" TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS 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, 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 PARTICULARS MAY RENDER THE BID INVALID.

SIGNATURE OF BIDDER:

CAPACITY UNDER WHICH THIS BID IS SIGNED:

(Proof of authority must be submitted e.g. company resolution)

DATE:



BID NO. SCMU3-25/26-0069-HO REQUEST FOR SUPPLY AND DELIVERY, INSTALL, COMMISSIONING AND MAINTENANCE OF MAGNETIC RESONANCE IMAGING (MRI) IN ECDH FACILITIES FOR A PERIOD OF 36 MONTHS

DOCUMENT CONTROL SHEET

Revision			
Drafted By	Date: 28/10/2025	Name: M Magula	Signature
Reviewed By	Date: 29 October 2025	Name: P Mtholeli	Signature
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Approved By: Specification Committee	Date: 30 October 2025	Name: A Cengimbo	Signature:
Advert Approved by:	Date:	Name: C Mgijima	Signature:

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LIST OF ABBREVIATIONS:

AC	Alternating Current
ACCE	American College of Clinical Engineering
BEE	Black Economic Empowerment
CE/EC	European Certification
CET	Clinical Engineering Technician
CM	Corrective Maintenance
CMMS	Computerised Maintenance Management System
CPI	Consumer Price Index
CT	Computed Tomography
DC	Direct Current
EC	Eastern Cape
ECDOH	Eastern Cape Department of Health
ECRI	formerly known as “Emergency Care Research Institute”
EOL	End of Life
EU	European Union
FDA	Food and Drug Administration
GCC	General Conditions of Contract
HDI	Historically Disadvantaged Individuals
Hrs.	Hours
HT	Health Technology
IEC	International Electro-technical Commission
IPM	Inspection Preventive Maintenance
ISO	International Standards Organisation
MRI	Magnetic Resonance Imaging
NHI	National Health Insurance
OEM	Original Equipment Manufacturer
OD	Organizational Development
OHS	Occupational Health and Safety
PM	Preventive Maintenance
PPFA	Preferential Procurement Policy Framework Act
QA	Quality Assurance
ROE	Rate of Exchange
SABS	South African Bureau of Standards
SANS	South African National Standards
SCC	Special Conditions of Contract
SCM	Supply Chain Management
SMME	Small Medium and Micro Enterprises
WHO	World Health Organization
Yrs.	Years
ZAR	South African Rand

PART A: BID NOTICE: SCMU3-25/26-0069-HO

**EASTERN CAPE DEPARTMENT OF HEALTH: HEALTH TECHNOLOGY MANAGEMENT
NOTICE: THE DEPARTMENT INTENDS TO ENGAGE SUITABLY QUALIFIED SUPPLIERS FOR
THE SUPPLY AND DELIVERY, INSTALL, COMMISSIONING AND MAINTENANCE OF
MAGNETIC RESONANCE IMAGING (MRI) IN ECDoH FOR A PERIOD OF 36 MONTHS**

1. The Eastern Cape Department of Health has pursued the services of qualified service providers and or contractors to supply, maintain and support medical equipment for health facilities commission projects.
2. The ECDOH has extended the health technology commissioning and re-commissioning programme to new and existing health facilities throughout the Province of the Eastern Cape. The overall objective of the programme is to strengthen health service delivery and improve service quality in all health facilities. The programme is split into two sub-programmes: sub-programme 1: Medical equipment supply, delivery and acceptance, installation, testing and commissioning, training (use and maintenance), and handing over. Sub-programme 2: Providing maintenance and application support services.
3. The two (2) sub-programmes aim to improve suitability, availability, utilization, safety and functionality of medical equipment and related incidental services in Public Health Facilities (hereinafter called the Final Beneficiary) of the Eastern Cape Department of Health.
4. The Eastern Cape Department of Health (hereinafter called the Purchaser) now invites sealed bids from prospective Bidders for medical equipment supply, maintenance, support and related incidental services. Interested prospective Bidders may obtain further information in respect of the Tender Documents from the office of the Purchaser.
5. . The documents will be available on departmental website: ehealth.gov.za and [e-tender portal](#) on the 3rd of **November 2025**. Bidders have the option to form consortia or joint venture (JV) between companies. Such consortia (joint ventures) will be limited to two (2) companies only. In case of a consortium the Bidders have to define clearly the responsibility of the consortium partners and state the lead partner of the consortium.
6. Bids must be submitted or before **11.00** hours (local time) **on the 28th of November 2025**,
7. Bids must be submitted online via e-tender portal. Bidders must upload the documents on the following containers
 - Completed and Signed Bid Document with its forms
 - Mandatory requirements supporting documents
 - Functionality Evaluation supporting documents
 - Technical Specification requirements supporting documents
 - Completed and signed pricing schedule (Annexure 1, 2 & 3) where applicable.
8. **A compulsory bid briefing session will be held at Clinical Engineering Boardroom, Frere Hospital, East London on the 14th November 2025, at 11H00 hours** with a view to provide an opportunity to the Bidders to interact in person with the Purchaser so that the price schedule and other information are correctly filled in and to ensure that the submitted bids become responsive. All prospective Bidders are invited and strongly encouraged to attend this bid briefing session.

9. The prospective Bidder shall bear all costs associated with the preparation and submission of this bid, and the Purchaser will in no case be responsible or liable for these costs, regardless of the conduct or outcome of the bidding process.

10. The address referred to in paragraph 5 above is as follows:

E-tender portal on the National Treasury website ([www. Etender.gov.za](http://www.Etender.gov.za)). Bidders must ensure that their bids are uploaded timeously to the correct portal. The department will not take any responsibility for late uploaded bids. The e-tender portal is open from the day the tender is advertised until the closing date and time.

NO FAXED, EMAILED OR MAILED BIDS WILL BE ACCEPTED

PART B: INSTRUCCIONES TO BIDDERS

9 BACKGROUND

- 9.1 The Eastern Cape Department of Health has pursued the services of qualified service providers and or contractors for the supply, delivery, commissioning and maintenance of **Magnetic Resonance Imaging (MRI)** in various health districts in the Eastern Cape Department of Health. It is intended that this intervention will be applied throughout the Province of the Eastern Cape benefitting new and existing public Health Facilities in all 8 health/ municipal districts, for which this invitation for tender covers.
- 9.2 The objective of this programme is to establish the required contracts for supply, commissioning and maintenance of health technology and equipment, thus contributing to an improved delivery of health services to the population. The programme purpose is to strengthen quality of health services in public health facilities in the province.

10 LEGISLATIVE AND REGULATORY FRAMEWORK

- 10.1 This bid and all contracts emanating from there shall be subject to the General Conditions of Contract (GCC) issued in accordance with Treasury Regulation 16A published in terms of the Public Finance Management Act, 1999 (Act 1 of 1999). The Special Conditions of Contract (SCC) are Supplementary to that of the General Conditions of Contract. Where the Special Conditions of Contract are in conflict with the General Conditions of Contract, the Special Conditions of Contract prevail as recorded by Clause 2 in the General Conditions of Contract.
- 10.2 The bid and all contracts emanating there from shall be governed within boundaries of South African laws.

11 SCOPE OF SERVICES

- 11.1 The services through the Service Providers/Contractor shall cover supply, delivery, commissioning and maintenance of **Magnetic Resonance Imaging (MRI)** for various health facilities. In addition to these services the Service Provider/Contractor will be responsible for the supply of spare parts, as required.

12 COST OF BIDDING

- 12.1 The Bidder shall bear all costs associated with the preparation and submission of its bid, and the Management Division will in no case be responsible or liable for these costs, regardless of the conduct or outcome of the bidding process.

13 CONTENTS OF BIDDING DOCUMENTS

- 13.1 The Equipment and Services required, bidding procedures and Contract terms are prescribed in the Tender Documents. The Tender Documents include:
- Part A: Bid Notice
 - Part B: Instructions to Bidders
 - Part C: Invitation Letter (Bid strategy)
 - Part D: Special Conditions of the Contract
 - Part E: Commissioning Service Obligations
 - Part F: Maintenance Service Obligations
 - Part G: Returnable Forms

Form No.1: Authorisation to Sign
Form No.3: Summary Form of Offer
Form No.4: Declaration of Interests (SBD 4)
Form No.7: Personnel Strength Assessment Form
Form No.8: Joint Venture Disclosure Form
Form No.9: Preference Points Claim Form (SBD 6.1)
Form No.10: Contractual Agreement
Part H: Returnable Schedules
Schedule A: Functionality Evaluation Criteria
Schedule B: Contractor Response Times
Schedule C: Proposed Fees for Personnel
Schedule D: Equipment Specifications
Schedule E: Pricing Schedules

- 13.2 All Bidders are required to submit these documents, duly filled in ink. The Bidders MUST not change the presentation and format of these documents in either form. **Bidders are to print this document for every bid they are partaking in and attach all documentation required for each.**
- 13.3 The Bidder is expected to examine all instructions, forms, terms, and specifications in the Tender Documents. Failure to furnish all information required by the Tender Documents or submission of a bid not substantially responsive to the Tender Documents in every respect will be at the Bidder's risk and may result in rejection of its Bid.
- 13.4 The detailed scope of services for the Contractor is described under Part E, F, G, and H which will be an integral part of the Contract.

14 CLARIFICATION OF DOCUMENTS

- 14.1 Any Bidder requiring any clarification of the Tender Document may notify the Purchaser in writing at the mailing address as indicated in the Notice. The Purchaser will respond in writing to any request for clarification received no later than 5 days after the compulsory briefing or information sharing meeting. Written copies of the Purchaser's response (including an explanation of the query but without identifying the source of inquiry) will be sent to all prospective Bidders who have attended the compulsory briefing or information sharing meeting.
- 14.2 A compulsory bid briefing session will be held as per date and time specified on the bid notice with a view to provide an opportunity to the Bidders to interact in person with the Purchaser so that the price schedule and other information are correctly filled in and also to ensure that the submitted bids become responsive. All prospective Bidders are invited to the bid briefing session.

15 AMENDMENT OF TENDER DOCUMENTS

- 15.1 At any time prior to the deadline for submission of Bids, the Purchaser may, for any reason, whether at his own initiative or in response to a clarification requested by a prospective Bidder, modify the Tender Documents by amendment.

15.2 The amendment shall be notified in writing or fax to all Bidders who have attended the compulsory briefing session and who have received the tender documents. The amendment shall take precedence and shall be binding.

15.3 In order to afford prospective Bidders reasonable time in which to take the amendment into account in preparing their bids, the Purchaser may, at his discretion, extend the deadline for the submission of bids.

16 LANGUAGE OF BIDS, UNITS OF MEASUREMENT

16.1 The bid prepared by the Bidder and all correspondence and documents relating to the bid, exchanged by the Bidder and the Purchaser, shall be written in the English language. Supporting documents and printed literature furnished by the Bidder may be written in another language, provided that they are accompanied by accurate translation of its pertinent passages. For purposes of interpretation of the bid, the English translation shall govern in such case.

16.2 The units of measurement of the international metric system should apply and be used in the bids.

17 DOCUMENTS COMPRISING THE BID

17.1 The bid prepared and submitted by the Bidder must comprise all the documents listed under Clause 5.1 and including all required supporting information and evidence.

18 BID FORMS

18.1 The Bidder must complete and sign the Bid Forms furnished in the Tender Documents. Failure to sign the bid forms will invalidate the bid.

19 CONSORTIUMS AND JOINT VENTURES

19.1 In response to this invitation to bid, bidders are permitted to form Consortiums/Joint Ventures. Bidders bidding as JV/Consortium must complete in full and sign the returnable Joint Venture Disclosure form (Part G – Form No.8).

19.2 The Consortium must submit a "Letter of Intent" to enter into a Joint Venture and/or a Joint Venture agreement signed by all Consortium/JV partners.

19.3 The agreement shall be legally binding on all consortium members and must clearly stipulate the contract terms and conditions.

19.4 The Consortium/Joint Venture shall nominate and appoint a member authorized to be the lead partner and this authorization shall be included in the agreement entered into between the consortium members;

19.5 The Consortium/Joint Venture shall appoint lead member who shall be the only authorized party to make legal statements, communicate with the Employer and/or any duly appointed

representative, and receive instructions for and on behalf of any and all the members of the consortium;

19.6 The letter of intent and/or copy of the agreement entered into by the consortium members shall be submitted with the bid. Failure to submit the agreement shall disqualify the bid.

20 PERIOD OF VALIDITY

20.1 Validity period for the bid is **hundred and twenty days (120) days** from the date of closing of the Bid. Bid validity for a shorter period shall be rejected by the Employer as non-responsive.

20.2 In exceptional circumstances, the Employer may solicit the Bidder's consent to an extension of the period of validity. The request and the responses thereto shall be made in writing or by fax. A Bidder granting the request will not be required nor permitted to modify his Bid.

21 RESPONSE FIELDS

21.1 Bidders are required to submit responsive bids by completing all the prices, mandatory response fields and item questionnaires on the provided pricing schedule for the individual items. In this regard bidder's attention is drawn to the response field and price structure explanations and examples supplied in the bid document.

21.2 In the event that any returnable form or certificate provided in Part G of this invitation to bid does not have adequate space for the bidder to provide the requested details, the bidder should attach an annexure to such form or certificate on which the requested details should be provided and the bidder should refer to such annexure in the form or certificate provided.

21.3 Non-compliance with this condition may invalidate the bid for the item(s) concerned.

22 SUBMISSION OF BIDS

22.1. All Tender Documents must be submitted on **E-tender portal on the National Treasury Website ([www. E-tender.gov.za](http://www.E-tender.gov.za))**.

Bidders must ensure that their bids are uploaded timeously to the correct portal. The department will not take any responsibility for late uploaded bids. The e-tender portal is open from the day the tender is advertised until the closing date and time.

22.2. NO FAXED, EMAILED OR MAILED BIDS WILL BE ACCEPTED

23 DEADLINE FOR SUBMISSION OF BIDS

23.1 Bids must be received by the Purchaser at the Address and date/time specified in the Invitation to Bid.

23.2 The Purchaser may, at his discretion, extend this deadline for the submission of bids by amending the Tender Documents in which case all rights and obligations of the Purchaser

and Bidders previously subjected to the deadline will thereafter be subject to the deadline as extended.

24 LATE BIDS

- 24.1 Any Bid received by the Purchaser after the prescribed deadline submission date and time, at the website indicated in the bid notice, will be rejected and returned unopened to the Bidder.

25 COUNTER CONDITIONS

- 25.1 Amendments to any of the Bid Conditions or setting of counter conditions by Bidders shall invalidate the bid rendering it non-responsive and therefore may be disqualified.

26 FRONTING

- 26.1 The Purchaser supports broad based black empowerment and recognizes that true empowerment can be achieved through individuals and businesses conducting themselves in line with the country's Constitution and in an honest fair, equitable, transparent, and legal manner. Against this background, the Purchaser condemns any form of fronting.
- 26.2 The Purchaser, in ensuring that bidders conduct themselves in an honest manner will, as part of the bid evaluation processes, conduct or initiate the necessary enquiries/investigations to determine the accuracy of the representation made in bid documents. Should any of the fronting indicators as contained in the Guidelines on Complex Structures and Transactions and Fronting, issued by the Department of Trade and Industry, be established during such enquiry/investigation, the onus will be on the bidder/contractor to prove that fronting does not exist. Failure to do so within a period of 14 days from date of notification may invalidate the bid / contract and may also result in the restriction of the bidder/contractor to conduct business with the public sector for a period not exceeding ten years, in addition to any other remedies the Purchaser may have against the bidder/contractor concerned.

27 MODIFICATION AND WITHDRAWAL OF BIDS

- 27.1 The Bidder may modify or withdraw his/her Bid after the Bid's submission, provided that written notice of the modification or withdrawal is received by the Purchaser prior to the deadline prescribed for submission of Bids.
- 27.2 The Bidder's modification or withdrawal notice shall be prepared, sealed, marked, and dispatched in accordance with the provisions of Clause 14 of the Instructions to Bidders. A withdrawal notice may also be sent by fax but followed by a signed confirmation copy, post marked not later than the deadline for submission of Bids.
- 27.3 No Bid may be modified subsequent to the deadline for submission of Bids.
- 27.4 No Bid may be withdrawn in the interval between the deadline for submission of bids and the expiration of the period of bid validity specified in this bid.

28 CLARIFICATION OF BIDS

28.1 To assist in the examination, evaluation and comparison of bids the Purchaser may, at his discretion, ask the Bidder for a clarification of his bid. The request for clarification and the response shall be in writing and no change in the price or substance of the bid shall be sought, offered or permitted.

29 PRELIMINARY EXAMINATION

- 29.1 The Purchaser will examine the bids to determine whether they are complete, whether any computational errors have been made, whether the documents have been properly signed, and whether the bids are generally in order.
- 29.2 Arithmetical errors will be rectified on the following basis. If there is a discrepancy between the unit price and the total price that is obtained by multiplying/adding the unit price and quantity, the unit price shall prevail and the total price shall be corrected. If the Bidder does not accept the correction of the errors, his bid will be rejected. If there is a discrepancy between words and figures the amount in words will prevail.
- 29.3 The Purchaser may waive any minor informality or non-conformity or irregularity in a bid which does not constitute a material deviation, provided such a waiver does not prejudice or affect the relative ranking of any Bidder.
- 29.4 Prior to the detailed evaluation, the Purchaser will determine the substantial responsiveness of each Bid to the Tender Documents. For purposes of these Clauses, a substantially responsive bid is one which conforms to all the terms and conditions of the Tender Documents without material deviations and offers all equipment items. Deviations from or objections or reservations to critical provisions will be deemed to be a material deviation. The Purchaser's determination of a bid's responsiveness is to be based on the contents of the bid itself without remedy to extrinsic evidence.
- 29.5 A bid determined as not substantially responsive will be rejected by the Purchaser and may not subsequently be made responsive by the Bidder by correction of the nonconformity.

30 EVALUATION CRITERIA

30.1 Stage 1: ADMINISTRATIVE REQUIREMENTS

- 30.1.1 Bidder(s) responses will be evaluated based on the mandatory requirements indicated hereunder. This phase is not scored points and bidders who fail to comply with one or more of the mandatory requirements below will be disqualified.

30.1.2 Central Supplier Database

A proof of registration to CSD must be provided with an updated compliant tax status. For Bidders bidding as a Consortia / Joint Ventures / Sub-contractor, each party in the JV must submit a separate CSD.

30.1.3 Specific Goals

Bidders are required to complete the preference claim form (SBD 6.1) and submit supporting documents to support their claim for specific goals. For Bidders bidding as a Consortia / Joint Ventures / Sub-contractor, consolidated specific goals for the JV must be submitted. Failure to submit supporting documents for specific goals claimed will be interpreted to mean that specific goals points contribution are not claimed.

32.1.4 Consortia / Joint Venture Agreement (where applicable)

Bidders bidding as a Consortia / Joint Ventures with a Sub-contractor must submit a “Letter of Intent” and or “Joint Venture agreement” signed by all JV partners with the bid. The JV partners must complete and sign the Joint Venture Disclosure Form (Part G – Form No.8).

32.1.5 Declaration of Interests (SBD 4)

Bidders must complete in full and duly sign returnable forms for declaration of interest (Part G - Form No.4) and submit with the bid.

32.2 Stage 2: MANDATORY REQUIREMENTS

32.2.1 Summary Form of Offer

Bidders must complete in full and duly sign the bid form of offer (Part G – Form No.3) using ink. An incomplete form of offer with missing fields shall make the bid non-responsive and shall lead to disqualification.

32.2.2 Reference Manufacturer Documents

Bidders must submit bid colour Product Brochures and Specifications demonstrating fully both the functional and technical attributes for the technology/equipment offered in English. Bids and responses that cannot be referenced to true manufacturer documents during evaluations will be interpreted as non-responsive and may be disqualified.

Note: All supporting reference documents submitted with the bid must be true manufacturer documents showing name, original logo, and physical address of the manufacturer. Questionable self-created and or other typed documents will not be accepted and may lead to disqualification.

32.2.3 Equipment Specifications

Bidders must respond in full and duly sign the returnable equipment specifications and pricing schedules (Part H - Schedule D) using “ink” and submit together with the bid. Bidders must reference responses to specifications correctly using the manufacturer brochures and specifications submitted with the bid.

32.2.4 Pricing Schedules

Bidders must complete in full, initial and duly sign the returnable pricing schedules (Part H - Schedule E) using "ink", and submit together with the bid. Failure to complete all fields in the pricing schedules may lead to bid disqualification.

32.2.5 Authorization Letter from the Original Equipment Manufacturer or Distributor

Where the bidder is not the OEM, bidders must submit an accredited certificate from the OEM authorizing the bidder to supply the equipment and services in RSA and/or the Eastern Cape region.

32.2.6 Compulsory Briefing Session

Bidders must attend the compulsory briefing session and complete the attendance register.

32.3 Stage 3: FUNCTIONALITY EVALUATION

32.3.1 The functionality evaluation will be conducted in terms of the evaluative dimensions set-out hereunder and criteria detailed in Part H – Schedule A; where bidders must score a minimum threshold of sixty (60) out of the possible seventy-five (75) points to qualify for stage 3 (Specific Goals). Bidders who fail to meet the minimum threshold will be disqualified.

32.3.2 Technical Specifications (Ts)

The composition of the technical specifications includes the equipment specification and the related equipment pricing schedule. All equipment being tendered for must comply with specification requirements, failure to comply with any of the conditions set out in returnable Equipment Specifications (Part H – Schedule D) and Pricing Schedules (Part H – Schedule E) will result in bid disqualification. Please note that where the specification calls for "certification", this certification must accompany the bid, failure to provide such certification will result in immediate disqualification.

32.3.3 Usability and Application (UA)

The bidder must propose an Application Specialist for the equipment technology offered available to perform commissioning services. The returnable personnel strength assessment form (Part G – Form No.7) must be completed, duly signed and submitted with the bid. Personnel qualification certificate/s must be attached and submitted with the bid as proof. Personnel experience records or resumes and on the job proof of certification must be submitted together with minimum three (3) contactable references.

32.3.4 Maintainability and Serviceability (Ms)

The bidder must propose a Clinical Engineer for the equipment technology offered available to perform commissioning and maintenance services. The returnable personnel strength assessment form (Part G – Form No.7) must be completed, duly signed and submitted with the bid. Qualification certificate/s must be attached and submitted with the bid as proof. Personnel experience records or resumes and certification must be submitted together with minimum (3) contactable references.

32.3.5 Accessibility and Service Support (As)

The bidder must validate to the Purchaser accessibility of the services offered by submitting proof of address in reference to the Purchaser's health service region.

The total score for functionality points will be calculated using the following formula:

$F_s = T_s + M_s + A_s$, where:

F_s : represents the total functionality score

T_s : represents the points scored for compliance to specification

M_s : represents the points scored for maintainability and serviceability

A_s : represents accessible service support and manufacturer spare-parts

32.4 Stage 4: PRICE AND SPECIFIC GOALS SCORE EVALUATION

32.4.1 In terms of regulation 4 of the Preferential Procurement Regulations pertaining to the Preferential Procurement Policy Framework Act, 2011 (Act 5 of 2011), responsive bids will be adjudicated either on 80/20-preference point system in terms of which points are awarded to bidders on the basis of:

The Bid Price: 80 or 90 (maximum 80 or 90 points)

Specific Goals status level of contributor: 20 or 10 (maximum 20 or 10 points)

32.4.2 The following formula will be used to calculate the points for price:

80/20

$$P_s = 80 \left(1 - \frac{P_t - P_{min}}{P_{min}} \right) \quad \text{or } P_s = 90 (1 - \dots\dots\dots)$$

Where:

P_s : Points scored for comparative price of bid under consideration

P_t : Comparative price of bid under consideration

P_{min} : Comparative price of lowest acceptable bid

32.4.3 A maximum of 20 points may be allocated to a bidder for attaining their Specific Goals status level of contributor in accordance with the table below:

Specific Goals Status Level of Contribution	Weighting (of 20 or 10 POINTS)	Number of points (80/20 system)	Number of points (90/10 system)
Historically Disadvantage Individuals	20% Or 10%	4	2
Women	20% or 10%	4	2
Youth	20% or 10%	4	2
Disability	20% or 10%	4	2
Military Veterans	10% or 10%	2	2
Locality	10% or 10%	2	2
Total			

- 32.4.4 Bidders are required to complete the preference claim form (SBD 6.1) and submit their Specific Goals status level verification documents at the closing date and time of the bid in order to claim the Specific Goals status level point.
- 32.4.5 The points scored by a bidder in respect of the level of Specific Goals contribution will be added to the points scored for price.
- 32.4.6 Only bidders who have completed and signed the declaration part of the preference claim form and who have submitted a Specific Goals status level compliance will be considered for preference points.
- 32.4.7 Failure on the part of the bidder to comply with above paragraphs will be deemed that preference points for Specific Goals status level of contribution are not claimed and will therefore be allocated a zero (0).
- 32.4.8 The ECDOH may, before a bid is adjudicated or at any time, require a bidder to substantiate claims it has made with regard to preference.
- 32.4.9 The points scored will be rounded off to the nearest 2 decimals.
- 32.4.10 The Purchaser reserves the right to negotiate further with preferred bidders who obtain better scores on functionality or on specifications items that are of high importance/significance and preferred by the Purchaser.
- 32.4.11 The Purchaser reserves the right to negotiate further with preferred bidders who offer better access and availability to offered equipment support services for the province's health service regions.
- 32.4.12 The Purchaser reserves the right to negotiate further with preferred bidders where opportunity exists to standardize equipment and services.
- 32.4.13 The Purchaser reserves the right to negotiate further with preferred bidders where prices are above the targeted range by the Purchaser.
- 32.4.14 The Purchaser reserves the right to split-award contracts to more than one preferred bidder for the same equipment type or item.
- 32.4.15 The Purchaser reserves the right to split-award contracts per health service region or regions to more than one preferred bidder.
- 32.4.16 The following formula will be used for splitting award between two contractors:

Category	Difference between points	Recommended percentage split
A	Equal points	50/50
B	0,1 – 5%	70/30
C	5,1 – 10%	80/20

- 32.4.17 For Multiple award of the same items to various contractors (more than two), the award of items will be done in terms of mitigating risk and where value proposition will be derived for the offered products and be limited to a maximum of four contractors per item.
- 32.4.18 For multiple bidders bidding for the same item Make and/or Model, the item will only be awarded to the bidder scoring the highest number of points. The same item Make and or model will not be awarded to more than one bidder for the same line item.
- 32.4.19 All equipment that are grouped as a series in the specifications can be treated as a group series and can be evaluated and awarded as such for standardization.
- 32.4.20 Where two or more bidders have scored equal points including equal preference points for Specific Goals, the contract will be awarded to the bidder scoring the highest for functionality.
- 32.4.21 Should two or more bids be equal in all respects, the award shall be decided by the drawing of lots.
- 32.4.22 A contract may, on reasonable and justifiable clinical benefits, be awarded to a bid that did not score the highest number of points.

33 CONTRACT PRICING AND ADJUSTMENTS

- 33.1 The bidder must complete in FULL price details for the Goods and or Services on the Pricing Schedule form/s attached as Part H – Schedule E which completed form/s must be submitted together with the bid documents. Failure to comply with this requirement may invalidate the bid.
- 33.2 Prices quoted must be furnished on the basis of supply, delivery, installation, commissioning and maintenance, including warranty.
- 33.3 Bid pricing details must be completed manually using clear BLACK INK and duly signed. Where electronically completed submissions are made, every page must be initialled.
- 33.4 All bid prices must be inclusive of 15% Value-Added Tax.
- 33.5 It is an express requirement of this invitation to bid that the bidders provide some transparency in respect to their pricing approach. In this regard, bidders must indicate the basis on which they have calculated their pricing by completing all aspects of the Pricing Schedule form Part H – Schedule E.
- 33.6 The prices and fees quoted by the Bidder shall be firm for a period of twelve (12) months. The bidder shall use the prevailing Rate of Exchange (RoE) based on the South African Reserve Bank at 12:00 on the **date of advertisement** to price imported content offered in this bid.
- 33.7 Rate of Exchange to be used to convert bid price: Rate of exchange to be used in this bid in the conversion of the bid price of the item(s) to South African currency is **US Dollar** as indicated in the table below

Currency	Rates of exchange
US Dollar	

33.8 Prices in the pricing schedule of the Contract shall differentiate between foreign and local pricing and shall indicate/substantiate the base rate of exchange (ROE) used to convert the foreign portion to South African currency. Any increase or reduction in the relevant amount as a result of any fluctuation in the rate of exchange or revaluation of currencies shall, irrespective of whether the price is firm or not, be subject to the following conditions:

33.9 Fluctuations between contract pricing schedule rates and quotes: Will be fully exposed to ROE adjustments with the ROE determined at the average buy and sell spot rate on quote date based on the South African Reserve Bank rates at 12:00 on the date of the advertisement.

Currency	Rates of exchange Average buy and sell spot rate on the quote date
US Dollar	

33.10 Fluctuations between quote date and order date: The order amount in South African currency will be placed on the Supplier less, or plus, an amount reflecting any change in the exchange rate exceeding 5% (tolerance rate) compared to the quoted rate, determined at average buy and sell spot rate on quote date based on the South African Reserve Bank rates. In the event where the actual spot rate differs by more than 5% from the quote rate on the date of the order, the supplier may request an updated quote (if more) or the Department may request an updated rate (if less).

33.11 Fluctuations between order date and invoice settlement date: Any further fluctuation in the ROE and the cost of taking forward cover, which may occur between the purchaser order and the date of the invoice settlement, shall be absorbed by the Supplier.

33.12 Any request for price changes or rate of exchange variation shall be supported by documentary evidence, in the form of proof of the applicable rates on the applicable dates, by providing printouts of the South African Reserve Bank rates

33.13 Applications for price adjustments must be submitted in a formal letter listing the items applicable to the adjustment and accompanied by documentary evidence in support of any adjustment claim.

34 DECLARATION OF INTERESTS

34.1 The bidder must complete and submit with the bid a duly signed declaration of interest (SBD 4) form. The declaration of interest form is attached as Part G – Form No.4.

34.2 Failure to comply with this condition shall invalidate the bid.

35 BIDDER DUE DILIGENCE

35.1 The department reserves the right to conduct supplier due diligence prior to award of the contract or at any time during the contract period. This may include site visits to service points and business premise inspections.

36 CONTACTING THE PURCHASER

36.1 No Bidder shall contact the Purchaser on any matter relating to his bid, from the time of the bid opening until the Contract has been awarded.

36.2 Any effort by a Bidder to influence the Purchaser in the Purchaser's bid evaluation, bid comparison or contract award decisions will result in the rejection of the bid.

37 PURCHASER'S RIGHT TO ACCEPT AND REJECT ANY OR ALL BIDS

37.1 The Purchaser reserves the right to accept or reject any bid, and to annul the bidding process and reject all bids at any time prior to contract award without thereby incurring any liability to the affected Bidder or Bidders.

38 NOTIFICATION OF AWARD

38.1 Prior to the expiration of the period of bid validity, the Purchaser will notify the successful Bidder in writing, by registered letter or fax, that his bid has been accepted.

38.2 The notification of award will constitute the formation of the Contract.

39 SIGNING OF THE CONTRACT

39.1 At the same time as the Purchaser notifies the successful Bidder that his bid has been accepted the Purchaser will send the Bidder the Contractual Agreement (Part G – Form No.10) provided in the Tender Documents, incorporating all agreements between the parties.

39.2 Within 14 days of receipt of the Contract Form, the successful Bidder shall sign and date the Contract and return it to the Purchaser.

PART C: BID STRATEGY

REQUEST FOR SUPPLY, DELIVERY, INSTALL, COMMISSIONING AND MAINTENANCE OF MAGNETIC RESONANCE IMAGING EQUIPMENT (MRI) IN ECDOH FACILITIES FOR A PERIOD OF 36 MONTHS

- The Eastern Cape Department of Health request bids for supply and delivery of **MAGNETIC RESONANCE IMAGING** on a rate-based contract (orders to be issued 'as and when' required) over a 36 months period.
- The Purchaser reserves the right to split-award contracts to more than one preferred bidder for the same equipment type or item.
- The Purchaser reserves the right to split-award contracts per health service region or regions to more than one preferred bidder.
- For multiple bidders bidding for the same item Make and/or Model, the item will only be awarded to the bidder scoring the highest number of points. The same item Make and or model will not be awarded to more than one bidder for the same line item.
- All equipment that are grouped as a series in the specifications can be treated as a group series and can be evaluated and awarded as such for standardization.
- Where two or more bidders have scored equal points including equal preference points for Specific Goals, the contract will be awarded to the bidder scoring the highest for functionality.
- Should two or more bids be equal in all respects, the award shall be decided by the drawing of lots.
- A contract may, on reasonable and justifiable clinical benefits, be awarded to a bid that did not score the highest number of points.
- The successful bidder will be requested to supply, install, commission and maintain the equipment ordered directly to where the equipment is required.
- The contract is rates / item price based and will be utilized on an as and when required principle.

PART D: SPECIAL CONDITIONS OF CONTRACT

1. GUIDELINES AND DEFINITIONS

In this Special Conditions of Contract, the following terms shall be interpreted as indicated:

- 1.1 **“Abuse”** the status assigned to a device FAILURE when a service representative finds damage attributable to incorrect use (e.g., during operation, cleaning, or transport).
- 1.2 **“Acceptable bid”** means any bid, which, in all respects, complies with the specifications and conditions of the bid as set out in the bid document.
- 1.3 **“Acceptance inspection”** a detailed INSPECTION performed before a device is put into use either after initial receipt (i.e., the incoming inspection of new equipment) or following other service activities (e.g., a major REPAIR, MODIFICATION, or OVERHAUL) as appropriate.
- 1.4 **“Acquisition cost”** the total cost, including the purchase price, delivery charges, and training and installation costs, to acquire a single piece of equipment.
- 1.5 **“Annualized failure rate”** The number of FAILURES for a device or a group of devices (e.g., a particular model) divided by the product of the number of years being considered and the number of devices in use at a health facility. The following are sample annualized failure rate calculations: (A) A facility with 700 infusion pumps of the same model received 84 REPAIR work orders for that model during one year. $84 \text{ failures} / (700 \text{ pumps} \times 1 \text{ year}) = 0.12 \text{ failures/pump-year}$; (B) For five (5) ultrasound scanners of the same model, there were only two repair requests in three years. $2 \text{ failures} / (5 \text{ scanners} \times 3 \text{ year}) = 0.13 \text{ failures/scanner-year}$; (C) A single magnetic resonance imaging (MRI) unit required nine repairs over three years. $9 \text{ failures} / (1 \text{ unit} \times 3 \text{ year}) = 3 \text{ failures/MRI unit-year}$.
- 1.6 **“Bid”** means a written offer in a prescribed or stipulated form in response to an invitation by an organ of State for the provision of goods, works or services.
- 1.7 **“Black enterprise”** means an enterprise that is 51% owned by black persons and where there is substantial management control. Ownership refers to economic interest while management refers to the membership of any board or similar governing body of the enterprise.
- 1.8 **“Black empowered enterprise”** means an enterprise that is at least 25.1% owned by black persons and where there is substantial management control. Ownership refers to economic interests. Management refers to executive directors. This is whether the black enterprise has control or not.
- 1.9 **“Black people”** includes all African, Coloured or Indian persons who are South African citizens by birth or by descent or who were naturalised prior to the commencement of the constitution in 1993. In addition, the term also includes black people who became South African citizens after the constitution’s commencement but who would have been able to be naturalised prior to this, were it not for the Apartheid laws which prohibited naturalisation of certain persons. This means that an African, Coloured or Indian person who was not a South African citizen before the commencement

of the constitution in 1993 but who would have been entitled to apply to be naturalised prior to 1993, will also be considered a black person and therefore a beneficiary of BEE.

- 1.10 “Black woman-owned enterprise”** means an enterprise with at least 25.1% representation of black women within the black equity and management portion.
- 1.11 “Calibration”** a procedure used to determine a device’s accuracy using test equipment whose own accuracy is appropriate and has been verified and, as needed, adjusting that medical device to meet the manufacturer’s specifications.
- 1.12 “Clinical engineer”** a professional who supports and advances patient care by applying engineering and managerial skills to health-care technology (American College of Clinical Engineering). While a clinical engineer is a specialized biomedical engineer, the terms are often used interchangeably.
- 1.13 “Clinical engineering technician (CET)”** a professional who supports and advances patient care by applying engineering and technical skills to medical equipment. CETs install, inspect, maintain, repair, calibrate and modify medical equipment and support systems to adhere to standard guidelines. CETs educate and advise clinical staff on theory of operation, physiological principles, and safe clinical application of medical equipment maintaining quality patient care.
- 1.14 “Closing time”** means the date and hour specified in the bidding documents for the receipt of bids.
- 1.15 “CMMS” (Computerised Maintenance Management System)** is a computer based asset management system to list all equipment used in patient-care activities, regardless of ownership and to document maintenance services and status.
- 1.16 “Commissioning”** means a systematic process of ensuring that the health facility as a whole and all technological systems, both movable and immovable, perform interactively according to the design intent, and satisfies the Purchaser’s clinical service and operational needs. This shall be achieved by beginning in the design phase, documenting the design intent and continuing through construction, acceptance and the warranty-period with actual verification of performance.
- 1.17 “Commissioning Agent”** means the firm or consultant nominated and or appointed in writing by the Purchaser to oversee execution and performance of this contract by the contractor. The Purchaser shall have authority over the commissioning agent or clinical engineers appointed under the commissioning agent. The Purchaser shall have authority to replace the Commissioning Agent in writing to the Contractor.
- 1.18 “Community or broad-based enterprise”** means an enterprise that has an empowerment shareholder who represents a broad base of members such as a local community or where the benefits support a target group, for example black women, people living with disabilities, the youth and workers. Shares are held via direct equity, non-profit organisations and trusts.

Benefits from the shareholding should in a measurable sense be directed towards the uplifting of the community through job creation, welfare, skills development, entrepreneurship and human

rights. At the same time, directors and management of groups should significantly comprise black persons.

These arrangements are appropriate in situations where the activities or operations of an enterprise or industry directly impact on a community or are located in a community or may benefit a community. Notable examples are large industrial projects, mining and tourism. Other instances, which do assist in broadening the shareholder base, are employee share ownership schemes; these are a viable empowerment shareholder option. In this and other circumstances, these arrangements should not detract from the ability of the shareholder to exercise significant influence or control over the operations of the business.

1.19 “Comparative price” means the price after the factors of a non-firm price and all unconditional discounts that can be utilized have been taken into consideration.

1.1 “Consortium or joint venture” means an association of persons for the purpose of combining their expertise, property, capital, efforts, skills and knowledge in an activity for the execution of a contract.

1.2 “Contract” means the agreement entered into between the Purchaser and the Supplier/Maintenance Contractor, as recorded in the Contract Form signed by the parties, including all attachments and appendices thereto and all documents incorporated by reference therein;

1.3 “Contractor” means the Service Provider individual or firms providing Maintenance and Services under this Contract;

1.4 “Contract Fees” means the fee payable to the Supplier/Maintenance Contractor under the Contract for the full and proper performance of his contractual obligations;

1.5 “Contracted service” SERVICE provided under contract by a contractor or sub-contractor.

1.6 “Control” means the possession and exercise of legal authority and power to manage the assets, goodwill and daily operations of a business and the active and continuous exercise of appropriate managerial authority and power in determining the policies and directing the operations of the business.

1.7 “Corrective maintenance” A process used to restore the physical integrity, safety and/or performance of a device after a failure. Corrective maintenance and unscheduled maintenance are regarded as equivalent to the term repair. This contract uses these terms interchangeably.

1.8 “Corrupt practice” means the offering, giving, receiving, or soliciting of anything of value to influence the action of a public official in the procurement process or in contract execution.

1.9 “Country of origin” means the place where the goods were mined, grown or produced or from which the services are supplied. Goods are produced when, through manufacturing, processing or substantial and major assembly of components, a commercially recognized new product results that is substantially different in basic characteristics or in purpose or utility from its components.

1.10 “Day” means calendar day;

- 1.11 “Delivery”** means delivery in compliance with the conditions of the contract or order;
- 1.12 “Delivery ex stock”** means immediate delivery directly from stock actually on hand;
- 1.13 “Delivery into consignees store or to his site”** means delivered and unloaded in the specified store or depot or on the specified site in compliance with the conditions of the contract or order, the supplier bearing all risks and charges involved until the supplies are so delivered and a valid receipt is obtained.
- 1.14 “Disability”** means, in respect of a person, a permanent impairment of a physical, intellectual, or sensory function, which results in restricted, or lack of, ability to perform an activity in the manner, or within the range, considered normal for a human being.
- 1.15 “Downtime”** the time that a device is not available for clinical use because of the need to perform activities such as INSPECTIONS, PREVENTIVE MAINTENANCE, and REPAIRS. Downtime is specified in hours or as a percentage. Note that it is typically calculated only over a specified “use period.” A use period is based on when a device is scheduled to be available for clinical use or when a contract’s terms specify that a device will be available. For instance in this contract, the use period is 24 hours a day for 365 days a year, or for 52 weeks a year.
- 1.16 “Dumping”** occurs when a private enterprise abroad markets its goods on own initiative in the RSA at lower prices than that of the country of origin and which have the potential to harm the local industries in the RSA.
- 1.17 “ECRI”** formerly known as Emergency Care Research Institute.
- 1.18 “Effective Date”** means the date of execution of this Agreement based on the Notification of Award by the Purchaser, furnishing of the Performance Security by the Contractor, the signing of Contract and Payment against the Purchase Order and Performance Security;
- 1.19 “Equity Ownership”** means the percentage ownership and control, exercised by individuals within an enterprise.
- 1.20 “Failure”** The condition of not meeting intended performance or safety requirements, and/or a breach of physical integrity. A failure is corrected by repair and/or calibration.
- 1.21 “Force majeure”** means an event beyond the control of the supplier and not involving the supplier’s fault or negligence and not foreseeable. Such events may include, but is not restricted to, acts of the purchaser in its sovereign capacity, wars or revolutions, fires, floods, epidemics, quarantine restrictions and freight embargoes.
- 1.22 “Fraudulent practice”** means a misrepresentation of facts in order to influence a procurement process or the execution of a contract to the detriment of any bidder and includes collusive practice among bidders (prior to or after bid submission) designed to establish bid prices at artificial non-competitive levels and to deprive the bidder of the benefits of free and open competition.

1.23 “GCC” means the General Conditions of Contract.

1.24 “Goods” means all of the equipment, machinery, and/or other materials that the supplier is required to supply to the purchaser under the contract.

1.25 “Health technology (HT)” HT is the application of organized knowledge and skills in the form of devices, medicines, vaccines, procedures and systems developed to solve a health problem and improve quality of life. It is used interchangeably with health-care technology.

1.26 “Historically Disadvantaged Individual (HDI)” means a South African citizen -

a) who, due to the Apartheid policy that had been in place, had no franchise in national elections prior to the introduction of the Constitution of the Republic of South Africa, 1983 (Act 110 of 1983) or the Constitution of the Republic of South Africa, 1993, (Act 200 of 1993) (“the interim Constitution); and/or

b) who is a female; and/or

c) who has a disability:

provided that a person who obtained South African citizenship on or after the coming to effect of the Interim Constitution, is deemed not to be a HDI;

1.27 “HT Directorate” means the Health Technology unit which will have the responsibility to manage performance of the Supplier/Contractor;

1.28 “Imported content” means that portion of the bidding price represented by the cost of components, parts or materials which have been or are still to be imported (whether by the supplier or his subcontractors) and which costs are inclusive of the costs abroad, plus freight and other direct importation costs such as landing costs, dock dues, import duty, sales duty or other similar tax or duty at the South African place of entry as well as transportation and handling charges to the factory in the Republic where the supplies covered by the bid will be manufactured;

1.29 “In-house service” the SERVICING of medical equipment performed by the Purchaser’s own staff.

1.30 “Inspection” refers to scheduled activities or interactions with medical equipment designed to detect unsuspected equipment problems, or to ensure medical equipment functions correctly. It includes both performance inspections and safety inspections. These occur in conjunction with performed preventive maintenance, corrective maintenance, or calibration but can also be completed as a stand-alone activity scheduled at specific intervals.

1.31 “Inspection and preventive maintenance (IPM)” IPM refers to all the scheduled activity necessary to ensure a piece of medical equipment is functioning correctly and is well maintained. IPM therefore includes inspection and preventive maintenance (PM).

1.32 “Local content” means that portion of the bidding price which is not included in the imported content provided that local manufacture does take place;

- 1.33 “Maintenance”** is interaction with medical equipment designed to identify and correct suspected equipment problems, or to perform activities designed to prevent the future occurrence of problems (inspection and preventive maintenance). Maintenance is a collective term comprising of acceptance inspection, calibration, inspection, modification, overhauls, preventive maintenance, and repair.
- 1.34 “Manufacture”** means the production of products in a factory using labour, materials, components and machinery and includes other related value-adding activities;
- 1.35 “Medical device”** an article, instrument, apparatus or machine that is used in the prevention, diagnosis or treatment of illness or disease, or for detecting, measuring, restoring, correcting or modifying the structure or function of the body for some health purpose. Typically, the purpose of a medical device not achieved by pharmacological, immunological or metabolic means.
- 1.36 “Medical equipment”** are medical devices requiring calibration, maintenance, repair, user-training, and decommissioning. Medical equipment is used for specific purposes of diagnosis, monitoring, treatment or rehabilitation following disease or injury. Medical equipment includes devices such as monitoring equipment, life supporting equipment, imaging equipment, laboratory equipment, mechanical equipment, as well as other equipment supporting the care of the patient, whether or not it is in the immediate vicinity of a patient. In addition, these categories includes other devices, such as fridges, that support the care of a patient, but are generally not specifically manufactured for use in health care services.
- 1.37 “Modification”** the alteration of a device from its original state to improve performance, reliability, or safety or to add new functionality. (This is distinct from restoring a device from a deteriorated state.) Examples of modifications include installing software with new functionality and adding components to a device.
- 1.38 “OEM”** refers to Original Equipment Manufacturer. If parts and service kits furnished are not OEM then the Contractor must be able to furnish certification by manufacturer that they meet or exceed OEM specifications and manufactured under current ISO/SABS standards.
- 1.39 “Order”** means an official written order issued for the supply of goods or works or the rendering of a service;
- 1.40 “Overhaul”** an extensive (i.e., far exceeding routine PREVENTIVE MAINTENANCE) replacement or rebuilding of worn parts on a device to significantly extend its life.
- 1.41 “Owned”** means having all the customary elements of ownership, including the right of decision-making and sharing all the risks and profits commensurate with the degree of ownership interests as demonstrated by an examination of the substance, rather than the form of ownership arrangements;
- 1.42 “Performance inspections”** these activities are designed to test the operating status of a medical device. Tests compare the performance of the device to technical specifications established by the manufacturer in their maintenance or service manual. These inspections are not meant to extend

the life of equipment, but merely to assess its current condition. Performance inspections are sometimes referred to as 'quality assurance inspections'.

- 1.43 "Predictive maintenance"** This activity involves a forecasting technique to determine the rate of failure of certain types of replaceable components (e.g. batteries, valves, pumps, seals). The maintenance interval is then set so components are replaced before they fail, ensuring the equipment continues to operate reliably.
- 1.44 "Preliminary taking over"** this is commissioning milestone where the Purchaser issues provisional acceptance of the goods and services which represents the start of the warranty period commencing on the date of issuing of preliminary acceptance certificate by the Purchaser or the duly appointed agent.
- 1.45 "Preventive maintenance (PM)"** PM involves maintenance performed to extend the life of the device and prevent failure. PM is usually scheduled at specific intervals and includes specific maintenance activities such as lubrication, cleaning (e.g. filters) or replacing parts that are expected to wear (e.g. bearings) or which have a finite life (e.g. tubing). The procedures and intervals are usually established by the manufacturer. In special cases the user may change the frequency to accommodate local environmental conditions. Preventive maintenance is sometimes referred to as 'planned maintenance' or 'scheduled maintenance'. This contract document uses these terms interchangeably.
- 1.46 "Project site"** where applicable, means the place indicated in bidding documents.
- 1.47 "Purchaser"** means the Eastern Cape Department of Health (ECDOH) purchasing the Goods and Services;
- 1.48 "Rand value"** means the total estimated value of a contract in Rand denomination that is calculated at the time of the bid invitations and includes all applicable taxes and excise duties.
- 1.49 "Repair"** a process used to restore the physical integrity, safety, and/or performance of a device after a failure. Used interchangeably with corrective maintenance.
- 1.50 "Repair time"** the hands-on time needed to repair and have medical equipment ready for return to use, which is the time entered on the associated work order or job card.
- 1.51 "Response time"** the time from the initiation of a request for SERVICE until a service representative solves the problem (e.g., by telephone) or arrives to REPAIR a device or to remove it for repair.
- 1.52 "Revisable item"** an item is declared revisable only if it has minor defects or is partially compliant.
- 1.53 "Safety inspections"** these are activities performed to ensure the device is electrically and mechanically safe. These inspections may also include checks for radiation safety or dangerous gas or chemical pollutants. When these inspections are done, the results are compared to local standards as well as to manufacturer's specifications. The frequency of safety inspections may be

different than planned maintenance and performance inspections, and are usually based on regulatory requirements.

1.54 “SCC” means the Special Conditions of Contract.

1.55 “Service” a collective term comprising activities and sub-activities within COMMISSIONING and MAINTENANCE.

1.56 “Services” means those functional services ancillary to the supply of the goods, such as transportation and any other incidental services, such as installation, acceptance testing, provision of technical assistance, training, catering, warranties and security, maintenance and other such obligations of the supplier covered under the contract. "Services" means Services including incidental services to be provided under the Contract and defined in **Part E**;

1.57 “Small, Medium and Micro Enterprises (SMMEs)” bears the same meaning assigned to this expression in the National Small Business Act, 1996 (Act 102 of 1996).

1.58 “Specific contract participation goals” means the goals as stipulated in the Preferential Procurement Regulations, 2001. In addition to above-mentioned goals, the Regulations [12. (1)] also make provision for organs of State to give particular consideration to procuring locally manufactured products.

1.59 “Sub-Contractor” are sub-service providers of the contractor and or independent service organization providing specialised application support and maintenance services whose cost are covered under the Contractor’s contract sum.

1.60 “Sub-contracting” means the primary contractor’s assigning or leasing or making out work to, or employing another person to support such a primary contractor in the execution of part of a project in terms of the contract.

1.61 “Time-and-materials service” SERVICE performed by a Contractor or Sub-contracting organization and paid for on the basis of the costs of labour, parts and supplies, and travel time. It may be scheduled or unscheduled.

1.62 “Total cost of service” the total SERVICE costs for a single unit or the average per-unit cost for all units of the same model; it includes IN-HOUSE SERVICE, CONTRACTED SERVICE, and TIME-AND-MATERIALS SERVICE.

1.63 “Unable to duplicate” the status assigned to a device FAILURE when a service representative finds no problem (e.g., when equipment passes INSPECTION) following a report of failure.

1.64 “User error” the status assigned to a device FAILURE when a service representative finds no problem (e.g., when equipment passes INSPECTION) following a report of failure and the representative determines that the device or an accessory was used incorrectly.

1.65 “Written” or “in writing” means handwritten in ink or any form of electronic or mechanical writing.

2 APPLICATION

- 2.1** These Special Conditions of Contract (SCC) are Supplementary to that of the General Conditions of Contract (GCC). However, where the Special Conditions of Contract are in conflict with the General Conditions of Contract, the Special Conditions of Contract shall prevail as recorded by Clause 2 in the General Conditions of Contract.
- 2.2** The bid and all contracts emanating there from will be governed within boundaries of South African laws.

3 STANDARDS

- 3.1** The goods supplied shall conform to the standards mentioned in the bidding documents and technical specifications. In the absence of which, other relevant publications such as International Standards Organisation (ISO), European Standards, SANS, SABS, World Health Organisation (WHO) guidelines for Medical Equipment Management, ECRI standards or other relevant publications may be referred to.
- 3.2** The goods supplied shall conform to Radiation Control standards, guidelines and procedures.

4 USE OF CONTRACT DOCUMENTS AND INFORMATION; INSPECTION

- 4.1** The Contractor shall not, without the Purchaser's prior written consent, disclose the contract, or any provision thereof, or any specification, plan, drawing, pattern, sample, or information furnished by or on behalf of the Purchaser in connection therewith, to any person other than a person employed by the Contractor in the performance of the contract. Disclosure to any such employed person shall be made in confidence and shall extend only as far as may be necessary for purposes of such performance.
- 4.2** The Contractor shall not, without the Purchaser's prior written consent, make use of any document or information mentioned in Clause 4.1 except for purposes of performing the Contract.
- 4.3** Any document, other than the Contract itself mentioned in Clause 4.1 shall remain the property of the Purchaser and shall be returned (all copies) to the purchaser on completion of the Contractor's performance under the contract if so required by the Purchaser.
- 4.4** The Contractor shall maintain all necessary books, accounts and records and shall establish a reporting system for the Service and shall permit the Purchaser to inspect the Contractor's accounts and records relating to the performance of the Contractor and have them audited by auditors appointed by the Purchaser.
- 4.5** The Contractor shall permit the Purchaser or any Person designated to visit and inspect the contractor's records relating to the performance of the contractor without charge at times that may reasonably be requested, and all books, records, and documents relating to the said Service shall at such times be open to have them audited by auditors appointed by the Purchaser, if so required by the Purchaser.

5 METHOD OF PROVIDING SERVICES

- 5.1** The Contractor shall supply the Goods and perform the said Services and its other obligations hereunder in accordance with the law of the Republic of South Africa and this Contract.
- 5.2** If the Contractor is aware of a conflict, it shall inform the Purchaser accordingly and the parties shall discuss in good faith and agree the manner in which the Contractor should perform the services.
- 5.3** The Contractor shall determine the cost associated with the provision of the goods and services necessary under the Contract and provides sufficient funding to meet these anticipated costs.
- 5.4** The Contractor shall ensure that appropriate equipment, tools and competent personnel are readily available to perform the activities as described in this agreement.

6 PATENT RIGHTS

- 6.1** The Contractor shall indemnify 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.

7 PERFORMANCE SECURITY

- 7.1** Within thirty (30) days of receipt of the notification of contract award or issuance of a purchase order for the equipment and services, the successful Contractor shall furnish to the purchaser as performance security amount (100%) for the maintenance service fees agreed and specified in the award notice or purchase order provided by the Purchaser.
- 7.2** The proceeds of the performance security shall be payable to the Purchaser as compensation for any loss resulting from the Contractor's failure to complete his obligations under the contract.
- 7.3** The performance security shall be denominated in the currency of the Purchaser or in a freely convertible currency acceptable to the Purchaser and shall be in the form of a bank guarantee or an irrevocable letter of credit issued by a reputable commercial bank located in the Republic of South Africa, acceptable to the Purchaser, in the form provided in the bidding documents or another form acceptable to the purchaser.
- 7.4** The performance security will be discharged by the purchaser and returned to the contractor not later than thirty (30) days following the date of completion of the contractor's performance obligations under the contract, including any warranty obligations. Discharge of the performance security to the contractor shall be done only for completed contractor service obligations. Release of payments will be authorised by the purchaser when goods or service obligations are received and completed during the contract period.
- 7.5** Where the contractor fails to complete his obligations under the contract terms and conditions, the remaining proceeds of the performance security shall be payable back to the purchaser including unused funds and or savings made from the service performance security.

8 DEMONSTRATIONS, INSPECTIONS, TESTS AND ANALYSES

- 8.1** All bidding, pre-award and post-award testing and demonstration of Goods and Services will be for the account of the Bidder and or Contractor.
- 8.2** Goods and Services to be rendered shall at any stage during production or execution or on completion be subject to inspection, the premises of the bidder or contractor shall be open, at all reasonable hours, for inspection by a representative of Purchaser or an organization acting on behalf of Purchaser.
- 8.3** Routine quality assurance inspections to goods and services during the contract period shall be carried out by the Purchaser or by any duly authorised Commissioning Agent at will, and the Purchaser shall itself make the necessary arrangements, including payment arrangements with the testing authority concerned.
- 8.4** If the inspections, tests and analyses referred to in clauses 8.2 and 8.3 show the Goods and Services to be in accordance with the contract requirements, the cost of the inspections, tests and analyses shall be defrayed by the Purchaser.
- 8.5** Where the Goods or Services referred to in clauses 8.2 and 8.3 do not comply with the contract requirements, irrespective of whether such Goods or services are accepted or not, the cost in connection with these inspections, tests or analyses shall be defrayed by the Contractor.
- 8.6** Goods and services which are referred to in clauses 8.2 and 8.3 and which do not comply with the contract requirements may be rejected.
- 8.7** Any contract Goods or Services may on or after delivery be inspected, tested or analysed and may be rejected if found not to comply with the requirements of the contract. Such rejected Goods shall be held at the cost and risk of the Contractor who shall, when called upon, remove them immediately at his own cost and forthwith substitute them with Goods and or Services which do comply with the requirements of the contract. Failing such removal the rejected Goods shall be returned at the Contractor's cost and risk. Should the Contractor fail to provide the substitute Goods and Services forthwith, the Purchaser may, without giving the Contractor further opportunity to substitute the rejected Goods and Services, purchase such Goods and Services as may be necessary at the expense of the Contractor.
- 8.8** The Purchaser's Project Manager or any other duly appointed Commissioning Agent shall have authority to inspect and certify quality, and either accept or reject goods and services provided by the Contractor. The Contractor shall accept certification results and proceed to act in accordance with provisions of Clause 8.4 to 8.7 without deferring commissioning service obligations specified in Part E.

The provisions of clauses 8.4 to 8.7 shall not prejudice the right of the Purchaser to cancel the contract on account of a breach of the conditions thereof, or to act in terms of Clause 23.

9 PACKING

- 9.1** The Contractor shall provide such packing of the goods as is required to prevent their damage or deterioration during transit to their final destination, as indicated in the contract. The packing shall be sufficient to withstand, without limitation, rough handling during transit and exposure to extreme temperatures, salt and precipitation during transit, and open storage. Packing, case size and weights shall take into consideration, where appropriate, the remoteness of the goods' final destination and the absence of heavy handling facilities at all points in transit.
- 9.2** The packing, marking, and documentation within and outside the packages shall comply strictly with such special requirements as provided for in the contract, including additional requirements specified in Part E, and in any subsequent instructions ordered by the Purchaser.

10 DELIVERY AND DOCUMENTS

- 10.1** Delivery of the goods shall be made by the Contractor in accordance with the terms specified in the contract. The details of shipping and/or other documents to be furnished by the Contractor are specified in Part E of this contract.
- 10.2** Documents to be submitted by the supplier are specified in Part E of this contract.

11 INSURANCE

- 11.1** The goods supplied under the contract shall be fully insured in a freely convertible currency against loss or damage incidental to manufacture or acquisition, transportation, storage, delivery, installation, testing and commissioning.
- 11.2** The Contractor shall obtain a workman's compensation insurance, public liability insurance and insurance covering liability for damage to properties and injuries to persons arising from negligence or default of the Contractor and any other relevant policies commonly taken for the provision of said Goods and Services. The insurance policies shall cover adequate compensation as per the prevailing laws of the Republic of South Africa.
- 11.3** The Contractor must also provide all risk property insurance to cover all equipment belonging to the Purchaser on the Contractor's site or in transit using company vehicles.
- 11.4** All policies of insurance shall be taken out in the name and account of the Contractor.

12 TRANSPORTATION

- 12.1** Pricing for the offered Goods and Services by the Contractor shall be all-inclusive of delivery transportation.
- 12.2** Deliveries shall be made directly to the Purchaser's final beneficiary throughout the Eastern Cape region in accordance with commissioning obligations specified in Part E.

13 INCIDENTAL SERVICES

13.1 The supplier shall be required to provide any or all of the following services, including additional services, specified in Part E of this contract:

- a) performance or supervision of on-site assembly and/or commissioning of the supplied goods;
- b) furnishing of tools required for assembly and/or maintenance of the supplied goods;
- c) furnishing of a detailed operations and maintenance manual for each appropriate unit of the supplied goods;
- d) performance or supervision or maintenance and/or repair of the supplied goods, for a period of time agreed by the parties, provided that this service shall not relieve the supplier of any warranty obligations under this contract; and
- e) training of the purchaser's personnel, at the supplier's plant and/or on-site, in assembly, start-up, operation, maintenance, and/or repair of the supplied goods.

13.2 Prices charged by the supplier for incidental services shall be included in the contract price and shall cover the full warranty period for the said goods. Outside of the warranty period, the contract price for the incidental services shall be agreed upon in advance by the parties and shall not exceed the prevailing rates charged to other parties by the contractor for similar services and shall conform to rates for professional services in the public service.

14 SPARE PARTS

14.1 The Contractor may be required to provide any or all of the following materials, notifications, and information pertaining to spare parts manufactured or distributed by the Contractor:

- a) such spare parts as the Purchaser may elect to purchase from the Contractor, provided that this election shall not relieve the Contractor of any warranty obligations under the contract; and
- b) in the event of termination of production of the spare parts:
 - (i) Advance notification to the purchaser of the pending termination, in sufficient time to permit the purchaser to procure needed requirements; and
 - (ii) following such termination, furnishing at no cost to the purchaser, the blueprints, drawings, and specifications of the spare parts, if requested.

15 WARRANTY

15.1 The Contractor warrants that the goods supplied under the contract are new, unused, of the most recent or current models and that they incorporate all recent improvements in design, materials and software unless provided otherwise in the contract. The Contractor further warrants that all goods supplied under this contract shall have no defect, arising from design, materials, or workmanship (except when the design and/or material is required by the Purchaser's specifications) or from any act or omission of the Contractor, that may develop under normal use of the supplied goods in the conditions prevailing in the country and region of final destination.

15.2 This warranty shall remain valid for twenty-four (24) months after the goods, or any portion thereof as the case may be, have been delivered to and accepted at the final destination indicated in the contract.

15.3 The Purchaser shall promptly notify the supplier in writing of any claims arising under this warranty.

15.4 Upon receipt of such notice, the supplier shall, within the period specified in this contract and with all reasonable speed, repair or replace the defective goods or parts thereof, without costs to the purchaser.

15.5 If the supplier, having been notified, fails to remedy the defect(s) within the period specified in this contract, the purchaser may proceed to take such remedial action as may be necessary, at the supplier's risk and expense and without prejudice to any other rights which the purchaser may have against the supplier under the contract.

16 PAYMENT

16.1 Payment for equipment and commissioning services:

- a) The Purchaser's HT Project Manager or any duly appointed Commissioning Agent shall have authority to certify payment for equipment and services provided under the Contract. Without prejudice, the Purchaser or Commissioning Agent shall issue preliminary Taking Over certification after the Contractor has satisfied contract terms and conditions, and commissioning service obligations specified in Part E.
- b) The Contractor shall furnish the Purchaser with an invoice accompanied by a copy of the delivery note and evidence of preliminary taking over by the Purchaser that certifies fulfilment of contract obligations stipulated in the contract under Part E.
- c) Payments for goods: 100% of the equipment's contract amount will be paid by the Purchaser within thirty (30) calendar days after completion of delivery, installation and acceptance testing of the goods.
- d) Payments for services: 100% of the services contract amount will be paid by the purchaser within thirty (30) calendar days after over the provision of the performance guaranty.

16.2 Payments for maintenance services:

- a) The Purchaser's HT Project Manager or any duly appointed firm's Clinical Engineer shall have authority to certify payment for maintenance services provided under the Contract. Without prejudice, the Purchaser or duly appointed Clinical Engineer, shall certify maintenance services completed by the Contractor, upon the Contractor having satisfied contract terms and conditions, and service obligations specified in Part F.
- b) Together with the invoice the Contractor shall furnish documentation related to conducted maintenance services, service certification, record of completed training activities and indicators linked to actual response time, equipment downtime and other indicators agreed upon in this contract.

16.3 Payments for spare parts:

- a) Fees for spare parts shall be included in manufacturer warranty, extended warranties and comprehensive maintenance service options.
- b) Specific spare parts such as vacuumed packed articles (e.g. examination and operating light bulbs x-ray tubes) LED lamps and ultrasound probes shall be included in warranty fees.
- c) Fees for preventive maintenance shall include service spare-parts and kits in full.
- d) Not included under spare parts are consumables.

16.4 The Contractor's request(s) for payment shall be made to the Purchaser in writing, accompanied by an invoice describing, as appropriate, the Services performed and the fulfilment of other obligations stipulated in the contract;

16.5 Payments shall be made by the Purchaser within thirty (30) days of submission of a complete and valid invoice.

17 PRICES AND FEES

17.1 Fees charged by the Contractor for Goods delivered and Services performed under the Contract shall not vary from the prices quoted by the Contractor in this bid, with the exception of any price adjustments authorised by the Purchaser or in the Purchaser's request for bid validity extension, as the case may be. Goods and services listed on to the contract will be billed according to the fees established in the pricing schedule for equipment indicated in Part H, Schedule E.

17.2 After warranty period has expired, similarly fees for maintenance services shall be billed according to prices established in this bid, with the exception of any price adjustment authorised by the Purchaser.

18 CONTRACT AMENDMENTS

18.1 No variation in or modification of the terms of the Contract shall be made except by written amendment signed by the parties concerned.

19 CESSION OR ASSIGNMENT

19.1 The Contractor shall not assign, in whole or in part, its obligations to perform under the contract, except with the Purchaser's prior written consent.

20 SUBCONTRACTS

20.1 The Contractor shall notify the purchaser in writing of all sub-contracts to be awarded under this contract if not already specified in the bid.

20.2 Such notification, in the original bid or later, shall not relieve the Contractor from any liability or obligation under the Contract.

20.3 Sub-contractors must comply with the provisions of the Contract.

21 DELAYS IN CONTRACTOR'S PERFORMANCE

21.1 Delivery of the goods and performance of services shall be made by the contractor in accordance with the time schedule prescribed by the purchaser in the contract.

21.2 If at any time during performance of the contract, the contractor or its subcontractor(s) should encounter conditions impeding timely delivery of the goods and performance of services, the supplier shall promptly notify the purchaser in writing of the fact of the delay, its likely duration and its cause(s). As soon as practicable after receipt of the contractor's notice, the purchaser shall evaluate the situation and may at his discretion extend the contractor's time for performance, with or without the imposition of penalties, in which case the extension shall be ratified by the parties by amendment of contract.

21.3 No provision in a contract shall be deemed to prohibit the obtaining of supplies or services from a national department, provincial department, or a local authority.

21.4 The right is reserved to procure outside of the contract small quantities or to have minor essential services executed if an emergency arises, the contractor's point of supply is not situated at or near the place where the supplies are required, or the contractor's services are not readily available.

21.5 Except as provided under Clause 25, a delay by the contractor in the performance of its delivery obligations shall render the contractor liable to the imposition of penalties, pursuant to Clause 22, unless an extension of time is agreed upon pursuant to Clause 21.2 without the application of penalties.

21.6 Upon any delay beyond the delivery period in the case of a supplies contract, the purchaser shall, without cancelling the contract, be entitled to purchase supplies of a similar quality and up to the same quantity in substitution of the goods not supplied in conformity with the contract and to return any goods delivered later at the contractor's expense and risk, or to cancel the contract and buy such goods as may be required to complete the contract and without prejudice to his other rights, be entitled to claim damages from the contractor.

22 PENALTIES

22.1 Subject to Clause 25, if the Contractor fails to deliver any or all of the equipment 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 of 2% 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 pursuant to Clause 23.

22.2 If the Contractor fails to perform maintenances services within timelines indicated in PART H, SCHEDULE B and in the event that the equipment supplied has been on downtime for more than five percent (5%) of one single year of the warranty period, i.e. more than 18 natural days in one single year, the Contractor shall extend the warranty period for a duration of six (6) times of the time duration when the equipment was on downtime. The Purchaser may also consider termination of the contract pursuant to Clause 23.

23 TERMINATION FOR DEFAULT

23.1 The Purchaser, without prejudice to any other remedy for breach of Contract, by written notice of default sent to the Contractor, may terminate this Contract in whole or in part:

- a) if the Contractor fails to deliver any or all of the goods within the period(s) specified in the contract, or within any extension thereof granted by the purchaser pursuant to Clause 21.2;
- b) if the Contractor fails to perform any other service obligation(s) under the contract; or
- c) if the Contractor, in the judgment of the Purchaser, has engaged in corrupt or fraudulent practices in competing for or in executing the contract.

23.2 In the event the purchaser terminates the contract in whole or in part, 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 Contractor shall be liable to the Purchaser for any excess costs for such similar goods, works or services. However, the Contractor shall continue performance of the contract to the extent not terminated.

24 ANTI-DUMPING AND COUNTERVAILING DUTIES AND RIGHTS

24.1 When, after the date of bid, provisional payments are required, or antidumping or countervailing duties are imposed, or the amount of a provisional payment or anti-dumping or countervailing right is increased in respect of any dumped or subsidized import, the State is not liable for any amount so required or imposed, or for the amount of any such increase. When, after the said date, such a provisional payment is no longer required or any such anti-dumping or countervailing right is abolished, or where the amount of such provisional payment or any such right is reduced, any such favourable difference shall on demand be paid forthwith by the contractor to the State or the State may deduct such amounts from moneys (if any) which may otherwise be due to the contractor in regard to supplies or services which he delivered or rendered, or is to deliver or render in terms of the contract or any other contract or any other amount which may be due to him.

25 FORCE MAJEURE

25.1 Notwithstanding the provisions of Clauses 22 and 23, the supplier shall not be liable for forfeiture of its performance security, damages, or termination for default if and to the extent that his delay in performance or other failure to perform his obligations under the contract is the result of an event of force majeure.

25.2 If a force majeure situation arises, the supplier shall promptly notify the purchaser in writing of such condition and the cause thereof. Unless otherwise directed by the purchaser in writing, the supplier shall continue to perform its obligations under the contract as far as is reasonably practical, and

shall seek all reasonable alternative means for performance not prevented by the force majeure event.

26 TERMINATION FOR INSOLVENCY

- 26.1** The Purchaser may at any time terminate the contract by giving written notice to the Contractor if the supplier becomes bankrupt or otherwise insolvent. In this event, termination will be without compensation to the Contractor, provided that such termination will not prejudice or affect any right of action or remedy which has accrued or will accrue thereafter to the Purchaser.

27 SETTLEMENT OF DISPUTES

- 27.1** If any dispute or difference of any kind whatsoever arises between the Purchaser and the Contractor in connection with or arising out of the contract, the parties shall make every effort to resolve amicably such dispute or difference by mutual consultation.
- 27.2** If, after thirty (30) days, the parties have failed to resolve their dispute or difference by such mutual consultation, then either the Purchaser or the Contractor may give notice to the other party of his intention to commence with mediation. No mediation in respect of this matter may be commenced unless such notice is given to the other party.
- 27.3** Should it not be possible to settle a dispute by means of mediation, it may be settled in a South African court of law.
- 27.4** Mediation proceedings shall be conducted in accordance with the rules of procedure specified as follows:
- a) The parties shall agree on and appoint a mediator within ten (10) working days of the date of which the dispute was declared. Whether or not the mediation resolves the dispute, the parties shall bear their own costs concerning the mediation and share costs of the mediator and related costs equally.
 - b) The mediator shall agree the procedures, representation and dates for the mediation process with the parties. The mediator may meet the parties together or individually to help reach a settlement.
 - c) Where the parties reach settlement of the dispute or any part thereof, the mediator shall record such agreement and on signing thereof by the parties the agreement shall be final and binding.
- 27.5** Notwithstanding any reference to mediation and/or court proceedings herein,
- a) the parties shall continue to perform their respective obligations under the contract unless they otherwise agree; and
 - b) the Purchaser shall pay the Contractor any monies due the Contractor.

28 INDEMNITY OF LIABILITY

28.1 The Contractor shall indemnify in full and hold the Purchaser harmless from and against any actions, suits, claims, demands, proceedings, losses, damage, compensation, charges and expenses whatsoever to which the Purchaser shall or may be or become liable in respect of and arising from:

- a) Any breach by the Contractor of its obligations hereunder;
- b) Any neglect act, error or omission on the part of the Contractor, its directors, officers, employees, Sub-Contractors in the performance of the said Services;
- c) The misconduct of the Contractor or its directors, officers, employees, Sub-Contractors;
- d) Any loss or damage to any property or injury to any Person of whatsoever nature or kind and howsoever or whosoever sustained or caused or contributed arising out of the use or occupation of the Purchasers properties by the Contractor and not caused by the negligence or wilful act, default or omission of the Purchaser personnel.

29 LIMITATION OF LIABILITY

29.1 Except in cases of criminal negligence or wilful misconduct, and in the case of infringement pursuant to Clause 6;

- a) the Contractor shall not be liable to the Purchaser, whether in contract, tort, or otherwise, for any indirect or consequential loss or damage, loss of use, loss of production, or loss of profits or interest costs, provided that this exclusion shall not apply to any obligation of the supplier to pay penalties and/or damages to the Purchaser; and
- b) the aggregate liability of the Contractor to the Purchaser, whether under the contract, in tort or otherwise, shall not exceed the total contract price, provided that this limitation shall not apply to the cost of repairing or replacing defective equipment.

30 CONTRACT PERIOD

30.1 The contract period for equipment and services supply shall commence on the Effective Date subject to contractor performance under the terms and conditions of this Contract, the Contract shall continue for a period of (12) months expiring on the 1st anniversary of the Effective Date ("Contract Period").

30.2 The contract period for commissioning services and maintenance services shall commence on the Purchase Order issuance date and Preliminary Taking Over date respectively, subject to contractor performance under the terms and conditions of this Contract, the Contract period shall continue for a period of (24) months expiring on Final Taking Over date.

30.3 Where preferred by the Purchaser, additional after warranty maintenance services shall commence on the Final Taking Over Date subject to the Contractor furnishing payment for a Performance Security and under the terms and conditions of this Contract, the Contract period for the additional maintenance service shall continue for a period of (5) years, unless stated otherwise.

31 EXTENSION OF CONTRACT PERIOD

31.1 The Purchaser shall notify the Contractor in writing within a reasonable notice period prior to the date of expiry of Contract and pursuant to Clause 22, if the Purchaser intends to extend the Contract for a further period. The Parties shall as soon as reasonably practicable after the receipt of such notification negotiate the terms and condition for such extension, to the intent that such terms and conditions are to be agreed by the parties prior to the date on which the contract period would have otherwise expired.

32 EXPIRY OF THE CONTRACT PERIOD

32.1 Upon the expiry of the Contract:

- a) The Contractor shall withdraw all its personnel and sub-contractors and all rights of the Contractor shall revert.
- b) All liabilities, obligations, claims, suits or proceedings whatsoever existing prior to and as at the expiry whether arising out of or in connection with:
 - (i) Any agreement entered into by the Contractor.
 - (ii) Any act, default omission or negligence of the Contractor its employee or Sub-service providers.
- c) The Contractor shall hand over all equipment and any part of to the respective Health Facilities and obtain a written confirmation that the contracted equipment has been handed over in working conditions.

32.2 The Contractor shall make available or furnish all information records and documents related to services as will enable the Purchaser to continue equipment management, operation and maintenance.

32.3 The Purchaser shall as soon as practicable pay to the Contractor (if a balance is due to the Contractor), in accordance with payment terms and conditions of the contract.

32.4 The expiry of the Contract shall not affect any claim or obligation of payments that the Parties may have against the other prior to the expiry of the Contract.

33 ISSUING OF ORDER

33.1 The anticipated delivery period as specified in the PART E of this SCC shall commence on the date on which the order is issued by the Purchaser.

34 GOVERNING LANGUAGE

34.1 The contract shall be written in English, as specified by the Purchaser in the Instructions to Bidders. All correspondence and other documents pertaining to the contract that is exchanged by the parties shall also be written in English.

35 APPLICABLE LAW

35.1 The contract shall be interpreted in accordance with Republic of South Africa laws.

36 NOTICES

36.1 Any notice given by one party to the other pursuant to the Contract shall be sent in writing or by fax and confirmed in writing to the address specified for that purpose in the Special Conditions of the Contract's Authorization Declaration form.

36.2 A notice shall be effective when delivered or on the notice's effective date, whichever is later. The time mentioned in the contract documents for performing any activity after such aforesaid notice has been given, shall be determined from the date of delivery of such notice.

37 TAXES AND DUTIES

37.1 A foreign supplier shall be entirely responsible inter alia for all taxes, stamp duties, license fees, and other such levies imposed outside the Purchaser's country incurred until delivery of contracted goods to the Purchaser.

37.2 A local supplier shall be entirely responsible inter alia for all taxes, stamp duties, license fees, and other such levies incurred until delivery of the contracted goods to the Purchaser.

37.3 No contract shall be concluded with any bidder whose tax matters are not in order. The bidder should ensure that tax status is compliant and updated on the Central Supplier Database (CSD).

38 OWNERSHIP AND COPYRIGHT

38.1 Ownership of all products produced in terms of this agreement, of whatever nature, vest in ECDOH.

38.2 The copyright of products, of whatever nature, commissioned and produced in terms of this agreement, and that have been paid for by the Purchaser are owned exclusively by ECDOH.

PART E: MEDICAL EQUIPMENT COMMISSIONING SERVICES AGREEMENT

39 COMMISSIONING SERVICE OBLIGATIONS OF THE CONTRACTOR

39.1 Supply:

Item	Contractor obligations
a)	All technology items supplied must be new and no part shall be second hand or refurbished.
b)	All equipment must operate from 220-240 Volts AC, 50HZ supply or as specified in the equipment specifications.
c)	The mains electrical power supply cables of the equipment being offered must be local 15 amps, 3 core live, earth, and neutral. Cable length must be a minimum three (3) meters long. The complete mains cable of the unit tendered for must be SABS approved.
d)	The equipment quoted for must be protected against electromagnetic interference and must comply with the IEC 601-1-2 standard.
e)	The equipment and technology shall be the latest model from the manufacturer
f)	The Purchaser intends to maximize use of the equipment for the full expected life-time. Availability and ease of access to spare parts, accessories and consumables shall be guaranteed in the Eastern Cape region by the contractor throughout the expected equipment life-time, specified by the Manufacturer or by ECRI standards where manufacturer life-expectancy is not available.
g)	The equipment and technology supplied shall be capable of modification and or upgrade. Modifications shall be done using OEM parts, and equivalent or better parts that are approved by the OEM.
h)	All documents and resources shall be original manufacturer type and shall be supplied with the equipment.
i)	Quick user-instructions, warning labels, and alarm code interpretations shall be conveniently mounted on the equipment for ease of reference.
j)	Any additional technology required to comply with Purchaser's requirements in equipment specification shall form part of the basic price.
k)	The Contractor shall supply and provide to the Purchaser updates and revisions of user and service manuals at no extra cost for the expected lifetime of the equipment, specified by the manufacturer
l)	The Purchaser reserves the right to select or reject optional and other additional items as listed in the pricing schedule.

39.2 Delivery and Preliminary Acceptance:

Item	Contractor obligations
a)	The Contractor shall deliver all equipment in the Lot within eight (8) weeks after the purchase order issue date by the Purchaser. Failure to deliver the equipment within 8 weeks may lead to cancellation of the Purchase Order.
b)	The Contractor shall report the status of all Orders to the Purchaser in writing every 2 weeks after the date of receiving the order. The Purchaser has a right to cancel orders that are delayed and where the Contractor has failed to issue feedback status reports as required.

c)	The Contractor shall apply by written notice to the Purchaser for a Delivery and Preliminary Acceptance not less than 10 Days prior to the date when, in the Contractor's opinion, the delivery of the equipment and services of the Order will be complete and ready for Provisional Handing Over by the contractor for Preliminary acceptance by the Purchaser. The Purchaser will reject any unscheduled equipment deliveries, and the Contractor shall be liable for all costs associated with incorrect and unscheduled deliveries.
d)	The goods shall be Delivered Duty Paid to the Purchaser's beneficiary. The successful Contractor must arrange for delivery and acceptance testing of the equipment. Copies of delivery forms and acceptance test certificates shall be forwarded to the Purchaser or any duly appointed representative.
e)	Software changes or upgrades to the equipment which are corrective in nature and initiated due to software errors, technology end of life, regulatory requirements or safety reasons, shall be delivered and installed at no charge for the life of the equipment.
f)	The Contractor shall deliver the original software license, in the name of the final Client Beneficiary together with the equipment.
g)	The Contractor shall make available to the Purchaser all the consumables, measurement and certified calibration instruments used during commissioning operations.
h)	The Contractor shall provide together with the goods the educational material for maintenance and user training courses. The educational material will be in English without any exception. The educational material shall be approved by the Purchaser.
i)	The Contractor shall deliver together with the equipment one hard copy and one CD/Video of the operation (user) manual and maintenance (service) manual in English delivered with each unit provided to the Purchaser. Service manuals shall provide the following, but not limited information: fault finding guide, circuit diagrams / schematics, circuit descriptions and layouts, test and calibration guide, part-numbers for parts and enlarged diagrams for mechanical parts
j)	All labels and indications on the equipment as well as the software included with the equipment shall be in English.
k)	All the necessary calibration and maintenance software, where applicable, required to maintain and calibrate the equipment, shall be supplied and delivered with the equipment at no extra cost to the final bid price
l)	Delivered service manuals shall document and provide all possible access codes for equipment software, where applicable.
m)	The Contractor shall provide to the Purchaser's beneficiary a qualified Clinical Engineer and relevant Application Specialist during equipment delivery and preliminary acceptance. Deliveries performed by unqualified third parties shall be rejected and the Contractor shall carry all associated costs.
n)	The Purchaser will inspect the delivered goods and equipment checking their quantities and their integrity in relation to technical specification.
o)	Where installation is not included in the contract, the Purchaser will install directly or through a third party, and check the quality of the goods in this phase and will preliminary accept the goods in accordance with the result of the check.
p)	The Contractor may be present during the above mentioned installation phases. If the Contractor is not present, they shall accept any decision taken by the Purchaser.
q)	The Contractor shall supply to the Purchaser all the consumables, measurement, test and calibration instruments used during official commissioning operations. All the expenses

	necessary for the official testing and commissioning procedure shall be responsibility of the Contractor.
r)	The Purchaser shall evaluate, item by item, the consistency of the goods and the services supplied respecting the contract conditions and the technical specifications.
s)	The Contractor shall be invited by the Purchaser to assist with the measurement operations during official commissioning for provisional acceptance. At the end of the operations the Purchaser shall prepare minutes of the results and make it available to the Supplier.
t)	Each item shall be declared as compliant, not compliant or revisable.
u)	The official testing and commissioning is declared successful when all the items of the specification are declared compliant.
v)	The Contractor shall substitute all not-compliant items with compliant ones at own cost.
w)	An item is declared revisable only if it has minor defects or is partially compliant. In these cases, only when the Contractor has substituted the item or has solved the defects, he can request for a new official testing and commissioning session.
x)	The not-compliant or revisable items shall be substituted or modified without contravening specified quality and safety standards, manufacturer specifications, any contractual costs for the Purchaser and any contractual deadlines.
y)	Any delay due to not-compliant or revisable items is responsibility of the Contractor, consequently claims for liquidated damages are applicable.

39.3 Building Alterations and Installation (including connection to building services and utilities):

Item	Contractor obligations
a)	The Contractor must inspect the site before making installations and must identify building alterations needed to accommodate the equipment offered. The contractor shall be responsible for additional building, air-conditioning, electrical, mechanical and plumbing alterations required by the installation. The contractor shall attend the compulsory briefing session during which the scope of work required shall be established and agreed appropriate pricing for this work in the installation site).
b)	All installations performed shall comply with the Occupational Health and Safety Act of 1993; Machinery and Equipment Regulations; and applicable SANS requirements. Installation pricing provided in the bid's pricing schedule shall be deemed to include the following:
i.	Building (Civil) alterations in equipment room spaces that are essential to the positioning and installation of the equipment such that the equipment is accessible to all known users and maintainers, has access to services and utilities, and provides safe operating conditions to the user and maintainer.
ii.	Electrical reticulation and distribution arrangements essential to ensuring that all persons using the room occupied by the equipment are protected from potential health and safety hazards presented by the installation.
iii.	Mechanical installations and arrangements required to provide favorable environmental conditions for the equipment, healthy and safe conditions to both the user and maintainer.

iv.	Electronic and ICT arrangements required by the installation within the vicinity of the equipment location, unless otherwise stated by the Purchaser in writing.
c)	The Contractor shall not decommission old existing equipment from a room or location without first obtaining written consent by the Purchaser. The Contractor shall ensure that decommissioned old equipment and parts are handed over to the Purchaser. No asset shall be removed from the Purchaser's site without written consent by the Purchaser.
d)	The Contractor shall transport the equipment inside the hospital to the exact installation site, open the packages, assemble and install it according with the manufacturer requirements.
e)	The Contractor shall perform Field Installation Verification which verify that all equipment and systems comply with local health and safety codes, including building design plans and specifications.
f)	The Contractor shall clean up the site of any packaging/shipping material after installation and after requesting the Purchaser whether or not the original boxes must be left with the Purchaser;
g)	The Contractor shall install the equipment taking into consideration the construction characteristics of the hospital receiving the equipment.
h)	The Contractor is responsible to install the equipment "ready to start" for testing and commissioning.
i)	Any damage to hospital structures or finishing caused by the Contractor personnel during the installation will be repaired by the Contractor within 2 weeks using the same construction materials of the damaged areas. Workmanship quality shall be consistent with that of existing and adjacent installations.

39.4 Acceptance Inspection (or acceptance testing):

	Contractor obligations
a)	Official testing and commissioning will be carried out per Equipment Lot at the Purchaser/final Beneficiary's site when all items and services of the Order have been supplied.
b)	The Contractor shall apply by written notice to the Purchaser for an Official Testing and Commissioning not less than 10 days before the date when, in the Contractor's opinion, the delivery and installation of the equipment and services of relevant Order shall be complete and ready for Provisional Handing Over by the contractor leading to Preliminary Taking Over by the Purchaser
c)	The Contractor shall test, calibrate and commission the equipment as appropriate in a way that, on installation completion, they are fully operational and can be used. The Purchaser reserves the right to witness the Contractor's testing and commissioning without thereby relieving the Contractor of his obligation to provide goods in a fully operable condition.
d)	A complete set of commissioning forms with the entire set of tests performed and the results obtained shall be given to the Purchaser after the final inspection of the equipment. The Purchaser reserves the right to verify the results obtained by the Contractor.
e)	Prior to the Purchaser proceeding with the testing and commissioning, the Contractor shall make available to the Final beneficiary all consumables, measurement and calibration instruments for use during the commissioning.

f)	The Contractor shall perform Safety Performance Tests which verify electrical safety of all equipment and systems. The tests must be specified in detail on the commissioning forms and performed in accordance with OEM specifications.
g)	The Contractor shall perform Functional Performance Tests which verify proper start-up and performance accuracy of all equipment and systems. These tests are to be specified in detail on the commissioning forms and performed in accordance with manufacturer specifications.

39.5 Training of Equipment Users:

	Contractor obligations
a)	The Contractor shall appoint a qualified and competent Application Specialist to train users in the correct equipment handling, utilization and clinical application.
b)	The Application Specialists shall be qualified experts belonging to the Manufacturer and/or representatives in the country/province of the Contractor and/or by qualified experts certified by the Manufacturer. The quality and level of the training shall be equivalent to the Manufacturer's original factory training. The training will be held in English Language.
c)	The Contractor shall conclude training of users within 10 days from date of official testing and commissioning. Training shall be available on request to the Purchaser for the duration of the warranty period at no additional cost.
d)	The Contractor's Application Specialist shall train users at the Purchaser's installation-site and at own cost. The location of the training course delivery shall be the place where the equipment is delivered and installed.
e)	The training course for users shall be both theoretical and practical, using the equipment in the offered configuration and planning simulations of all possible mistakes/errors occurring during equipment utilization.
f)	The practical training course shall be organized and offered for maximum 2 users per session for each equipment item installed.
g)	The equipment training course for users shall focus on at least the following topics:
i.	Presentation and contacts of the key reference personnel (application specialists and technicians/engineers);
ii.	Correct equipment daily set-up, testing and calibration;
iii.	Correct equipment clinical application and utilization;
iv.	Possible user-errors/mistakes plus risks for users and patients;
v.	Daily cleaning, disinfection and maintenance inspection procedures in order to assure long equipment life;
vi.	General equipment functions in the offered configuration and display, alarm signals and error signals showing all the possible equipment functions;
h)	The average duration of the course shall not be less than 2 hours per item.
i)	The evaluation of the know-how acquired will be done by the Contractor through two (2) tests: one (1) entrance test prior to beginning the course and one (1) final test at the end of the course. The trainees shall certify that the received training is satisfactory.

j)	Additional and refresher training by the Application Specialist shall be administered for the full 2-year warranty period at no additional cost to the Purchaser. The training shall be provided upon request by the Purchaser.
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39.6 Training of Maintenance Personnel:

	Contractor obligations
a)	The Contractor shall train clinical engineering technicians made available by the Purchaser's final Beneficiary in the most frequent problems that could occur during equipment utilization and that are within the technicians' competencies.
b)	The Contractor shall conclude training of the clinical engineering technicians within 60 days from date of initial supply and delivery of the quoted equipment to the customer. Training shall be made available on request for the duration of the full warranty period at no additional cost to the Purchaser.
c)	The training course for clinical engineering technicians shall be both theoretical and practical, using the equipment in the configuration offered and simulators. The Contractor must supply simulators and test equipment where and when it is needed. The simulators and test equipment are property of the Contractor who will keep it after the course is completed.
d)	The Contractor shall provide the educational material. The educational material will be in English language without any exception.
e)	The training course for clinical engineering technicians shall be organized to for a minimum of 1 person to a maximum of 5 persons.
f)	The location of the training course delivery for clinical engineering technicians shall be the place where the equipment is delivered and installed. In exceptional cases where this is not possible, the Purchaser/final Beneficiary will offer approval for the Contractor to alter the training location.
g)	The trainers shall be qualified experts belonging to the Manufacturer Company and/or representatives in the country/region of the Contractor and/or by qualified experts certified by the Manufacturer. The quality and level of the training shall be equivalent to the Manufacturer's original factory training. The course will be held in English language.
h)	The training course for maintenance technicians shall focus at least on the following topics:
i.	Presentation of the reference Contractor technicians and their contacts;
ii.	General equipment functions, specific technical characteristics and alarm signals;
iii.	Main electrical and functional schemes;
iv.	Calibrations and daily maintenance procedures in order to assure the longest equipment life;
v.	Inspective and Preventive Maintenance procedures and its regular recurrence;
vi.	Corrective maintenance (to solve the most frequent problems);
vii.	Equipment safety controls.
i)	The average duration of the training course shall not be less than 2 hours per item.

j)	A final test administered by the trainees shall be organized at the end of the training course in order to verify the know-how acquired. The test results shall be delivered to the Purchaser before commissioning. A certificate of competency must be issued to the trainees on successful completion of the training.
k)	In the event that the Purchaser has not provided maintenance personnel to the Contractor to train, the training obligation shall remain valid for the duration of the full warranty period.
l)	Additional and refresher training shall be available on request by the Purchaser.

39.7 Preliminary Equipment Handing Over:

	Contractor obligations
a)	Official testing and commissioning will be carried out per Equipment Order when all items and services of the Lot have been supplied.
b)	The Contractor shall apply by written notice to the Purchaser for an Official Testing and Commissioning not less than 10 days before the date when, in the Contractor's opinion, the delivery of the goods and services of one Order will be complete and ready for Preliminary Taking Over by the Purchaser
c)	Upon receipt of the above mentioned note and within 15 days after the receipt of the equipment and the Services according to the specified requirements, the Purchaser shall conclude the Official Testing and Commissioning procedure.
d)	If the Purchaser fails to conclude the Official Testing and Commissioning procedure within the aforementioned period he shall be deemed to have issued the Preliminary Taking-Over Certificate on the last day of that period.
e)	The Purchaser shall evaluate, item by item, the consistency of the goods and the services supplied respecting the contract conditions and the technical specifications after the installation phase.
f)	The Contractor shall be invited by the Purchaser to assist with the measurement operations. At the end of the operations the Purchaser shall prepare minutes of the results and make it available to the Supplier.
g)	Each item shall be declared as compliant, revisable, or non-compliant.
h)	The official testing and commissioning is declared successful when all the items of an Order are declared compliant.
i)	The Contractor shall substitute all non-compliant items with compliant ones at its own cost.
j)	Where an item is revisable, the Contractor shall substitute that item or resolve the defects. The contractor shall request for a new official testing and commissioning date from the Purchaser or any duly appointed representative.
k)	The not-compliant or revisable items shall be substituted or modified without any break of quality and safety standards, Manufacturer specifications, and any cost for the Purchaser or any extension to the contractual deadlines. Any delay due to not-compliant or revisable items is responsibility of the Contractor, thus liquidated damages are applicable.
l)	The Equipment is taken over by the Purchaser once it has been supplied together with the services in accordance with the Contract. Within two weeks after successful official testing and commissioning of all the items of one Order and of one Health Facility, the Purchaser shall deliver to the Contractor the Preliminary Taking Over Certification. This Certificate shall be deemed to signify the Purchaser's satisfaction with the supplied Goods and Services and

	therefore the completion of the Contractor's obligations under Contract for the said Order and or Hospital.
m)	The warranty period shall commence on the date of Preliminary Taking Over stated in the Preliminary Taking-Over Certificate.

39.8 Manufacturer Warranties:

	Contractor obligations
a)	The Manufacturer warranty certificate shall be in the name of the Purchaser's final Beneficiary.
b)	The Contractor warrants that the goods supplied under the contract are new, unused, of the most recent or current models and that they incorporate all recent improvements in design and materials unless provided otherwise in the contract. The supplier further warrants that all goods supplied under this contract shall have no defect, arising from design, materials, or workmanship (except when the design and/or material is required by the purchaser's specifications) or from any act or omission of the supplier, that may develop under normal use of the supplied goods in the conditions prevailing in the country of final destination.
c)	The warranty period shall be two (2) years starting from the date of issuance of the Preliminary Taking-Over certification (after testing and commissioning).
d)	The warranty shall cover the entire machine including any and all component parts, spare parts, software modules and upgrades, accessories and maintenance thereof. The warranty coverage will be applied fully and without any cost to Purchaser and to the users whatsoever, including but not limited to the cost of routine visits, call-outs, training, labour, spare parts, and shall be valid for unlimited consultations within the warranty period save in cases of proven misuse, intentional damage, or force majeure.
e)	If in the opinion of the Contractor, equipment was subjected to misuse, intentional damage or force majeure; therefore, not covered by warranty, the Contractor should present unquestionable proof of such misuse, intentional damage or force majeure.
f)	The Manufacturer warranty shall be carried out at Contractor's premises, being all the travel and transport cost covered by the Contractor.
g)	The two-year (24 months) manufacturer warranty shall be included in the bid price of the equipment and services. The pricing schedule for the equipment and services shall be completed in full.
h)	The Purchaser shall promptly notify the Contractor in writing of any claims arising under this warranty.
i)	Upon receipt of such notice, the Contractor shall, within the period specified in Part H - Schedule B and with all reasonable speed, repair or replace the defective goods or parts thereof, without costs to the Purchaser.
j)	At least 95% of one single year of full functioning, i.e. 347 days out of 365/366 days, shall be guaranteed by the Contractor within the warranty period. In the event that the equipment supplied has been on downtime for more than five percent (5%) of one single year of the warranty period, i.e. more than 18 natural days in one single year, the Contractor shall extend the warranty period for a duration of six (6) times of the time duration when the equipment was on downtime.
k)	If the Contractor, having been notified, fails to remedy the defect(s) within the period specified in Part H Schedule B, the Purchaser may proceed to take such remedial action as

	may be necessary, at the Contractor's risk and expense and without prejudice to any other rights which the Purchaser may have against the Contractor under the contract.
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39.9 Final Taking Over Certificate

	Contractor obligations
a)	Within one (1) month after expiration of the initial 2 year warranty period for the Equipment and Services or any part, and provided the Contractor has fulfilled all his obligations under Contract, the Purchaser's shall issue to the Contractor a Final Taking-Over Certificate.
b)	Before issuing the Final Taking-Over Certificate, the Purchaser shall receive from the Contractor updated written undertaking that the Manufacturer shall continue to grant the availability (not sole provision) of spare parts and support services for the Goods for a period equivalent to the expected lifespan specified by ECRI standards.

39.10 After Warranty Services (Maintenance)

	Contractor obligations
a)	The availability (not the provision) of the maintenance services and equipment spare parts shall be guaranteed for a minimum period equivalent to the expected device lifespan by ECRI from date of issuance of the final equipment taking over certificate. A written warranty letter from the Manufacturer shall confirm the availability (not the provision) of spare parts for a period and the letter must be presented before the Final Taking Over Certificate.

PART F: MEDICAL EQUIPMENT MAINTENANCE SERVICES AGREEMENT

40 MAINTENANCE SERVICE OBLIGATIONS OF THE CONTRACTOR

40.1 Preventive Maintenance (PM) Services:

- a) The Contractor shall perform in full all OEM specified preventive maintenance services for the full Manufacturer Warranty period established in this contract.
- b) After warranty Preventive Maintenance services, optional to the Purchaser, shall begin from the date of Preliminary Taking Over (after testing and commissioning). The Contractor shall price the optional (5) five-year Preventive Maintenance and Call-Out Service fees in the specified pricing schedule indicated in Part H – Schedule E for the equipment.
- c) The Contractor shall perform appropriate PM services on the equipment offered as per requirements of the original equipment manufacturer (OEM). The contractor shall prepare and submit PM schedules for the equipment scope for approval by the Purchaser or any other duly appointed representative. In the absence of which and with approval by the Purchaser, other relevant publications such as ECRI or other relevant publications may be referred to.
- d) The Contractor shall submit its proposed PM plan/schedule annually effective from warranty start-date for the equipment scope offered, to Health Technology (HT) or any other duly appointed Clinical Engineer for approval. Inspective and preventive maintenance services shall be performed by the contractor during the agreed warranty period without fail.
- e) The Contractor shall request in writing from the Purchaser's Health Technology Manager or any duly appointed Clinical Engineer permission to execute PM services at least 15 days prior to the proposed work start date. If the Purchaser fails to respond to this request during this period, approval shall be considered granted by the Purchaser.
- f) Prior to performing PM services at the equipment location, the contractor shall report to the Purchaser's beneficiary or any other duly appointed Clinical Engineer at the health facility to announce themselves and request access to the equipment needing PM services. The contractor shall not proceed to execute PM services without obtaining approval from the beneficiary or the authorised representative.
- g) The Purchaser or any other duly appointed representative reserves the right to witness execution and test quality of any or all PM services performed by the Contractor.
- h) All inspective and preventive maintenance work shall be completed within 30 days after the due-date determined by the frequency specified by the OEM, and following the last equipment service date.
- i) For the duration of this agreement and as per service requirements, the contractor shall provide suitably qualified and competent clinical engineering personnel to perform inspective and preventive maintenance work as established in this contract. Replacement clinical engineering personnel shall be equivalent or better and the Contractor shall request approval to the Purchaser.

- j) As part of PM services, the Contractor shall carry out equipment performance tests, quality assurance tests, calibration and electrical safety checks on a required basis. It is the duty of the Contractor to provide all necessary consumable supplies needed for these performance tests and calibrations.
- k) All test and calibration results shall be recorded in appropriate service certificates specified by the Original Equipment Manufacturer. Contractor job-cards and time sheets shall not be recognised as service certificates in term of this contract.
- l) All equipment service certificates shall record the serial number of the test and calibration equipment used to perform PM services. All equipment service certificates produced during PM shall be submitted together with copies of test equipment calibration certificates by the Contractor. The Purchaser shall accept two (2) copies for each service certificate produced by the Contractor, one set issued to the Purchaser's final Beneficiary or health facility, and another set issued to Health Technology or any other duly appointed Clinical Engineer.
- m) The Contractor's clinical engineer shall clearly record their full name, signature and service completion date on all service certificates produced during PM.
- n) The contractor shall perform predictive maintenance during PM and submit service report to the Purchaser or any approved duly authorised representative for risk management.
- o) In the event that serviced equipment malfunctions within three (3) months following preventive maintenance, the contractor shall be liable for all costs associated with bringing the equipment into a functional and safe condition.
- p) The Contractor shall perform on-site user training (hands-on) during PM. The contractor shall collaborate with Health Technology for identified training gaps and prepare annual training programmes for equipment users and technicians.

40.2 Call-Out Services:

- a) The Contractor shall respond to Corrective Maintenance call-outs initiated by the Purchaser's final Beneficiary or any duly appointed Clinical Engineer within the response times indicated in Part H – Schedule B. The Contractor shall perform inspections and tests on the equipment and shall furnish inspection and tests certificates together with a priced quotation of required spare parts for approval, if any.
- b) Call-out maintenance quotations for both contracted and non-contracted services shall be authorised by the Purchaser's final Beneficiary or the duly appointed Clinical Engineer by the Purchaser.

40.3 Extended Warranty (Comprehensive) Maintenance Services

- a) The Contractor extended warranty integrates the Manufacturer warranty for scope coverage.
- b) The Contractor warranty certificate shall be in the name of the Purchaser's final Beneficiary.

- c) Additional Extended Warranty (Comprehensive) maintenance services, optional to the Purchaser, shall begin from the date of Final Taking Over (after initial Manufacturer warranty has elapsed). The Contractor shall price the optional (5) five-year extended warranty or comprehensive maintenance services in the specified pricing schedule indicated in Part H – Schedule E for each the equipment offered under the contract.
- d) The warranty shall cover the entire machine including any and all component parts, spare parts, software modules and upgrades, accessories and maintenance thereof. The warranty coverage shall be applied fully and without any cost to Beneficiary and to the users whatsoever, including but not limited to the cost of routine visits, call-outs, training, labour, spare parts, and shall be valid for unlimited consultations within the warranty period save in cases of proven misuse, intentional damage, or force majeure.
- e) The Extended Warranty shall be at Contractor premises, being any cost of equipment transport or technician travelling at Contractor charge and included in the offered price.
- f) Training for users and maintenance personnel shall be equivalent to OEM training or better. All personnel training shall meet commissioning service obligations specified in this special conditions of contract.
- g) At least 95% of one single year of full functioning, i.e. 347 days out of 365/366 days, shall be guaranteed by the Contractor within the warranty period. In the event that the equipment supplied has been on downtime for more than five percent (5%) of one single year of the warranty period, i.e. more than 18 natural days in one single year, the Contractor shall extend the warranty period for a duration of six (6) times of the time duration when the equipment was on downtime.
- h) The time elapsed between the communication about the malfunctioning equipment and the intervention on site, within the warranty period, shall be as specified in the response times tabulated in Part H - Schedule B.
- i) If the Contractor, having been notified, fails to remedy the defect(s) within the period specified in Part H – Schedule B, the Purchaser may proceed to take such remedial action as may be necessary, at the Contractor's risk and expense and without prejudice to any other rights which the Purchaser may have against the Contractor under the contract.
- j) During the warranty validity period, on-site preventive maintenance and calibration visits shall be performed according to frequency intervals as specified by the manufacturer. The Preventive/Scheduled Maintenance Plan of the visits shall be presented by the Contractor before the issuance of preliminary taking-over certification by the Purchaser. During the site-visits a concise additional training shall be provided to the users and to the maintenance personnel.
- k) During on-site maintenance and calibration visits a short user-training update shall be carried out by the Contractor.

40.4 Corrective Maintenance (CM) Services:

- a) The Contractor shall provide prompt onsite response to corrective maintenance requests and minimize downtime of faulty or malfunctioning equipment. The Contractor response times shall comply with requirements of Part H - Schedule B.
- b) Personnel responding to service repair or emergency requests shall be sufficiently competent to resolve the problem or at least identify or isolate the problem. The Contractor shall be liable for costs incurred during repetitive site visits due to failure to isolate the problem and or rework of any form by the responding personnel.
- c) Replacement maintenance personnel shall be equivalent or better and their competency and experience shall be in accordance with the terms and conditions of this contract.
- d) In case of "emergency repair calls for critical equipment" the Contractor shall provide onsite response within agreed time frames in Part H – Schedule B. Repair work shall be completed with the stipulated timeframes in the schedule of response times.
- e) Prior to performing corrective maintenance services at the equipment location, the contractor shall report to the Purchaser's beneficiary or any other duly authorised representative at the health facility to announce themselves and request access to the equipment needing repairs. The contractor shall not proceed to execute corrective maintenance services without obtaining approval from the beneficiary or the authorised representative.
- f) During corrective maintenance, the Contractor shall complete performance inspections on the repaired equipment in accordance with OEM specifications. A signed report by the clinical engineer detailing full results of the performance inspection shall be submitted to the Purchaser or any duly authorised representative certifying the equipment safe for use. Contractor job-cards shall not represent performance inspection certificates.
- g) The Purchaser or any other duly appointed representative reserves the right to witness execution of any or all corrective maintenance services performed by the Contractor.
- h) The Contractor shall provide the Purchaser's final beneficiary with detailed written information that:
 - (i) Describe procedures for obtaining technical assistance and repair services in the event of equipment failure or malfunction. A 24-hour contact telephone number shall be provided and displayed onsite, and the said number shall be contactable at all times. Names of contact persons and their job titles authorised within terms and conditions of this contract shall be displayed at the exact equipment locations.
 - (ii) Describe the general activities that Purchaser's employees should perform when responding to equipment failure, including guidelines to be used when responding and interpreting alarm codes.
 - (iii) Describe the procedures used to set-up and test the equipment before use, including settings for set-up and testing.

- (iv) Describe for equipment users how to identify and obtain equipment accessories or consumables, including manufacturer part numbers.

40.5 Spare parts:

- a) Spare parts used must be OEM or meet or exceed OEM specifications.
- b) The maintenance services and equipment spare parts shall be available directly in the Republic of South Africa at Eastern Cape regional level for maintenance and spare parts access. The Contractor shall maintain availability of spare parts and effectively complete corrective maintenance services with completion times specified in Part H, Schedule B.
- c) The Purchaser reserves the right to request the original OEM pricing for the spare parts offered by the Contractor, indicating discounts offered by the OEM if any. The Contractor shall at all times provide such true information as in when required by the Purchaser or any duly appointed Clinical Engineer.
- d) The Contractor shall not service-exchange faulty equipment spare-parts with used or reconditioned spare parts without written approval by the Purchaser. Where service exchange is an option, the Contractor shall value and price used service exchanged spare parts against the equivalent new for comparison. Where service exchange parts are selected by the Purchaser, the Contractor shall provide one year warranty cover or equivalent to the longest equipment service interval as per OEM specifications.

40.6 Calibration and testing equipment:

- a) Upon taking over the contract services, the Contractor shall have all required test and calibration instruments. The contractor shall only use test equipment calibrated by an independent SANAS approved firm or the OEM for the test equipment. The contractor shall maintain records of certification for the expected life-span of the equipment.
- b) At all times the Contractor shall use calibrated and safe test equipment to perform commissioning and maintenance services required by the terms and conditions of this contract. The contractor shall furnish up-to-date annual calibration certificates for test equipment for each equipment service. The Purchaser or any approved duly appointed representative has the right to request and audit test equipment calibration certificates during maintenance services
- c) The Contractor shall ensure that relevant medical equipment is calibrated as part of the Service Contract and is labelled accordingly. The equipment shall be calibrated by competent personnel and the Contractor shall develop and implement a system to ensure quality control.
- d) The Contractor shall develop and implement a procedure for assigning inspection intervals for equipment included in this contract. The procedure should document the goals of the equipment inspection and demonstrate how the intervals selected are consistent with those goals. The results of inspection shall be documented.

40.7 Sub-contractors:

- a) For the commissioning maintenance services, the Contractor may sub-contract services via long term or single services contract to Sub-contractors. The costs of such contracts must be borne by the Contractor.
- b) The Contractor is required to prepare and submit a list of equipment that would be sub-contracted for maintenance to Health Technology for approval. Such services may include preventive maintenances, repairs and spare parts.

40.8 Write-off rights:

- a) In case the cost of maintenance and repair exceeds the value of the equipment/part, the Contractor shall obtain approval from the Purchaser to either still to carry out the repair or write-off the equipment/part. The Contractor does not have the right to write-off the equipment/part without previous written consent and approval from the Purchaser.
- b) The Contractor may not remove equipment or any part from the Purchaser's site without obtaining written approval from the Purchaser or any other duly authorised representative.

41 ORGANIZATION OF CONTRACT EXECUTION

- 41.1** The Eastern Cape Department of Health will be the executing Government Department for the commissioning and maintenance programme. The HT directorate shall be responsible for carrying out monitoring and oversight to the overall programme.
- 41.2** The Purchaser's HT project manager or any duly authorised representative shall actively participate in the development and implementation of the overall commissioning and maintenance services and contractor obligations.
- 41.3** The Purchaser or any duly appointed representative shall evaluate the performance of the Contractor and according to contractual arrangement and verify value for money on payments made to the Contractor.
- 41.4** Sufficient highly skilled engineers and technicians in the field of clinical or biomedical engineering must be availed by the Contractor to perform maintenance service obligations and provide user training for all equipment in the inventory of the Purchaser's data system.
- 41.5** Sufficient and suitable workshop space must be made available by the Contractor to perform all work assigned and stipulated in this contract. Infection control protocols and compliance to requirements of the Occupational Health and Safety Act must be maintained by the Contractor.
- 41.6** The Purchaser's HT directorate shall receive monthly and quarterly reports of indicators that allow the organization to determine compliance with the medical equipment maintenance management programme. The Contractor shall follow the developed indicators that reflect the performance on commissioning services, scheduled PM and corrective maintenance services carried out.

42 OFFICE OPERATION OF THE CONTRACTOR

- 42.1** The commissioning and maintenance services provided by the contractor in this contract shall be accessible and the Contractor shall put systems in place for the said services to be located within a 50 km radius of major cities or towns in the Purchaser's region. The Purchaser shall not reimburse the Contractor for subsistence and travelling costs incurred for services performed for Health Facilities within the specified 50 km radius. Where the Contractor has failed to make the said contract services accessible within the specified 50km radius, the Purchaser may refuse liability for costs incurred for subsistence and traveling by the Contractor and the contractor shall carry the relevant costs.
- 42.2** The Contractor shall provide general maintenance services during normal working hours, during which the maintenance services with respect to the equipment shall be rendered on regular working days (Monday to Friday) between 08.00 and 17.00 hours, with weekends and public holidays excluded.
- 42.3** The Service Provider shall provide 24 hours on-call services a day for emergency repair at health facilities (on Critical Equipment only) and will follow the response times as indicated in Part H – Schedule B.

PART G: RETURNABLE CONTRACT FORMS

SUMMARY LIST OF RETURNABLE CONTRACT FORMS:

- Form No.1: Authorisation to Sign
- Form No.3: Summary Form of Offer
- Form No.4: Declaration of Interest (SBD 4)
- Form No.7: Personnel Strength Assessment Form
- Form No.8: Joint Venture Disclosure Form
- Form No.9: Preference Points Claim Form (SBD 6.1)
- Form No.10: Contractual Agreement

FORM No.1: AUTHORISATION TO SIGN

I, certify that I am..... (Secretary or any other duly authorised official) of the(company/firm name), formed and operating under the laws of..... (country/state) and that..... (name of authorised signatory) who signed the bid is authorized to bind the company/firm by authority of its governing body.

(Secretary/Authorised Official)

Certificate as to corporate principal bind

FORM No.3: TENDER SUMMARY FORM OF OFFER

Equipment/Device:	Make:	Model:	
Supplier/Contractor Name:	Manufacturer Name:	Supplier/Contractor Contact & Tel.	
Manufacturer recommended device life-expectancy? Yrs.	Remaining length of time before End-of-Life (EOL)? Yrs.	Length of time device has been on the market. Yrs.	
Parts and service manuals available? Y/N	IEC601 Classification	CE or equivalent mark? Y/N	
User manuals available? Y/N	Original OEM warranty period? Yrs.	Supplier/Contractor warranty offered Yrs.	
Equipment unit price (with sea delivery mode)	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Equipment unit price (with flight delivery mode)	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Discount price (where applicable)	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Software and licences total price (where applicable)	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Accessories and transducers total price	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Consumables total price	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Unit installation and commissioning cost	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Total 5-years PM and service call-outs option - Total price (Year 3 to 7)	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Total 5-years Comprehensive extended warranty option - Total price (Year 3 to 7)	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
VAT.	ZAR. (year 1)	ZAR. (year 2)	ZAR. (year 3)
Total Price (incl. VAT)	ZAR (year 1)	ZAR (year 2)	ZAR (year 3)
In Words (ZAR – year 1) :			
In Words (ZAR – year 2) :			

In Words (ZAR – year 3) :			
Authorised Name:	signatory Capacity Signatory:	of Signature:	Date:
Witness Name:		Signature	Date:

NB: Prices must include delivery. For evaluation purposes, only ONE equipment price unit will be utilised.

Part 5 – Schedule D
Declaration of Interest

SBD 4

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.

2. Bidder's declaration

- 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.

- 2.2 Do you, or person connected bidder, have relationship any person employed by procuring institution?
YES/NO

Full Name	Identity Number	Name of State institution

any
with the
a
with
who is
the

- 2.2.1 If so, furnish particulars:

.....
.....

- 2.3 Does the bidder or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise whether or not they are bidding for this contract? **YES/NO**

- 2.3.1 If so, furnish particulars:

.....
.....

3 DECLARATION

I, the undersigned, (name)..... in submitting the accompanying bid, do hereby make the following statements that I certify to be true and complete in every respect:

- 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.
- 3.4 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.
- 3.4 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 DECLARATION PROVE TO BE FALSE.

.....
Signature

.....
Date

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.

² Joint venture or Consortium means an association of persons for combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.

.....

Position

.....

Name of bidder

FORM No.7: PERSONNEL STRENGTH ASSESSMENT FORM

All Bidders shall furnish resume of their key personnel whose role and function are directly and indirectly relevant to the project for each position below. The number of position below does not reflect the number of engineers/technician required for the service contract but shall demonstrate that the Bidder has already qualified manpower available. The bidder shall propose a brief introduction as well as a structure of a project team in implementing this project with the personnel listed below.

Type of Designation	Responsibility	Proposed Candidate (Full Name, Surname and ID Number)
1. Application Specialist	Training to users on equipment operation, functional set-up and testing, proper application, appropriate handling, cleaning and storage	
2. Clinical Engineer or Engineering Technician	Maintenance and repairs to equipment for continued operation such that downtime is prevented. Supports and advances patient care by applying engineering and managerial skills to health-care technology	

For all the available candidates proposed above, please provide/submit their resume detailing the minimum required information below in the following format:

Resume of Candidate		
Name:		
Surname:		
Designation:		
ID Number:		
Sex (Male/Female):		
Cell No.:		
Professional Qualifications:		
Name of Present Employer:		
Employer Address:		
Telephone:		
Fax:		
Email:		
Date Joined:		
Direct Supervisor		
Working Experience over the Past Years in reverse chronological order		
From (Month/Year)	To (Month/Year)	Employer/ Position/ Project name and work scope, and or relevant experience obtained.

--	--	--

Please attach all copies of qualification certificates as evidence or proof.

FORM No.8: JOINT VENTURE DISCLOSURE FORM

PURCHASER/EMPLOYER : EASTERN CAPE DEPARTMENT OF HEALTH
REQUEST FOR SUPPLY, DELIVERY, COMMISSIONING
AND MAINTENANCE OF MAGNETIC RESONANCE
IMAGING EQUIPMENT IN ECDOH FACILITIES FOR A
CONTRACT DESCRIPTION : PERIOD OF 36 MONTHS
CONTRACT NUMBER : SCMU3-25/26-0069-HO

All JV partners are obliged to commit to a developmental programme in executing commissioning and maintenance service obligations specified in the contract. JV representation in the Eastern Cape shall be afforded the opportunity and full exposure to developmental activities required to perform in full all activities necessary to fulfil the commissioning and maintenance service obligations herein.

Note:

- 1) All the information requested must be filled in the spaces provided. If additional space is required, additional sheets may be attached.
- 2) A copy of the Joint Venture agreement or Pre-bid Joint Venture agreement must be attached to this form. In order to demonstrate the enterprise partner's share in the ownership, control, performance and management responsibilities, risks and profits of the joint venture.

A. JOINT VENTURE PARTICULARS

Name : _____
Postal address : _____
Physical address : _____
Telephone _____ Fax : _____
Email address : _____

B. IDENTITY OF EACH ENTERPRISE PARTNER

No. 1

Name (lead : _____
partner)
Postal address : _____

Physical address :

Telephone : Fax :

Contact Person :
.....

TAX/VAT. No :

No. 2

Name (*non-lead*) :

Postal address :

Physical address :

Telephone : Fax :

Contact Person :
.....

TAX/VAT No. :

No. 3

Name :

Postal address :

Physical address :

Telephone : Fax :

Contact Person :
.....

TAX/VAT No. :

C. OWNERSHIP OF THE JOINT VENTURE

	<u>No.1</u>	<u>No. 2</u>	<u>No. 3</u>
a) Percentage Work Split	 %	 %	 %
b) Percentage Ownership : in respect of JV	 %	 %	 %

- c) Profit and Loss Sharing : % % %
- d) Initial Capital : R
Contribution (+/-) . R R
- e) Estimated Ongoing : R
Capital Contribution . R R
- f) Key Personnel and Test
or Calibration Equipment
Contribution

D. CONTROL AND STRUCTURE OF THE JOINT VENTURE

Briefly describe the manner in which the Joint Venture is structured and controlled.

.....

.....

.....

.....

E. BID SUBMISSION REQUIREMENTS OF THE JOINT VENTURE

The JV is required to compile and submit the following which all the members of the JV are in agreement with;

- Letter of Intent to enter into Joint Venture and/or signed Joint Venture or Pre-Bid Joint venture agreement.
- Valid original Tax Clearance Certificates for each of the partners in the JV.
- Consolidated BEE Certificates for the JV partners.

F. PRE CONTRACT AWARD REQUIREMENTS OF THE JOINT VENTURE

The JV is required to conclude and submit the following prior to being issued with the letter of awarded;
Detailed breakdown on the commissioning and maintenance services scope of works for each of the JV members with the responsibility of each within the JV.

Copies of all written agreements between partners concerning the contract must be attached to this form including those which relate to ownership options and to restrictions/limits regarding ownership and control. The final JV agreement entered into by all members in which details of the contribution of capital and equipment is listed; The commitment of management, tools, supervisory and key personnel employed by each enterprise partner to be dedicated to the performance of this Contract.

G. DECLARATION

The undersigned warrants that he/she is duly authorised to sign this Joint Venture Disclosure Form and affirms that the foregoing statements are correct and include all material information necessary to identify and explain the terms and operations of the Joint Venture and the intended participation of each partner in the undertaking.

The undersigned further covenants and agrees to provide the Purchaser with complete and accurate information regarding actual Joint Venture work and the payment therefore, and any proposed changes in any provisions of the Joint Venture agreement, and to permit the audit and examination of the books, records and files of the Joint Venture, or those of each partner relevant to the Joint Venture, by the Purchaser or any duly authorised representatives.

Signature : _____

Name : _____

Duly authorised to sign on behalf of : _____

Address : _____

Telephone : _____

Fax : _____

Date : _____

FORM No.9: PREFERENCE POINTS CLAIM FORM

SBD 6.1

PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022

This preference form must form part of all tenders invited. It contains general information and serves as a claim form for preference points for specific goals.

NB: BEFORE COMPLETING THIS FORM, TENDERERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF THE TENDER AND PREFERENTIAL PROCUREMENT REGULATIONS, 2022

1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to invitations to tender:

- the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- the 90/10 system for requirements with a Rand value above R50 000 000 (all applicable taxes included).

1.2 To be completed by the organ of state

(delete whichever is not applicable for this tender).

a) The applicable preference point system for this tender is the **90/10** preference point system.

1.3 Points for this tender (even in the case of a tender for income-generating contracts) shall be awarded for:

- (a) Price; and
- (b) Specific Goals.

1.4 To be completed by the organ of state:

The maximum points for this tender are allocated as follows:

	POINTS
PRICE	90
SPECIFIC GOALS	10
Total points for Price and SPECIFIC GOALS	100

1.5 Failure on the part of a tenderer to submit proof or documentation required in terms of this tender to claim points for specific goals with the tender will be interpreted to mean that preference points for specific goals are not claimed.

1.6 The organ of state reserves the right to require either of a tenderer, before a tender is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the organ of state.

2. DEFINITIONS

- (a) **“tender”** means a written offer in the form determined by an organ of state in response to an invitation to provide goods or services through price quotations, competitive tendering process or any other method envisaged in legislation;
- (b) **“price”** means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;
- (c) **“rand value”** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

- (d) **“tender for income-generating contracts”** means a written offer in the form determined by an organ of state in response to an invitation for the origination of income-generating contracts through any method envisaged in legislation that will result in a legal agreement between the organ of state and a third party that produces revenue for the organ of state, and includes, but is not limited to, leasing and disposal of assets and concession contracts, excluding direct sales and disposal of assets through public auctions; and
- (e) **“the Act”** means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

3.1. POINTS AWARDED FOR PRICE

3.1.1 THE 90/10 PREFERENCE POINT SYSTEMS

A maximum of 80 points is allocated for price on the following basis:

90/10

$$P_s = 90 \left(1 - \frac{P_t - P_{min}}{P_{min}} \right)$$

Where

- P_s = Points scored for price of tender under consideration
 P_t = Price of tender under consideration
 P_{min} = Price of lowest acceptable tender

3.2. FORMULAE FOR DISPOSAL OR LEASING OF STATE ASSETS AND INCOME GENERATING PROCUREMENT

3.2.1. POINTS AWARDED FOR PRICE

A maximum of 80 points is allocated for price on the following basis:

80/20

$$P_s = 80 \left(1 + \frac{P_t - P_{max}}{P_{max}} \right)$$

Where

- P_s = Points scored for price of tender under consideration
 P_t = Price of tender under consideration
 P_{max} = Price of highest acceptable tender

4. POINTS AWARDED FOR SPECIFIC GOALS

- 4.1. In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential Procurement Regulations, preference points must be awarded for specific goals stated in the tender. For the purposes of this tender the tenderer will be allocated points based on the goals stated in table 1 below as may be supported by proof/ documentation stated in the conditions of this tender:
- 4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the tender documents, stipulate in the case of—
- (a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or

(b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system,
then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

Table 1: Specific goals for the tender and points claimed are indicated per the table below.

(Note to organs of state: Where either the 90/10 or 80/20 preference point system is applicable, corresponding points must also be indicated as such.

Note to tenderers: The tenderer must indicate how they claim points for each preference point system.)

The specific goals allocated points in terms of this tender	Number of points allocated (90/10 system) (To be completed by the organ of state)	Number of points allocated (80/20 system) (To be completed by the organ of state)	Number of points claimed (90/10 system) (To be completed by the tenderer)	Number of points claimed (80/20 system) (To be completed by the tenderer)
Historically Disadvantage Individuals		20%		
Women		20%		
Youth		20%		
Disability		20%		
Military Veterans		10%		
Locality Ownership		10%		

- a) A tender must submit proof to claim points for Specific Goals.
- b) A tender failing to submit proof of specific Goals may not be disqualified, but may only score points out of 80 price, and scores 0 points out of 20 for Specific Goals.
- c) The Specific Goals supporting documents required to verify claimed points may be in line with the specific requirements include:
 - CIPC Certificate reflecting percentage ownership or controlling interest or CSD report reflecting percentage ownership verified from CIPC and ID copies
 - Medical Certificate / Doctor's medical report (Impairment should be substantially limiting long term or of recurring nature)
 - Municipal accounts or Lease agreement with 3 months proof or rental payments for proof of address or letter from the municipal councillor.
 - Letter from Department of Military Veterans confirming status.

DECLARATION WITH REGARD TO COMPANY/FIRM

4.3. Name of company/firm.....

4.4. Company registration number:

4.5. TYPE OF COMPANY/ FIRM

- ☐ Partnership/Joint Venture / Consortium
- ☐ One-person business/sole propriety
- ☐ Close corporation
- ☐ Public Company
- ☐ Personal Liability Company
- ☐ (Pty) Limited
- ☐ Non-Profit Company
- ☐ State Owned Company

[TICK APPLICABLE BOX]

4.6. I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I acknowledge that:

- i) The information furnished is true and correct;
- ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;
- iv) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may have –
 - (a) disqualify the person from the tendering process;
 - (b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
 - (c) cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;
 - (d) recommend that the tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted from obtaining business from any organ of state for a period not exceeding 10 years, after the *audi alteram partem* (hear the other side) rule has been applied; and
 - (e) forward the matter for criminal prosecution, if deemed necessary.

.....
SIGNATURE(S) OF TENDERER(S)

SURNAME AND NAME:

DATE:

ADDRESS:

.....

.....

FORM No.10: CONTRACTUAL AGREEMENT

1. This agreement is the entire contract between the parties regarding the matters addressed herein. No representations, terms, conditions or warranties, obligations not contained in this agreement shall be binding on the parties. No agreement or addendum, varying adding to, deleting or terminating this agreement including this clause shall be effective unless reduced in writing and signed by both parties.

2. Contracting Parties:

(i) EASTERN CAPE DEPARTMENT OF HEALTH (the "Purchaser")

Physical Address:- _____

Tel:- _____ Fax:- _____

(ii) Contractor:- _____

Physical Address:- _____

Tel:- _____ Fax:- _____

Tax / VAT No:- _____

3. Signature of the contracting parties:

Thus done and signed at _____ on _____

(Name of signatory) for and on behalf of the **Purchaser** who by
signature

hereof warrants authorization hereto

Capacity of signatory) _____
purchaser as Witness (1) for the

Thus done and signed at _____ on _____

(Name of signatory) for and on behalf of the **Contractor** who by
signature

hereof warrants authorization hereto

Capacity of signatory) _____
contractor as Witness (2) for the

Witness (1) Name: _____ Witness (2) Name: _____

Address: _____ Address: _____

PART H: SCHEDULES

SUMMARY LIST OF SCHEDULES:

Schedule A: Functionality Evaluation Criteria

Schedule B: Response Times

Schedule C: Proposed Personnel Fees

Schedule D: Equipment Specifications

Schedule E: Pricing Schedules

A. STAGE 3: FUNCTIONALITY EVALUATION CRITERIA

- 1) The functionality evaluation will be conducted in terms of the evaluative dimensions set out hereunder, where bidders must score a minimum threshold of seventy-five (75) out of ninety (90) points to qualify for stage 4 (Price and Specific Goals) evaluation. Bidders who fail to meet the minimum threshold will be disqualified.

☐ **Technical Specifications (Ts)**

The composition of the technical specifications includes the equipment specification and the related equipment pricing schedule. All equipment being tendered for must comply with specification requirements; failure to comply with any of the conditions set out in the returnable Equipment Specifications and Pricing Schedule (Part H – Schedule D and E) will result in bid disqualification. Please note that where the specification calls for “certification”, this certification must accompany the bid; failure to provide such certification will result in immediate disqualification.

☐ **Usability and Application (UA)**

The bidder must propose an Application Specialist for the equipment technology offered to perform commissioning services. The returnable personnel strength assessment form (Part G – Form No.7) must be completed, duly signed and submitted with the bid. Personnel qualification certificate/s must be attached and submitted with the bid as proof. Personnel experience records or resumes, and on-the-job proof of certification must be submitted together with a minimum of three (3) contactable references.

☐ **Maintainability and Serviceability (Ms)**

The bidder must propose a Clinical Engineer for the equipment technology offered to perform commissioning and maintenance services. The returnable personnel strength assessment form (Part G – Form No.7) must be completed, duly signed and submitted with the bid. Qualification certificate/s must be attached and submitted with the bid as proof. Personnel experience records or resumes, and on-the-job proof of certification must be submitted together with a minimum of three (3) contactable references.

☐ **Accessibility and Service Support (As)**

The bidder must validate to the Purchaser accessibility of the services offered by submitting proof of address in reference to the Purchaser’s health service region.

- 2) The criteria and scores in respect to each evaluative dimension for functionality are set out as follows:

Criteria	Scoring Matrix and Points	Maximum Score	Evidence or Proof
Technology Specifications (Ts)	Compliance to total equipment specifications in Part H, Schedule D ✓ From 95.5% up to 100% = 55 ✓ From 90.5% up to 95.4% = 50 ✓ From 85.5% up to 90.4% = 45 ✓ From 80.5% up to 85.4% = 40 ✓ Less than 80% compliance = 0	55	Responsiveness to items of specification, and can be referenced to OEM Brochures and specification documents

Usability and Application (UA)	Qualifications for the proposed application specialist in the radiography/ radiology field: ✓ Relevant NQF Level 7 or Higher = 10 ✓ Relevant NQF Level 6 = 5 ✓ Lower certificate = 0	10	Attach and submit copies of Qualification Certificates for the application specialist to the bid
	Experience and manufacturer certification for the proposed application specialist performing the user training on the equipment: ✓ Above 5 years and certified =5 ✓ 2 to 4 years and certified = 4 ✓ Below 2 years and certified = 3	5	Attach and submit a resume/CV for the application specialist with the bid and complete the returnable Form No. 7 in full. Attach and submit copies of Training Certificates issued by the Manufacturer for the "Make" offered.
Maintainability and Serviceability (Ms)	Qualifications for the proposed technician in the clinical/ electrical engineering field: ✓ Relevant NQF Level 6 or Higher = 10 ✓ Relevant NQF Level 5 = 5 ✓ Lower certificate = 0	10	Attach and submit copies of Qualification Certificates for the technician to the bid
	Experience and manufacturer certification for the clinical/electrical technician performing repairs and maintenance on the equipment: ✓ Above 5 years and certified =5 ✓ 2 to 4 years and certified = 4 ✓ Below 2 years and certified = 3	5	Attach and submit a resume/CV for the technician with the bid and complete in full returnable Form No.7. Attach and submit copies of Training Certificates issued by the Manufacturer to the technician for the "Make" offered.
Accessibility and Support (As)	Service support location and access to spare parts: ✓ Representation with direct access to Manufacturer spare parts within EC =5 ✓ EC Representation without direct access to Manufacturer spare parts = 3	5	Attach and submit business proof of address for local representation in the form of a Municipal Account/ Telkom/ Eskom/ Lease agreement. And Attach and submit a Letter from the Manufacturer confirming direct availability of spare parts in the region by the Bidder.
Maximum possible functionality score (Fs):		90	

3) The total score for functionality points will be calculated using the following formula:

- $F_s = T_s + M_s + T_A + A_s$, where:
- F_s : represents the total functionality score
- T_s : represents the points scored for compliance with the specification
- M_s : represents the points scored for maintainability and serviceability
- A_s : represents accessible service support and manufacturer spare parts

4) A minimum score of seventy-five (75) out of the possible ninety (90) is required to qualify for the next stage of evaluation. A tenderer not achieving this threshold will be disqualified.

Bidders should submit ALL relevant documents as indicated on the "Evidence/Proof" column on the functionality table above. Failure to submit any required documents for each criteria will result in a score of zero (0).

B. RESPONSE TIMES FOR REACTIVE MAINTENANCE

The response time is the time it takes for contractor to be onsite after receiving a request for maintenance and repairs. The Contractor shall provide 24 hours on call services a day for emergency repair at Critical equipment and will follow the response time as indicated in the TABLE below. In addition, Tactical equipment must be repaired within 7 days of the original work order request date. Equipment designated as Critical must be repaired within 3 days. If the equipment is not repaired within this time frame the Employer has the right to impose penalties and seek other repair options elsewhere.

Equipment Type	PERFORMANCE INDICATORS			
	Priority (Critical = C /Tactical = T/ Other = O)	Response Time (hrs)	Coverage Hours (hrs)	Completion Time (Days)
Anaesthesia Delivery Units	Critical	8 hrs	All hrs	3 days
Analyser, Blood Gas	Tactical	24 hrs	Working hrs	7 days
Analyser, Oxygen	Critical	24 hrs	All hrs	3 days
Bilirubinometer	Critical	24 hrs	Working hrs	7 days
Blender, Oxygen	Critical	8 hrs	All hrs	3 days
BIPAP Unit	Critical	8 hrs	All hrs	3 days
C-Arm General	Tactical	24 hrs	Working hrs	7 days
Cardiotocographs (CTGs)	Critical	8 hrs	All hrs	3 days
Cast Cutter, General	Tactical	24 hrs	Working hrs	7 days
Chest Bucky Unit, X-Ray	Critical	8 hrs	All hrs	3 days
Colposcope, General	Tactical	24 hrs	Working hrs	7 days
CPAP Unit	Critical	8 hrs	All hrs	3 days
CT Scanner, General	Critical	8 hrs	All hrs	3 days
Defibrillator, AED	Critical	8 hrs	All hrs	3 days
Defibrillators, Monitor	Critical	8 hrs	All hrs	3 days
Defibrillator, Monitor/Pacer	Critical	8 hrs	All hrs	3 days
Dental Unit	Tactical	24 hrs	Working hrs	7 days
Dental Scaler	Tactical	24 hrs	Working hrs	7 days
Dermatome	Tactical	24 hrs	Working hrs	7 days
Dialysis Unit	Critical	8 hrs	All hrs	3 days
Diathermy Unit, General	Critical	8 hrs	All hrs	3 days
Doppler Unit, Obstetric	Critical	8 hrs	All hrs	3 days
Electrocardiograph (ECGs)	Tactical	24 hrs	Working hrs	7 days
Electrosurgical Unit	Critical	8 hrs	All hrs	3 days
Fluoroscopy Unit, General	Tactical	24 hrs	Working hrs	7 days
Humidifier	Tactical	24 hrs	Working hrs	7 days
Hyfreacator	Critical	8 hrs	All hrs	3 days
Incubator, Infant	Critical	8 hrs	All hrs	3 days
Incubator, Infant Transport	Critical	8 hrs	All hrs	3 days
Lamp, Examination	Tactical	24 hrs	Working hrs	7 days
Lamp, Surgical	Critical	8 hrs	All hrs	3 days
Mammography Unit	Tactical	24 hrs	Working hrs	7 days
Module, Anaesthetic Gas	Critical	8 hrs	All hrs	3 days
Module, Cardiac Output	Critical	8 hrs	All hrs	3 days
Module, CO2	Tactical	24 hrs	Working hrs	7 days
Module, ECG	Tactical	24 hrs	Working hrs	7 days
Module, NIBP	Tactical	24 hrs	Working hrs	7 days
Module, IBP	Critical	8 hrs	All hrs	3 days
Module, Respiration	Tactical	24 hrs	Working hrs	7 days
Module, SPO2	Critical	24 hrs	Working hrs	7 days

Module, Temperature	Tactical	24 hrs	Working hrs	7 days
Monitor, Apnoea	Critical	24 hrs	Working hrs	7 days
Monitor, Heart Rate	Critical	24 hrs	Working hrs	7 days
Monitor, Patient	Tactical	24 hrs	Working hrs	7 days
Monitor, Vital Signs	Tactical	24 hrs	Working hrs	7 days
Monitor, Ventilation	Critical	8 hrs	All hrs	3 days
Nebulizer, Ultrasonic	Tactical	24 hrs	Working hrs	7 days
Nebulizer, Heater	Tactical	24 hrs	Working hrs	7 days
Oximeter, Pulse	Tactical	8 hrs	Working hrs	7 days
Pacemaker, Cardiac External	Critical	8 hrs	All hrs	3 days
Pacemaker, General	Critical	8 hrs	All hrs	3 days
Phototherapy Unit	Critical	24 hrs	Working hrs	3 days
Processor, X-Ray Digital	Critical	8 hrs	All hrs	3 days
Processor, X-Ray Film	Critical	8 hrs	All hrs	3 days
Pump, Blood	Critical	24 hrs	Working hrs	3 days
Pump, Breast	Tactical	24 hrs	Working hrs	7 days
Pump, Feeding	Tactical	24 hrs	Working hrs	7 days
Pump, Infusion	Critical	8 hrs	All hrs	3 days
Pump, Portable Suction	Critical	8 hrs	All hrs	3 days
Pump, Syringe	Critical	8 hrs	All hrs	3 days
Resuscitator, Infant	Critical	8 hrs	All hrs	3 days
Scale, Adult	Tactical	24 hrs	Working hrs	7 days
Scale, Infant	Tactical	24 hrs	Working hrs	7 days
Sphygmomanometer	Tactical	24 hrs	Working hrs	7 days
Spirometer	Tactical	24 hrs	Working hrs	7 days
Sterilizer, Flash	Tactical	24 hrs	Working hrs	7 days
Sterilizing Unit, Steam	Tactical	24 hrs	Working hrs	7 days
Sterilizing Unit, Steam, Table-top	Tactical	24 hrs	Working hrs	7 days
Table, Examination	Tactical	24 hrs	Working hrs	7 days
Table, Obstetrical	Critical	8 hrs	Working hrs	3 days
Table, Orthopaedic	Critical	24 hrs	Working hrs	3 days
Table, Surgical	Critical	8 hrs	Working hrs	3 days
Tourniquet	Tactical	24 hrs	Working hrs	7 days
Ultrasound, Diagnostic	Critical	8 hrs	All hrs	3 days
Ultrasound, Probe	Critical	8 hrs	All hrs	3 days
Vaporiser, Anaesthesia	Critical	8 hrs	All hrs	3 days
Ventilator, Anaesthesia	Critical	8 hrs	All hrs	3 days
Ventilator, Adult	Critical	8 hrs	All hrs	3 days
Ventilator, Neonatal/Paediatric	Critical	8 hrs	All hrs	3 days
Ventilator, Oscillator	Critical	8 hrs	All hrs	3 days
Ventilator, Portable/Transport	Critical	8 hrs	All hrs	3 days
Warmer, Blanket	Tactical	24 hrs	Working hrs	7 days
Warmer, Blood/Solution	Critical	8 hrs	All hrs	3 days
Warmer, Infant, Radiant	Critical	8 hrs	All hrs	3 days
X-Ray Unit, Dental	Tactical	24 hrs	Working hrs	7 days
X-Ray Unit, General, Fixed	Critical	8 hrs	All hrs	3 days
X-Ray Unit, Mobile	Tactical	24 hrs	Working hrs	7 days
X-Ray Unit, Panoramic	Tactical	24 hrs	Working hrs	7 days

C. PROPOSED PERSONNEL FEES

1. The Bidder shall propose rates which may be used for incidental services not covered under the contract. In case travel costs are incurred such cost will be based on rates used by DRPW for public works.

Type of Designation	Responsibility	Proposed Hourly Rate (ZAR)
1. Application Specialist	Training to users on equipment operation, functional set-up and testing, proper application, appropriate handling, cleaning and storage	
2. Clinical Engineer	Supports and advances patient care by applying engineering and managerial skills to health-care technology	
3. Clinical Engineering Technician	Maintenance and repairs to equipment for continued operation such that downtime is prevented.	

D. EQUIPMENT SPECIFICATIONS



MRI

ITEM	Non-negotiable specification description	Compliance (YES/NO)	Bidders Response	Reference in manufacturer documentation / brochures. Brochure No. & Page No
SECTION	SPECIFICATION			
1	NON-NEGOTIABLE – MRI 3 Tesla			
1.1	The bidder will supply a 3Tesla MRI machine with a peak/maximum gradient amplitude should not be below 66mT/m and the maximum slew rate should not be below 200mT/m/msec. The effective slew rate should be above 344T/m/s and the effective gradient strength should be above 136mT/m.			
1.2	The MRI offered shall comply with ISO 9000 or ISO 13485 for quality management system, provide the certificate of manufacturer.			
1.3	The MRI must be fully functional upon delivery. The unit must be supplied with breast coil, head and neck, body, cardiac, extremities, joints (wrist, ankle, knee, elbow, shoulder and foot), angiography, flow imaging, multinuclear imaging and spine. The coils must be included in the basic price of the unit in the pricing schedule.			
1.4	The supplier must offer a yearly technical training to the engineers (two days), radiographers (application training five days) and radiologists (five days) on the proper and maximally usage and quality control of the MRI machine. This must be for the lifespan of the machine which is estimated to be ten years.			
1.5	The MRI fully inclusive contract must include all spares, callout and preventive maintenance for the MRI (including the magnet), chiller plant, air-conditioning, MRI compatible anaesthetic machine, MRI compatible			

ITEM	Non-negotiable specification description	Compliance (YES/NO)	Bidders Response	Reference in manufacturer documentation / brochures. Brochure No. & Page No
	patient monitoring, MRI compatible double head injector, MRI compatible paediatric incubator, MRI compatible lung function test machine, CCTV, intercom, electrical (lights and plugs inside the cage, plumbing, medical gas, work stations, post-processing computers and operator console (everything that was installed by the bidder)			
1.6	A CE and/or FDA number with the directive certificate of an approved accreditation body shall be supplied, indicating the model specific for all the mentioned equipment that will be offered (including the MRI compatible anaesthetic machine, MRI compatible patient monitoring, MRI compatible double head injector, MRI compatible paediatric incubator and the MRI compatible lung function test machine). Declaration of conformity will not be accepted.			
1.7	Signed letters from the registered manufacturers of the MRI machine and all the other mentioned equipment (including the accredited manufacturers' letters for all the following equipment, IMRI compatible anaesthetic machine, MRI compatible patient monitoring, MRI compatible double head injector, MRI compatible paediatric incubator and the MRI compatible lung function test machine). These letters must be on the manufacturer's letterhead supporting and underwriting the vendor as the accredited and certificated vendor in South Africa for safe distribution, service and maintenance for all the above-mentioned equipment being offered.			

ITEM	Non-negotiable specification description	Compliance (YES/NO)	Bidders Response	Reference in manufacturer documentation / brochures. Brochure No. & Page No
1.8	A minimum of a 2-year warranty should be included in the basic price for all the equipment. Attach the manufacturer and or bidder's proof in writing.			
1.9	The unit will be supplied with all standard accessories in annexure 1 (pricing schedule) for the unit to be fully functional.			
1.10	The bidder is required to complete Annexure 1 in full (all listed items); failure to comply with the bid will result in the bid rejection.			
1.11	There will be a compulsory site meeting for Nelson Mandela Academic Hospital, Frere Hospital and Livingstone Hospital for the bidder to obtain an accurate installation cost. The bidder will be responsible for the total supply and installation of electrical, plumbing, air-conditioning, medical gas, and carpentry. The ECDoH will supply the required electrical cable and water supply to the identified MRI room. The allocated provisional sum of R1.5 million will not be used for the above installation.			
1.12	A signed letter from the registered manufacturer (on the Manufacturer's or bidder's letterhead) confirming a minimum of 10 years end of life for each of the above-mentioned equipment			
1.13	The Magnetic Resonance Imaging System(s) on offer must be of modern technology with a bore size of at least 70 cm or better, and a zero-helium boil-off technology			
1.14	Please supply the SAHPRA licence for the MRI machine			

ITEM	Non-negotiable specification description	Compliance (YES/NO)	Bidders Response	Reference in manufacturer documentation / brochures. Brochure No. & Page No
1.15	This machine must have the ability to acquire images utilising the following methods, hydrogen nucleus, sodium nucleus, phosphorus nucleus, multinuclei, carbon 13 and chemical Exchange Saturation Transfer			
1.16	The supplier will supply a handheld MRI ferromagnetic detection system (FMDS) screening magnet			
1.17	The system homogeneity performance for various Diametric Spherical Volume (DSV) needs to be stated, with the details of the measurement technique employed. DSV measurement must be based on 24 plane plot method or better Guaranteed homogeneity at 30cm must be ≤ 0.15 ppm or better Guaranteed homogeneity at 40cm must be ≤ 0.45 ppm or better Guaranteed homogeneity at 45cm must be ≤ 1.15 ppm or better			
1.18	Shimming must be High performance, highly stable shim system with global and localized automated passive and active shimming for high homogeneity magnetic field for complete imaging and spectroscopy. Must include both active and passive shimming. Auto shim shall be available to shim the magnet with patient in position. Shimming time shall be ≤ 15 seconds and Off-centre shimming must be achieved			

Failure to comply with the mandatory requirements above from 1.1 to 1.18 will result to disqualification of the bid and not evaluated further.

GENERAL TECHNICAL SPECIFICATION – MRI

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
2	ACQUISITION PARAMETERS				
2.1.1	Modern Two-dimension (2D) Fourier Transformation (FT) and 3DFT acquisitions or better must be possible.				10
2.1.2	Variable field of view in the range of 2mm to 500mm in 1.0mm increments.				10
2.1.3	Varying independently the height and width of the field of view setting must be possible.				10
2.1.4	The acquisition matrix should allow independent settings in 32 to 1024 steps in both the frequency and phase encoding directions. State step				10
2.1.5	The frequency encoding acquisition matrix should be in the range of 32 to 1024.				10
2.1.6	The phase encoding acquisition matrix should be in the range of 32 to 1024.				10
2.1.7	The slice thickness must be variable in 0.1 mm increments.				10
2.2	IMAGING TECHNIQUES: The following image acquisition techniques must be available:				
2.2.1	Spin Echo (SE). Time to repeat (TR) Time to Echo (TE). millisecond(ms)				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
	- TR ranging between 1.7ms to 8.4ms - TE ranging between 1.7ms to 2.4ms				
2.2.2	Inversion recovery (IR) - TR ranging between 2.2ms to 2.4ms - TE ranging between 2.7ms to 2.9ms - TI ranging between 10ms to 19ms				10
2.2.3	Inversion recovery delay -It should be 14ms				10
2.2.4	Gradient Recall Echo (GRE). Supply details. SWIp (Susceptibility Weighted Imaging)				10
2.2.4.1	2D Gradient Recall Echo - TR ranging between 0.6 ms to 1.05ms - TE ranging between 0.2ms to 0.22ms				10
2.2.4.2	3D Gradient Recall Echo - TR ranging between 0.6ms to 1.2 ms - TE ranging between 0.16ms to 0.25ms 3D Ultrafast GRE (MPRAGE, MP2RAGE) 2D ultrafast GRE Coherent GRE Incoherent GRE (Gradient spoiled) Incoherent GRE (RF spoiled) Steady state free precession				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
	Balanced sequence Dual excitation (CISS) Double echo steady state GRASE Volume interpolated GRE (THRIVE)				
2.2.5	The Inversion recovery sequences				
2.2.5.1	The Inversion recovery sequences should include a 2D and 3D Single inversion Recovery				10
2.2.5.2	The Inversion recovery sequences should include a 2D and 3D Double inversion Recovery				10
2.2.5.3	The Inversion recovery sequences should include a 2D and 3D triple inversion Recovery				10
2.2.5.4	The Inversion recovery sequences should include a 2D and 3D quadruple inversion Recovery				10
2.2.5.5	2D and 3D Phase-Sensitive Inversion Recovery (PSIR)				10
2.2.5.6	2D and 3D Short Tau Inversion Recovery (STIR)				10
2.2.6	Typically, a 276-echo sequence scan must be possible.				10
2.2.7	Scan time reduction via a 512-echo factor must be available.				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
2.2.8	Scan time reduction via 1024 echo factor must be available				10
2.2.9	Various Fat suppression methods must be possible with this mode.				10
2.2.9.1	Fat suppression by a spectrally selective suppression technique, such as Chemical shift selective (CHESS), should be possible				10
2.2.9.2	Fat suppression by an In-phase GRE and an out - of - phase GRE method should be possible				10
2.2.9.3	Fat suppression by a short tau inversion recovery (STIR) method should be possible				10
2.2.9.4	Fat suppression by a 3-point DIXON method should be possible				10
2.2.9.5	Fat suppression by a Spectral presaturation with inversion recovery (SPIR) method should be possible				10
2.2.9.6	Fat suppression by a spectral attenuated inversion recovery (SPAIR) method should be possible				10
2.2.9.7	Fat suppression by Magnetisation Transfer Contrast (MTC) imaging should be possible				10
2.2.9.8	Fat suppression by water excitation imaging should be possible				10
2.2.10	2D Turbo Spin Echo (TSE) - Spacing: 1.5ms to 2.0ms - TR: range between 0.6336ms-1,06ms				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
	TE: 0.216-0.22ms				
2.2.11	3D Turbo Spine Echo: - TR: range between 0.6ms-1ms - TE: range 0.216ms- 0.22ms				10
2.2.12	Turbo Spin Echo: Spacing: range between 1.5ms to 2.9ms				10
2.2.13	Maximum (TSE) turbo factor 1024				10
2.2.14	Echo planar imaging (EPI) gr Echo Spacing: range between 0.21ms to 1.15ms				10
2.2.15	EPI Turbo Spin Echo				10
2.2.16	EPI Gradient Recalled Echo				10
2.2.17	Echo planar imaging - TR ranging between 0.7ms to 1.24 ms - TE ranging between 0.11ms to 0.17ms				10
2.2.18	EPI minimum measuring time between 2.47ms to 68.32ms				10
2.2.19	Maximum EPI factor 63, 127 and 255				10
2.2.20	Diffusion weighted imaging (DWI)				10
2.2.20.1	2D and 3D EPI DWI must be generated				10
2.2.20.2	2D and 3D TSE DWI must be generated				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
2.2.20.3	Tetrahedral DWI must be generated				10
2.2.20.4	BLADE DWI must be generated				10
2.2.20.5	Zoom DWI or similar technology must be generated				10
2.2.20.6	Enhanced DWI (eDWI) must be generated				10
2.2.20.7	Multiple b-values must be applied				10
2.2.20.8	Maximum b/value (s/ms ²) of 25000 must be applied				10
2.2.20.9	Minimum b/value (s/ms ²) of zero (0) must be applied				10
2.2.20.10	Apparent diffusion coefficient maps must be easily generated				10
2.2.20.11	Apparent diffusion coefficient values must be easily generated				10
2.2.20.12	Qualitative and quantitative EPI Diffusion Tensor imaging (DTI) must be obtained				10
2.2.20.13	2D and 3D DTI tracts must be generated				10
2.2.20.14	3D Fibre track model must be generated				10
2.2.20.15	TE (SShDWI, b=1000) • SENSE factor 2 range between 32, 35, 42, 69 • SENSE factor 4 range between 32, 33, 37, 52				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
2.2.20.16	Gradient and Spin Echo (GRASE) gr Echo spacing range between 0.21, 0.231, 0.65, 1.13ms				10
2.2.21	2D morphological and functional MRI Urography sequences and the appropriate automatic image postprocessing computer software tools must be supplied				10
2.2.22	3D morphological and functional MRI Urography sequences and the appropriate automatic image postprocessing computer software tools must be supplied				10
2.2.23	4D morphological and functional MRI Urography sequences and the appropriate automatic image postprocessing computer software tools must be supplied				10
2.2.24	Functional 4D high spatiotemporal resolution dynamic contrast enhanced MRI with a free breathing variable Density stack of Stars Functional MRI Urography sequences must be acquired				10
2.2.25	Functional analysis postprocessing computer software in MRI urography will be supplied to calculate the volume, split renal volume (vDRF), split renal Patlak function (pDRF) and the split renal function considering the volume and Patlak function (vpDRF) for each kidney				10
2.2.26	Calyceal transit time (CTT) in seconds to assess renal function for each kidney must be generated				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
2.2.27	Renal transit time (RTT) in seconds to assess renal function for each kidney must be generated				10
2.2.28	Mean transit time (MTT) in seconds to assess renal function for each kidney must be generated				10
2.2.29	Volume differential function (vDRF) to assess renal function for each kidney must be generated				10
2.2.30	Unit Patlak mL/min/cm ³ to assess renal function for each kidney must be generated				10
2.2.31	Patlak slope (number) to assess renal function for each kidney must be generated				10
2.2.32	Patlak differential function (DRF) to assess renal function for each kidney must be generated				10
2.2.33	Asymmetry index to assess renal function for each kidney must be generated				10
2.2.34	Signal intensity versus time curve graphs to assess renal function for each kidney must be generated				10
2.2.35	The bidder must supply the pituitary gland MRI sequences for morphological assessment, dynamic contrast enhancement and post processing software tools				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
2.2.36	The bidder must supply the hippocampal MRI sequences for morphological assessment, dynamic contrast enhancement and post processing software tools				10
2.2.37	The bidder must supply hippocampal coronal and axial diffusion-weighted imaging (DWI) with thin sections (3 mm) and a <i>b</i> value of 2000 sec/mm ²				10
2.2.38	Visualization of gallbladder, main intrahepatic ducts, common hepatic ducts, common bile duct and main pancreatic duct, pancreas, duodenal wall and spleen with and without the use of hepatobiliary or intravenous contrast agents must be possible.				10
3	Breast MRI				
3.1	An 18 channel breast coils with parallel imaging must be supplied				10
3.2	Fast spoiled gradient echo (FSPGR) breast MRI sequence or similar sequence must be supplied				10
3.3	3D T1W Fast spoiled gradient echo (FSPGR) breast MRI sequence or similar sequence must be supplied				10
3.4	3D fat-suppressed T1-weighted differential sub-sampling with Cartesian ordering (DISCO) sequence breast MRI sequence or similar sequence must be supplied				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
3.5	2D Three-point DIXON breast MRI sequence or similar sequence must be supplied				10
3.6	2D Two-point DIXON breast MRI sequence or similar sequence must be supplied				10
3.6.1	Gradient Echo sequence with spectral fat suppression breast MRI sequence or similar sequence must be supplied				10
3.7	Breast MR spectroscopy with a capability to quantify the choline and sodium peak ratios must be supplied				10
3.8	Blood oxygen level dependent contrast imaging breast MRI sequence or similar sequence must be supplied				10
3.9	The supplied 3D DISCO or similar sequence must be supplied to carry out a breast dynamic contrast enhancement (DCE).				10
3.9.1	An appropriate automatic breast DCE quantitative MRI to measure the transfer constant (Ktrans) must be supplied				10
3.9.2	An appropriate automatic breast DCE quantitative MRI to measure the rate constant from the interstitium to the plasma (kep) must be supplied				10
3.9.3	An appropriate automatic breast DCE quantitative MRI to measure the fractional volume of the extracellular space (ve) must be supplied				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
3.9.4	An appropriate automatic breast DCE quantitative MRI to measure the volume fraction of blood plasma (vp) must be supplied				10
3.9.5	An appropriate automatic breast DCE semi-quantitative computer software analysis tool must be supplied to display in graph the maximum slope (MS)				10
3.9.6	An appropriate automatic breast DCE semi-quantitative computer software analysis tool must be supplied to display in graph the time of peak (TTP)				10
3.9.7	An appropriate automatic breast DCE semi-quantitative computer software analysis tool must be supplied to display in graph, the maximum slope (MS)				10
3.9.8	An appropriate automatic breast DCE semi-quantitative computer software analysis tool must be supplied to display in graph the time to enhancement (TTE)				10
3.9.9	An appropriate automatic breast DCE semi-quantitative computer software analysis tool must be supplied to display in graph the initial area under curve (iAUC) in 60s				10
3.10	Breast MRI spatial resolution of at least 1.1mm x 1.1mm x 1.2mm must be feasible				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
3.11	The breast temporal resolution can set at least between 2.7–4.6s/phase, starting from the contrast injection, a total of 26 phases, with a scan duration of approximately 1 minute 20 seconds to 1 minute 40 seconds will be achieved. Following the ultra-early scan, the standard DCE-MRI with a time resolution of about 75, consisting of 4 phases, with a scan duration of approximately 5 minutes or less must be achieved				10
3.12	A breast MRI explainable artificial intelligence (AI) anomaly or equivalent AI tool for breast cancer detection must be supplied				10
3.13	A fully automated quantitative background parenchymal enhancement (BPE) measurements breast MRI software package must be supplied				10
3.13.1	Quantitative BPE imaging must measure the BPE extent				10
3.13.2	Quantitative BPE imaging must measure the BPE intensity				10
3.13.3	Quantitative BPE imaging must measure the breast fibroglandular tissue (FGT) volume				10
3.13.4	Quantitative BPE imaging must measure the fat volume				10
3.14	Breast perfusion MRI with velocity-selective arterial spin labeling must be supplied				10

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3.15	Breast, renal, liver and brain perfusion MRI with 3D pseudo continuous Arterial Spin Labeling must be supplied				10
3.16	The bidder must supply MR sequences and software to perform the MRI myelography				10
3.17	The bidder must supply MR sequences and software to perform the brain MR cisternography				10
3.18	The bidder must supply MR sequences and software to perform the Magnetic resonance cholangiopancreatography (MRCP)				10
4.1	VASCULAR IMAGING TECHNIQUES				
4.1.1	Non-contrast enhanced intraluminal vessel imaging				
4.1.1.2	When any of the vascular imaging sequences used in the abdominal areas and chest areas the respiratory gating in this 3T MRI machine should be able to be utilised in order to obtain motion artifact-free images.				10
4.1.1.3	Fast excellent morphological and functional non-contrast enhanced angiographic studies with associated automatic quantitative analysis tools will be supplied				10
4.1.1.4	3D Slab-selective inversion recovery (SS-IR) imaging, a non-contrast-enhanced (NCE) technique that is often used for renal and				10

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	abdominal angiography that are commercially named as Enhance Inflow IR, B-Trance or Native				
4.1.1.5	An Inversion delay time between 1.0s to 1.4 s would be achieved				10
4.1.1.6	During the delay time, inverted static tissues and venous blood should only recover partially whereas upstream arterial blood is not affected by the inversion pulse flow into the imaging volume, there by exhibiting high signal in resultant images				10
4.1.1.7	2D time of flight (TOF) and the 3D time of flight (TOF)				10
4.1.1.8	3D Quiescent interval single -shot (QISS)				10
4.1.1.9	3D dynamic subtractive angiography techniques in MRI (3D dynamic MR digital subtraction angiography				10
4.1.1.10	Velocity -selective angiography				10
4.2	The supplied fast Time-resolved magnetic resonance angiography (MRA) or dynamic contrast enhanced MRA methods should have at their core at least have the following elements				10
4.3	The supplied fast Time-resolved magnetic resonance angiography (MRA) or dynamic contrast enhanced MRA methods should have at their core at least have the following elements, 3D-spoiled GRE sequence, thin slices, very short TR, very short TE, low flip				10

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	angles and temporal resolution between 1.5seconds to 3seconds per frame by using parallel imaging acquisition and view sharing				
4.4	Vascular wall imaging				
4.4.1	The bidder must supply the 2D T1W TSE fat suppressed (FS) sequence				10
4.4.2	The bidder must supply the High-Resolution 3D T1W TSE FS - Turbo spine echo with variable low refocusing flip angles (e.g., SPACE, Cube or vista) sequence				10
4.4.3	The bidder must supply the Black Blood Dual Inversion (BB-DIR) sequence				10
4.4.4	The bidder must supply the Black Blood Quadruple Inversion Recovery (BB-QIR) sequence				10
4.4.5	The bidder must supply the Delayed Alternating with Nutation for Tailored Excitation (DANTE) for CSF suppression sequence				10
4.4.6	The bidder must supply the Anti-driven Equilibrium for CSF Suppression sequence				10
4.4.7	The bidder must supply T2W based vessel wall imaging sequence				10
4.4.8	The bidder must supply the Steady State Free Precession (SSFP) sequences				10

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4.4.9	The bidder must supply Cardiac gated FSE for abdominal and peripheral angiogram sequences				10
4.4.10	The bidder must supply the Contrast enhanced MRA sequences				10
4.4.11	The bidder must supply Rapid 3D Dynamic Arterial Spin Labelling with a Sparse Model-Based Image Reconstruction sequences				10
4.4.12	The bidder must supply the Advanced-In-Flow (Renal arteries & visceral arteries) sequences				10
4.4.13	The bidder must supply the Neurovascular 4D Flow Phase Contrast MRA sequence				10
4.4.14	The bidder must supply the 2D Phase contrast MR angiography and velocity encoding with its quantitative flow analysis software (for both venous, arterial, cardiac and cerebrospinal flow imaging).				10
4.4.14	The bidder must supply the 3D Phase contrast MR angiography and velocity encoding with its quantitative flow analysis software (for both venous, arterial, cardiac and cerebrospinal flow imaging).				10
4.5	Intracranial and extracranial Real-time phase contrast magnetic resonance imaging (RT-PC-MRI)				
4.5.1	The Real-time phase contrast magnetic resonance imaging (RT-PC - MR Flow) sampling rate must be higher than 10Hz without respiratory gating or cardiac gating and with an advanced k-space acquisitions.				10

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4.5.1.1	The Real-time phase contrast magnetic resonance Images must be reconstructed with five (5) Radial K-space lines per frame, with interleaved reference and velocity-encoded acquisitions for each k-space line with a 64-channel head and neck coil				10
4.5.1.2	The bidder must supply the 64-channel head and neck coil				10
4.5.1.3	The Real-time phase contrast magnetic resonance imaging must generate amplitude/magnitude brain images and phase-contrast brain images				10
4.5.2	During the Real-time phase contrast magnetic resonance imaging, under-sampled k-space data must be reconstructed offline using Generalized Auto calibrating Partial Parallel Acquisition (GRAPPA) operator gridding Golden-Angle Radial Sparse Parallel (GROG-GRASP) method or better				10
4.5.3	During the Real-time phase contrast magnetic resonance imaging, a fully automated process must be supplied to correct the background field and to remove eddy current artifacts.				10
4.5.4	During the Real-time phase contrast magnetic resonance imaging, a De-aliasing correction process must be supplied for instances in which the CSF velocity exceeds the velocity encoding.				10

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4.5.5	During the Real-time phase contrast magnetic resonance imaging ,A fully automatic segmentation algorithm based on frequency domain features of pixel velocity must be provided for CSF delineation				10
4.5.6	During the Real-time phase contrast magnetic resonance imaging ,A Continuous Cardiac cycle flow rate curve (Qt) must be generated with either a 300 or 500 sample points over several breathing cycles				10
4.5.7	During the Real-time phase contrast magnetic resonance imaging The phase contrast images must be calculated by subtracting two velocity maps obtained with opposite gradients (i.e., an opposite-polarity flow encoded pair)				10
4.5.8	During the Real-time phase contrast magnetic resonance imaging Real-time phase data must be post-processed using a time-domain multiparametric analysis method				10
4.5.9	During the Real-time phase contrast magnetic resonance imaging The parallel temporal acceleration factor and 2-sided shared velocity encoding reconstruction algorithm must measure blood flow and cerebrospinal fluid flow between the first cervical spine and the third cervical spine levels				10
4.5.10	During the real-time phase contrast magnetic resonance imaging, the field of view (FOV) ranging between 90mm x 90mm to 140mm x 140mm in both planes must be achieved				10

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4.5.11	During the real-time phase contrast magnetic resonance imaging at least a matrix of 98x128 must be achieved				10
4.5.12	During the real-time phase contrast magnetic resonance imaging at least a slice thickness between 1mm and 7mm must be acquired				10
4.5.13	Real-time phase contrast magnetic resonance imaging • TR: 2.88ms – 12ms • TE: 4.25ms – 7ms • Flip angle 8-10 degrees				10
4.5.14	During real-time phase contrast magnetic resonance imaging (RT-PC-MRI) The acquisition spatial resolutions at the cerebral aqueduct should be 0.5mm x 0.5mm and at C2-C3 cervical vertebral level must be 0.8mm x 0.8mm or better				10
4.5.15	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) Imaging speed between 76ms/image and 97ms/image (depending on the velocity encoding)				10
4.5.16	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) echo planar factor (EPI factor) = 7 (i.e., seven echoes collected during each TR)				10
4.5.17	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) Sensitivity encoding factor of 2.5				10

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4.5.18	During Real-time phase contrast magnetic resonance imaging (RT-PC-MRI), a chest belt to measure breathing signals during acquisition must be supplied				10
4.5.19	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) frames must be analysed using a signal processing SPIN analysis software package or an equivalent validated software for CFS oscillation quantification at cervical spine (C2-C3) and Sylvian aqueduct				10
4.5.20.1	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) must quantify the arterial flow (AF)				10
4.5.20.2	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) must quantify the venous flow (VF)				10
4.5.20.3	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) must quantify the cerebrospinal fluid flow (CSFF)				10
4.5.20.4	Real-time phase contrast magnetic resonance imaging (RT-PC-MRI) must quantify the Beat-to-beat variability (BBV) at the hemodynamic interface between the intracranial (IC) and systemic cardiovascular (CV) compartments at the first cervical spine level				10
4.5.20.5	The bidder must supply the Relaxation-exchange magnetic resonance imaging which evaluate the trans-barrier water exchange in the choroid plexus				10

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5.1	Brain MRI spectroscopy Imaging (MRSI)				
5.1.1	MRSI must detect and accurately display the N-acetyl aspartate (NAA) peak				10
5.1.2	MRSI must detect and accurately display the Creatine (Cr) peak				10
5.1.3	MRSI must detect and accurately display the Choline (Cho) peak				10
5.1.4	MRSI must detect and accurately display the Lactate (Lac) peak				10
5.1.5	MRSI must detect and accurately display the Lipid peak				10
5.1.6	MRSI must detect and accurately display the Myo-inositol (ml) peak				10
5.1.7	MRSI must detect accurately display the spectral glutamate and glutamine (Glx)				10
5.1.8	MRSI must detect and accurately display the γ -aminobutyric acid (GABA) peak				10
5.1.9	MRSI must detect and accurately display Glutathione (GSH) peak				10
5.1.10	MRSI must detect and accurately display Alanine peak				10
5.1.11	MRSI must detect and accurately display D-2-hydroxylglutarate (2HG), which is a marker of oncogenic IDH mutation status.				10
5.1.12	MRSI must detect and display the all the amino acids				10

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5.2	The bidder must supply the appropriate fast accurate brain MRS imaging sequences including three-dimensional echo planar spectroscopic imaging (3D-EPSI)				10
5.2.1	3D-EPSI must be supplied to derive all metabolic maps including the total choline (tCho)/total N-acetyl aspartate (tNAA) maps				10
5.2.2	3D-EPSI must be supplied to derive all metabolic maps including thetCho/total creatine (tCr) maps				10
5.2.3	3D-EPSI must be supplied to derive all metabolic maps including the 2HG maps				10
5.2.4	3D-EPSI must be supplied to derive all metabolic maps including the glutamate (Glu) maps				10
5.2.5	3D-EPSI must be supplied to derive all metabolic maps including the glutamine (Gln) maps				10
5.2.6	3D-EPSI must be supplied to derive all metabolic maps including the myo-inositol (mIns) maps				10
5.2.7	Appropriate fast accurate brain MRS imaging sequences including Three-dimensional echo planar spectroscopic imaging (3D-EPSI) 3D-EPSI must be supplied to derive all metabolic maps including the sum of lipids (Lip) maps				10
5.2.8	3D-EPSI must derive and display the total Choline/total N-Acetylaspartate ratios				10

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5.2.9	3D-EPSI must derive and display the total Choline /total Creatinine ratios				10
5.2.10	3D-EPSI must derive and display the total N-acetylaspartate /total Creatinine ratios				10
5.2.11	3D-EPSI must derive and display the total lactate/total N-acetylaspartate ratios				10
5.2.12	3D-EPSI must derive and display the total lipid/total lactase ratios				10
5.2.13	3D-EPSI must derive and display the total lactate/total Creatine ratios				10
5.2.14	3D-EPSI must derive and display the total 2-hydroxyglutarate/total lipid ratio and the 2-hydroxyglutarate/ lipase ratios				10
5.2.15	3D-EPSI must derive and display the total Choline /total Creatinine ratios				10
5.2.16	3D-EPSI must derive and display the total 2-hydroxyglutarate /total Creatinine ratios				10
5.2.17	3D-EPSI must derive and display the total 2-hydroxyglutarate /glutamate and glutamine ratios				10
5.3	The bidder must supply Amide proton transfer imaging (APT)				10
5.4	The bidder must supply Two-Dimensional-Correlation Spectroscopy (2D-COSY)				10

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5.5	The bidder must supply the Chemical exchange saturation transfer (CEST)				10
5.6	The bidder must supply the Glutamate-CEST				10
5.7	The bidder must supply the Creatine-CEST (Cr-CEST)				10
5.8	The bidder must supply the Phosphorus magnetic resonance spectroscopy (31P MRS)				10
6	The bidder must supply the MRI Fluoroscopy sequences				10
6.1	The bidder must supply the MRI Fluoroscopy for gastrointestinal imaging				10
6.2	The bidder must supply the MRI Fluoroscopy for vascular imaging				10
6.3	The bidder must supply the MRI Fluoroscopy for genitourinary imaging				10
6.4	The bidder must supply the MRI Fluoroscopy for musculoskeletal imaging				10
6.5	The bidder must supply the MRI Fluoroscopy for arthroscopic imaging				10
6.6	The bidder must supply the MRI Fluoroscopy sequences for cardiac imaging				10

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6.7	The bidder must supply the MRI compatible prostate gland biopsy hardware				10
7	Diffusion spectrum imaging				
7.1	The bidder must supply the sequences to perform the Diffusion Kurtosis Imaging and Diffusion spectrum imaging including images, maps, values, ratio and graphs must be generated for fractional anisotropy (FA)				10
7.2	The bidder must supply the Diffusion Weighted Spectrum Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the fractional anisotropy (FA)				10
7.3	The bidder must supply the Diffusion Weighted Spectrum Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the Radial diffusivity (RD)				10
7.4	The bidder must supply the Diffusion Weighted Spectrum Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the axial diffusivity (AD)				10
7.5	The bidder must supply the Diffusion Weighted Spectrum Imaging sequences and the postprocessing software to				10

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	generate images, maps, values, ratio and graphs for the tumour infiltration index				
7.6	The bidder must supply the Diffusion Weighted Spectrum Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the Apparent Diffusion Coefficient				10
8	Diffusion Kurtosis Imaging				
8.1	The bidder must supply the Diffusion Kurtosis Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the apparent diffusion kurtosis				10
8.2	The bidder must supply the Diffusion Kurtosis Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the fractional anisotropy (FA)				10
8.3	The bidder must supply the Diffusion Kurtosis Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the Diffusion Coefficient				10
8.4	The bidder must supply the Diffusion Kurtosis Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the Mean Kurtosis (MK)				10

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8.5	The bidder must supply the Diffusion Kurtosis Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the Radial kurtosis (RK)				10
8.6	The bidder must supply the Diffusion Kurtosis Imaging sequences and the postprocessing software to generate images, maps, values, ratio and graphs for the Axial kurtosis (AK)				10
8.7	The bidder must supply Diffusion spectrum imaging				10
8.8	The bidder must supply Diffusion kurtosis imaging				10
8.9	The bidder must supply the MRI Q-ball imaging (QBI)				10
8.10	The bidder must supply MRI Tractography with either 3D orientation distribution function (ODF)				10
9	The bidder must supply MRI Automatic parcellation techniques				10
10	The bidder must supply the pancake view 3D reconstruction technique				10
11	The bidder must supply the Steady State Free Precession (SSFP) sequences				10
12	The bidder must supply the isotropic FLAIR-T2*-Weighted Fusion Imaging				10
13	MRI Cartilage Imaging				

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13.1	The bidder must supply the cartilage T2 mapping sequences				10
13.2	The bidder must supply the cartilage DWI/DTI sequences				10
13.3	The bidder must supply the cartilage proteoglycans T1 rho sequences				10
13.4	The bidder must supply the proteoglycans dGERMIC sequences				10
13.5	The bidder must supply the glycosaminoglycans Sodium imaging sequences				10
13.6	The bidder must supply the glycosaminoglycans gagCEST sequences				10
13.7	The bidder must supply the glycosaminoglycans dGERMIC sequences				10
14	MRI Liver Imaging				
14.1	The supplier must supply a 32channel body matrix coil				10
14.2	The supplier must supply a chemical shift imaging-based MRI Proton density fat fraction (CS-MRI-PDFF)				10
14.3	The supplier must supply a high speed T2-corrected multi-echo MR spectroscopy MRI Proton density fat fraction (HISTO-MRS-PDFF)				10

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14.3	The bidder must supply the confounder-corrected R2* liver iron concentration sequence				10
14.4	The must supply the latest multivendor R2* liver iron concentration calibration MRI tool				10
14.5	The bidder must supply MRI sequences to acquire and quantify the Proton density fat fraction (steatosis quantification)				10
14.6	The bidder must supply a Corrected R2* iron concentration MRI sequence to correctly quantify the liver iron concentration				10
14.7	The bidder must supply the MRI elastography sequence (to detect advanced liver fibrosis)				10
14.8	The bidder must supply the 3D whole liver dynamic contrast enhanced MRI with tracer kinetic modelling to liver quantity microcirculation				10
14.9	The bidder must supply golden-angle Radial Sparse Parallel MRI with Improved performance (GRASP-Pro) with navi-stack of stars dynamic contrast enhanced MRI sequence that has a temporal resolution between 0.34seconds 0.45 seconds per volume.				10
14.10	The bidder must supply a liver perfusion quantification MRI that must measure the mean slope of increase (MSI)				10
14.11	The bidder must supply a liver perfusion quantification MRI that must measure the mean slope of increase (MSI)				10

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14.12	The bidder must supply the liver perfusion quantification MRI that must measure the mean transit time (MTT) in seconds				10
14.13	The bidder must supply the liver perfusion quantification MRI that must measure the Hepatic arterial blood flow (HaBF)				10
14.14	The bidder must supply the liver perfusion quantification MRI that must measure the percentage Hepatic arterial Fraction (HAF)				10
14.15	The bidder must supply the liver perfusion quantification MRI that must measure the percentage distribution volume (DV)				10
14.16	The bidder must supply the liver perfusion quantification MRI that must measure the Transit Time to impulse Peak (Tmax)				10
14.17	The bidder must supply the Single Shot Spin Echo planar (SS EPI) DWI acquired with breath hold acquisition, free respiratory and respiratory triggered acquisition methods				10
14.18	The bidder must supply an automatically filled latest Liver Imaging Reporting and Data System (LI-RADS) software package				10
14.19	The bidder must supply the latest LI-RADS Treatment response algorithm (LR-TRA) for non-radiation and for post-radiation liver directed therapy and incorporating MRI ancillary features				10

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14.20	The bidder must supply computer software packages to automatically perform a Modified Response Evaluation Criteria in solid tumours (mRECIST), Neuro-Oncology (RANO) criteria				10
14.21	The bidder must supply computer software packages to automatically perform a Neuro-Oncology (RANO) criteria				10
14.22	The bidder must supply a Liver 3D DWI sequence				10
14.23	The bidder must supply the Liver Intravoxel incoherent motion MRI sequence				10
15	3D Susceptibility weighted imaging (SWI)				
15.1	The bidder must supply MRI scanner software that must automatically generate the SWI phase images				10
15.2	The bidder must supply MRI scanner software that must automatically generate the SWI Magnitude images				10
15.3	The bidder must supply MRI scanner software that must automatically generate the SWI minimum intensity projection (mIP) images				10
15.4	The bidder must supply MRI scanner software that must automatically generate the SWI maximum intensity projection (MIP) images				10

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15.5	The bidder must supply MRI scanner software that must automatically regenerate the SWI mIP images				10
15.6	The bidder must supply MRI scanner software that must automatically regenerate the SWI MIP images				10
15.7	The bidder must supply a SWI sequence with the following imaging parameters or better • Ernst angles (in degrees) for white matter, gray matter and CSF 14.7/11.1/6.6 • Slice thickness(mm) 2 • In-plane Reconstruction (low) 0.5x 1 • Fast scan time (low resolution) 2min 31secs • Scan time without using partial Fourier (PF) factors or elliptical sampling (ES) 3min 54sec • In-plane Resolution (high) cubic millimetres – 0.5 x 0.5				10
15.8	The bidder must supply a multi-echo gradient echo sequence to reconstruct Quantitative susceptibility mapping images to allow quantification of magnetic susceptibility				10
15.9	The bidder must supply maximum intensity projection QSM to show the dynamic changes in venous oxygen saturation.				10
15.10	The bidder must supply a QSM imaging in which the brain veins are highlighted independent of their orientation				10

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15.11	The bidder must supply the scale bar values cerebral blood flow and QSM data that are in millilitres per 100g of tissue per minute and parts per billion				10
15.12	The bidder must supply the MRI sequences to generate the R2* values, R2 values and R1 values and their respective maps				10
15.13	The bidder must supply the MRI sequences to generate the inverse R2* values, inverse R2 values and inverse R1 values and their respective maps				10
15.14	The bidder must supply the True-SWI sequences				10
15.15	The bidder must supply the SWI-like sequences				10
16	Cardiac MRI				
16.1	The bidder must supply a Wide-band cardiac MRI sequences to mitigate the high-signal-intensity artifact in patients with devices caused by off resonance				10
16.2	The bidder must supply the cardiac Real-time cine MRI sequences				10
16.3	The supplied Real-time cine MRI must be useful in the diagnosis of pericardial constriction based on respiratory variations in septal motion, in the evaluation of dynamic changes with physical exercise.				10

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16.4	The supplied Real-time cine MRI must be useful in the evaluation foetal cardiac MRI				10
16.5	The bidder must supply a black blood LGE sequences that must use a flow-independent cardiac MRI technique				10
16.6	The bidder must supply a multiecho water-and fat-separated cardiac MRI sequence that must distinguish cardiac muscle scar from fat.				10
16.7	The bidder must supply an automatic cardiac muscle texture analysis and radiomics of non-contrast enhanced cine cardiac MR images.				10
16.8	The bidder must supply a Cardiac, brain, liver, prostate gland, kidney, pancreas and other organ MR fingerprinting techniques for simultaneous mapping of multiple tissue parameters including T1, T2, T2*, T1ρ, proton density fat fraction, diffusion coefficient, perfusion, B0, B1, magnetization transfer, chemical exchange saturation transfer, and flow from a single scan				10
16.9	The bidder must supply a Free-running five-dimensional cardiac MRI sequences that use acceleration strategies to acquire motion-resolved free-breathing whole-heart cine images				10
16.10	The following Cardiac MRI parametric mapping parameters for tissue characterization will be developed and quantified				

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16.10.1	The bidder must supply the latest cardiac MRI T1 mapping sequence and the automatic computer software to measure the myocardial T1 relaxation times				10
16.10.2	The bidder must supply the latest cardiac MRI contrast enhanced T1 mapping sequence and the automatic computer software to measure the post contrast myocardial T1 relaxation times				10
16.10.3	The bidder must supply the latest cardiac MRI T2 mapping sequence and the automatic computer software to measure the myocardial T2 relaxation times				10
16.10.4	The bidder must supply the latest cardiac MRI T1 mapping sequence and the automatic computer software to measure the myocardial T2* relaxation times				10
16.10.5	The bidder must supply sequences that must quantify the cardiac extracellular volume (ECV) fraction				10
17	The bidder must supply the latest Cardiac Diffusion weight imaging (DWI) sequence				10
18	The bidder must supply the Cardiac MR spectroscopy sequence that must assess triglycerides content, pyruvate metabolism, and phosphocreatine concentration				10
19	The bidder must supply the cardiac real-time cine MRI that must utilised it in the setting of cardiac arrhythmias and in young				10

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	children who cannot be sedation or be imaged under anaesthesia.				
20.1	The bidder must supply the Cardiac quantitative perfusion techniques				10
20.2	The bidder must supply the Cardiac quantitative perfusion technique whereby the dynamic signal intensity profiles of the left ventricle blood pool and myocardium are converted to gadolinium concentration profiles that must be facilitated by automated in-line postprocessing.				10
20.3	The bidder must supply the Cardiac quantitative perfusion techniques that after modeling, the myocardial blood flow in millilitres per minute per gram of tissue must be displayed at stress and at rest for the entire heart at the segmental level (17-segment American Heart Association model) and at endo- and epicardial levels				10
20.4	The bidder must supply the latest sequences to perform and quantify the myocardial perfusion reserve				10
21	The bidder must supply the latest cardiac muscle arterial spin labelling perfusion MRI sequence				10
22	The bidder must supply the latest 3D volumetric late gadolinium enhancement phase-sensitive inversion recovery technique				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
23	The bidder must supply a single-shot acquisition MRI sequence that must be acquired in one heartbeat with respiratory motion correction and signal averaging. This sequence must be useful in patients with arrhythmias or with poor breath holding.				10
24.1	The bidder must supply a Cardiac 4D flow MRI sequence will be a 3D sequence that is sensitive to blood flow in three orthogonal dimensions and that must be synchronized to the cardiac cycle to provide time-resolved data.				10
24.2	The bidder must supply a cardiac 4D flow MRI sequence that must yield a 3D volume rendering of vascular structures without administration of intravenous gadolinium contrast material.				10
25.1	The bidder must supply MRI Cardiac myocardial strain imaging sequence called myocardial tagging.				10
25.2	The bidder must supply MRI Cardiac myocardial strain imaging sequences called the strain-encoded imaging (SENC)				10
25.3	The bidder must supply MRI Cardiac myocardial strain imaging sequences called the displacement-encoding with stimulated echoes (DENSE)				10
25.4	The bidder must supply MRI Cardiac myocardial strain imaging sequences called the tissue phase mapping				10

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26.1	The bidder must supply the latest validated Deep Learning (DL) artificial intelligence models and these models should be integrated in routine cardiac MRI workflow.				10
26.2	The bidder must supply DL models that must accurately identify cardiac anatomic landmarks to automatically prescribe canonical cardiac MRI planes				10
26.3	The bidder must supply DL models that must accurately denoise highly accelerated MRI sequences				10
26.4	The bidder must supply DL models that must accurately identify the optimal inversion time for the Late Gadolinium Enhancement (LGE)				10
26.5	The bidder must supply DL models that must accurately and automatically segment the ventricular contours for volume, mass and function				10
26.6	The bidder must supply DL models that must accurately and automatically segment the atrial contours for volume, mass and function.				10
26.7	The bidder must supply an Automated cardiac imaging postprocessing tools that should be available to perform the entire myocardial strain quantification analysis and data display				10

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26.8	The bidder must supply an Automated cardiac imaging postprocessing tools that should be available to perform all the cardiac 4D flow quantification analysis and data display				10
26.9	The bidder must supply an Automated cardiac imaging postprocessing tools that should be available to perform all the cardiac perfusion quantification analysis and data display LGE, and parametric mapping				10
26.10	The bidder must supply an Automated cardiac imaging postprocessing tools that must be available to perform all the cardiac LGE quantification analysis and data display				10
26.11	The bidder must supply an Automated cardiac imaging postprocessing tools that must be available to perform all the pre-contrast cardiac T1 mapping quantification analysis and data display				10
26.12	The bidder must supply an Automated cardiac imaging postprocessing tools that must be available to perform all the post contrast cardiac T1 mapping quantification analysis and data display				10
26.13	The bidder must supply an Automated cardiac imaging postprocessing tools that must be available to quantify the cardiac muscle Extracellular Volume. The ECV must measure the				10

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	extracellular vascular and plasma volume. The ECV must be calculated as $(1/T1 \text{ myocardium-post-}1/T1 \text{ myocardium-pre}/1/T1 \text{ blood-pool post-}1/T1 \text{ blood-pool pre}) \times (100\text{-hematocrit})$.				
26.14	The bidder must supply an Automated cardiac imaging postprocessing tools that must be available to perform all the cardiac T2 mapping quantification analysis and data display				10
26.15	The bidder must supply an Automated cardiac imaging postprocessing tools that must be available to perform all the cardiac T2* mapping quantification analysis and data display				10
27	Coronary Angiography				
27.1	The bidder must supply the latest coronary artery sequences that must suppress fat and muscles that are closely surround the coronary arteries by using a T2 preparation pulse and fat saturation preparation pulse which proceed the segmented acquisition module				10
27.2	The bidder must supply a coronary artery 3D balanced steady state free precession (b-SSFP) sequence				10
27.3	The bidder must supply a coronary artery Contrast enhanced T1weighted GRE sequence				10
27.4	During Cardiac MRI coronary angiography images must be acquired during free breathing by applying a cylindrical				10

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	excitation across the diaphragm-air interface followed by 1D spatial encoding in superior-inferior motion of the diaphragm - A 5mm gating window must be pre-defined so that segmented cardiac data are acquired or abandoned when corresponding diaphragm positions fall within or outside the window - A 0.6mm window must be utilised to correct the residual respiratory motion that is empirically found correlating between the superior inferior motion of the diaphragm and heart				
27.5	The bidder must supply the diaphragm navigator for proper acquisition of coronary artery angiograms				10
28	Prostate gland MRI				
28.1	The bidder must supply the prostate gland 2D MR spectroscopy sequence				10
28.2	The bidder must supply the prostate gland 3D MR spectroscopy sequence				10
28.3	The 2D and 3D prostate gland MRI spectroscopy must detect and accurately display Creatine peak				10
28.4	The 2D and 3D prostate gland MRI spectroscopy must detect and accurately display Choline peak				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
28.5	The 2D and 3D prostate gland MRI spectroscopy must detect and accurately display Spermine peak				10
28.6	The 2D and 3D prostate gland MRI spectroscopy must detect and accurately display Taurine peak				10
28.7	The 2D and 3D prostate gland MR spectroscopy must detect and accurately display Myo-Inositol peak				10
28.8	The 2D and 3D prostate gland MR spectroscopy must detect and accurately display Glutamate/glutamine peak				10
28.9	The bidder must supply the prostate MR spectroscopy quantitative analysis tool where the peak integrals of all metabolites are estimated by means of the choline-plus-creatine to citrate (CC/C) ratio				10
28.10	The bidder must supply the MRS analysis tool must generate and display the peak heights of citrate and choline during the qualitative prostate cancer analysis				10
28.11	The bidder must supply a mGOIA-sLASER sequence for voxel of interest selection and reduced spectral contamination with lipid signals of fat surrounding the prostate and short imaging times without an endorectal coil				10
28.12	The bidder must supply the Point resolved spectroscopy (PRESS) sequence				10

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28.13	The bidder must supply a pelvic phased array coil with a minimum of 18 channels				10
28.14	The bidder must supply an MRI sequence that must reduce congestion and increase the metabolite specificity and the detection of all metabolites				10
28.15	The bidder must supply a prostate MRI lipid signal and water signal suppression pulse sequence				10
28.16	The bidder must supply a Double band-selective inversion with gradient dephasing (BASING) and Mescher-Garwood (MEGA) sequence				10
28.17	The bidder must supply a 3D fully convolutional networks for Automatic prostate MRI segmentation				10
28.18	The bidder must supply a prostate MRI sequence to assess the prostate microstructure and tissue composition Diffusion relaxation correlation spectrum MRI				10
28.19	The bidder must supply a Vascular extracellular and restricted diffusion for cytometry (VERDICT)				10
28.20	The bidder must supply a prostate luminal water imaging MRI sequence				10
28.21	The bidder must supply a prostate MRI sequence for prostate microstructure and tissue composition				10

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28.22	The bidder must supply a diffusion relaxation correlation spectrum MRI sequence				10
28.23	The bidder must supply computer software that must measure the signal intensities values and determine the signal intensity ratios from the T1W, STIR, FLAIR, T2W and PDW images				10
Magnetization Transfer Imaging					
29.1	The bidder must supply a 3D GRE dual Echo stack of stars images with or without Sin-Gaussian shaped Magnetization Transfer saturation pulses with nominal 360 alpha angle.				10
29.2	The bidder must supply magnetic transfer imaging sequence that must easily determine the magnetization transfer ratio (MTR)				10
29.3	The bidder must supply the MRI postprocessing software that must generate and display the Magnetisation transfer maps				10
29.4	The bidder must supply the Inhomogeneous magnetization transfer sequence				10
29.5	The bidder must supply quantitative magnetisation transfer to measure the forward exchange rate				10
29.6	The bidder must supply quantitative magnetisation transfer to measure the spin-lattice relaxation rate of the free pool				10

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29.7	The bidder must supply Quantitative Magnetisation transfer to measure the spin-spin relaxation rate of the restricted motion pool				10
29.8	The bidder must supply the MRI software to automatically generate a correct reliable validated apparent diffusion coefficient value with an attached clearly written SI metric and standard deviation				10
29.9	The bidder must supply a Quantitative MRI method to automatically generate the T2 relaxation rates, T1 relaxation rates and the T2* relaxation rates				10
29.10	The bidder must supply a Quantitative MRI method to automatically generate and display the T2 relaxivity T1 relaxivity and T2*relaxivity rates				10
29.11	The bidder must supply a Quantitative MRI method to automatically generate and display the Proton density				10
29.12	The bidder must supply a Quantitative MRI method to automatically generate and display the Signal intensity ratio				10
29.13	The bidder must supply a Quantitative MRI method to automatically generate and display the Magnetization transfer ratio				10

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29.14	The bidder must supply the advanced magnetic resonance neuropathy sequence				10
29.15	The bidder must supply the automated nerve segmentation and automatic MTR volume co-registration				10
30	Time Resolved MR Angiography				
30.1	The bidder must supply the 3D Time Resolved MR Angiography Imaging of Contrast Kinetics (TRICKS) sequence				10
30.2	The bidder must supply the 4D Time Resolved MR Angiography Imaging of Contrast Kinetics (TRICKS) sequence				10
30.3	The bidder must supply the Time resolved angiography with stochastic trajectories (TWIST) sequence				10
31	Ultrashort MRI imaging				
31.1	The bidder must supply the ultrashort Echo Time 2D T1W lung imaging				10
31.2	The bidder must supply the ultrashort Echo Time 3D T1W lung imaging				10
31.3	The bidder must supply the ultrashort Echo Time 2D T2W lung imaging				10
31.4	The bidder must supply the Fat Suppressed Ultrashort Echo Time 2D T1W lung imaging sequence				10

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31.5	The bidder must supply the Fat Suppressed Ultrashort Echo Time 2D Diffusion weighted respiratory triggered lung imaging sequence				10
31.6	The bidder must supply the Fat Suppressed Ultrashort Echo Time 2D Diffusion weighted with multiple breath-hold lung imaging sequence				10
31.7	The bidder must supply the Diffusion weighted with multiple breath-hold lung imaging sequence				10
31.8	The bidder must supply the T1/T2 True Fast Imaging with Steady-State Free Precession (TRUFI) lung imaging sequence				10
31.9	The bidder must supply the T2W HASTE lung imaging sequence				10
31.10	The bidder must supply the Periodically Rotated Overlapping Parallel Lines with Enhanced Reconstruction) PROPELLER sequence				10
31.11	The bidder must supply the Jet Flow Imaging sequence				10
31.12	The bidder must supply the free-breathing T2-weighted MultiVane-XD (MVXD) sequence				10
32	The bidder must supply the radial acquisition regime (RADAR) for acquiring head and neck MR images.				10

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32.1	The bidder must supply the RADAR T_2 weighted imaging (RADAR-T2WI)				10
32.2	The bidder must supply the single-shot echo planar imaging diffusion-weighted imaging (SS-EPI-DWI)				10
32.3	The bidder must supply the RADAR diffusion-weighted imaging (RADAR-DWI)].				10
32.4	The bidder must supply the 3D Zero TE non-cartesian based MRI sequence				10
32.5	The bidder must supply the 2D T1W GRE Lung vascular imaging sequence				10
32.6	The bidder must supply the 3D T1W GRE (echo sharing) lung vascular imaging sequence				10
32.7	The bidder must supply the T1W/T2W Steady state GRE sequence				10
32.8	The bidder must supply the Dynamic Contrast enhanced 3D time resolved T1W GRE Lung perfusion imaging sequence				10
32.9	The bidder must supply the Arterial spin-labeling in unenhanced lung perfusion MRI sequence				10
32.10	The bidder must supply the Fourier decomposition imaging in unenhanced lung perfusion sequence				10
32.11	The bidder must supply the lung perfusion quantification software				10

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32.12	The bidder must supply the Lung ventilation MRI sequence				10
32.13	The bidder must supply the fat suppressed proton density sequences				10
32.14	The bidder must supply the proton density sequences				10
32.15	The bidder must supply the MRI enteroclysis sequences				10
32.16	The bidder must supply the MR enterography sequences				10
32.17	The bidder must supply the multi-nuclei coils to create carbon (¹³ C), phosphorus (³¹ P), sodium (²³ Na), Xenon (¹²⁹ Xe) and fluorine (¹⁹ F) images				10
32.18	The bidder must supply the MRI defecography sequences				10
33	IMAGING ENHANCEMENT AND NOISE REDUCTION TECHNIQUES				
33.1	Techniques to enhance blood flow and suppression of the background signal should be included. Supply details.				10
33.2	Techniques using a different flip angle RF pulse with 3D Time of Flight scanning for enhancing the signal from blood throughout the imaging volume must be available. Supply details.				10
33.2	Multi-area coverage techniques with 3D TOF MRA via the separation of data acquisition areas into a few areas in order to				10

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	reduce signal decreases due to saturation effects must be possible.				
34	PHASE SHIFT ANGIOGRAPHY				
34.1	Phase encoding gradient pulse techniques for 2D and 3D Phase Shift angiography are to be included. Supply details.				10
34.2	To be used with a volume slice to increase vessel coverage and to shorten scan times.				10
34.3	Imaging of specific vessels via depiction of the flow velocities should be possible.				10
34.4	Scanning using an ECG gating technique should be offered for ECG cardiac gating cine imaging.				10
34.5	Measurement of blood flow velocity using cine imaging must be possible. Supply details.				10
34.6	3D Phase Shift Angiography mode must be available to show multi-directional vascular structures. Supply details.				10
34.7	The generation of MIP images, with multiple angle viewing should be possible.				10
34.8	A post processing algorithm that selectively enhances small vessel details as well as suppresses background tissue signal must be available. Supply details.				10

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34.9	Imaging of specific vessels via depiction of the flow velocities should be possible.				10
34.10	A post-processing algorithm that can selectively enhance small vessel detail as well as suppress background tissue signals should be included. Supply details.				10
35	FAT SUPPRESSION TECHNIQUES				
35.1	Short Tau Inversion Recovery (STIR) fat suppression technique to suppress fat signals for water/proton image enhancement is required. Supply details.				10
35.2	A Fast Short Tau Inversion Recovery (STIR) fat suppression technique to reduce scan times is required. Supply details.				10
35.3	A water/fat opposing phase fat suppression technique is required. Supply details.				10
35.4	Fat saturation pulse techniques are required. Tenderers to supply full details.				10
35.5	A technique to provide uniform water images over all slices using a fat signal suppression technique with Spin Echo and Fast Spin Echo sequences is required. Supply details.				10
35.6	Dixon technique is required				10

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35.7	T1 , T2 and FLAIR images				10
36	IMAGING MODES The following imaging modes must be available:				10
36.1	Multi-slice. Supply details.				10
36.2	Multi-echo. Supply details.				10
36.3	Multi-area coverage. Supply details.				10
36.4	Interleaving of scans. Supply details.				10
36.5	Excitation order setting for multi-slice. Supply details.				10
36.6	Dynamic scan mode. Supply details.				10
36.7	Cardiac gating for multi-slice / single phase and single slice / multi-phase imaging techniques. Cardiac images should be displayed in cine mode. A suitable heart monitor is to be included. Supply details.				10
36.8	Prospective and Retrospective gating techniques must be offered as standard options. Supply details.				10
36.9	Respiratory gating to reduce respiratory motion artifacts is required. Supply details.				10

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36.10	Peripheral pulse gating to reduce CSF pulsation artifacts is required. Supply details.				10
37	ARTIFACT SUPPRESSION TECHNIQUES The following artifact suppression techniques are required:				
37.1	Metal induced artifact suppression software				10
37.2	Flow compensation. Supply details.				10
37.3	Pre-saturation bands. Supply details.				10
37.4	Scanning with a reduced number of pre-saturation bands to increase the number of slices. Supply details.				10
37.5	Elimination of wrap-around artifacts. Supply details.				10
37.6	Swapping of phase and encoding directions for minimizing flow and respiratory motion artifacts. Supply details.				10
37.7	Breath-hold imaging techniques. Supply details.				10
37.8	An auto-voice function for patient instructions via voice communication between the magnet gantry and the operators console must be available.				10
38	PERFUSION MRI SCANNING				
38.1	A perfusion scanning mode without the use of MRI contrast agents is required. Full details.				10

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38.2	Either cardiac, respiratory or peripheral gating are required for optimal functionality. If required, these gating techniques must be included.				10
38.3	Full details as well as imaging parameter variants are required for this mode. State.				10
38.4	Tenderers are to supply details whether contrast and non-contrast imaging can be used for this mode. State.				10
38.5	A non-Gadolinium perfusion using Arterial Spin Labelling must be available. State details.				10
39	FUNCTIONAL MRI SCANNING				10
39.1	Full details as well as imaging parameter variants are required for this mode.				10
39.2	A functional MRI scanning mode must be included. Full details.				10
39.3	Vendors to state whether either cardiac, respiratory or peripheral gating are required for optimal functionality. If required, these gating techniques must be included.				10
40	COMPUTER SYSTEM				
40.1	The bidder must supply computer image reconstruction that uses a server equipped with two 24-core CPUs, 384GB RAM, and				10

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	a 11 GB NVIDIA GPU multi-tasking computer architecture must provide extensive multi-tasking functionality that allows simultaneous image reconstruction and image processing whilst scanning				
40.2	Operator console shall be capable of patient registration, reconstruction, viewing, post-processing, filming, data storage.				10
40.3	Operator console shall be capable of both acquisition as well as post processing for swift operations.				10
40.4	Display monitor shall be large 24" or higher widescreen LCD type				10
40.5	Screen matrix must be minimum 1920 X 1200				10
40.6	Must have a RAM of 64 GB or higher				10
40.7	Clock rate must be 3.5GHz or more				10
40.8	Windows 10 or higher operating platform.				10
40.9	Solid state drive shall have a storage capacity of at least 2,000,000 images in 256 matrix				10
40.10	The main console shall have facility to control the music system for the patient in the magnet room.				10
40.11	System must be fully DICOM 3.0 compliant with all standard DICOM specifications, such as but not limited to: Storage Send,				10

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	query /Retrieve, Storage, print, worklist, MPPS Modality performed procedure steps, Structured Reports, Commitment and Print with interface to the hospital RIS/PACS network/system.				
40.12	A minimum 40 GB LAN fibre line from the 3 T MRI to PACS, RIS, HMS2 and the E-referral server				10
41	DOCTORS CONSOLE				
41.1	An independent doctor's console providing high-speed processing and efficient viewing, analysis and hard copying of MR images, with access to all examination DICOM 3 data shall be available.				10
41.2	The diagnostic workstation shall be connected to the MR-system via a DICOM 3 data network.				10
41.3	Vendors are to detail the hardware and software functionality of the console on offer.				10
41.4	DICOM 3 Network and laser camera connections shall be part of the workstation.				10
41.5	Vendors to state – Hardware/ Software / Operating system				10
41.6	Image viewing and processing functions.				10
41.7	Storage facilities.				10

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41.8	Software packages offered.				10
41.9	Full supporting documentation including the DICOM 3 Conformance Statement is to be included.				10
42	CHILLER				
42.1	The chiller needs to be manufactured out of galvanised marine-grade aluminium				10
42.2	The coils of the chiller and internal components must have factory applied anti-corrosion coating				10
42.3	All alarms and fault alerts need to be remotely monitored via a functional SMS system, by the supplier and the hospital staff				10
42.4	The supplier will supply MRI compatible neonatal and paediatric bed, incubator, coils for neonates in the inside an incubator, ventilator, MRI compatible lung function test machine, ECG, EEG and a vital sign monitoring hardware				10
43	Shimming				
43.1	shall be High performance, highly stable shim system with global and localized automated passive and active shimming for high homogeneity magnetic field for complete imaging and spectroscopy				10
43.2	Must include both active and passive shimming				10

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43.3	Auto shim shall be available to shim the magnet with patient in position				10
43.4	Off-center shimming shall be possible				10
44	Magnet:				
44.1	3.0T active shielded super conductive magnet with best homogeneity.				10
44.2	Field stability over time shall be < or equal to 0.1 ppm/hr				10
44.3	Magnet weight including cryogen shall not be more than 5 500 Kg				10
44.4	Magnet length shall be ≤ 1.9 m including covers				10
44.5	Magnet bore size 70 cm or more				10
44.6	Magnet bore design needs to be with flared opening for better patient comfort.				10
44.7	The magnet shall be well ventilated and with in-bore illumination with built in 2-way intercom for communication with patient				10
44.8	Interactive touch display on the gantry for display of Physiological parameter and patient positioning adjustment.				10

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44.9	Noise level inside the examination room shall be minimum as possible. Specify the technologies included for lowering the noise levels				10
45	Homogeneity:				
45.1	The system homogeneity needs to be reliable over a large field of view. FOV shall be minimum of 55 cm (x axis) x 55 cm (y axis) x 50 cm (z axis)				10
45.2	The system homogeneity performance for various Diametric Spherical Volume (DSV) needs to be stated, with the details of the measurement technique employed. DSV measurement must be based on 24 plane plot method Guaranteed homogeneity at 30cm must be ≤ 0.15 ppm Guaranteed homogeneity at 40cm must be ≤ 0.45 ppm Guaranteed homogeneity at 45cm must be ≤ 1.15 ppm				10
46	Gradient system:				
46.1	The system shall be of the latest patient- friendly and highly efficient gradient system. Gradient must be actively shielded with extremely low eddy currents				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
46.2	The required gradient strength vector summation for each axis should not be below 75mT/m and the effective gradient strength should be above 136mT/m. Please mention actual true values. Equivalent values must not be accepted and must lead to disqualify.				10
46.3	The required maximum slew rate should not be below 200mT/m/msec per axis simultaneously and the effective slew rate should be above 344T/m/s Please mention actual true values. Equivalent values must not be accepted and must lead to disqualify.				10
46.4	Rise time shall be $\leq 225 \mu s$ to reach maximum strength				10
46.5	Duty cycle must be 100%				10
46.6	Gradient must be water-cooled, highly compact, modular design				10
46.7	Gradient system must be capable to support all the specified application (standard & optional) at the optimal clinical performance.				10
46.8	System must have Gradient acoustic noise reduction technology. State the details of the acoustic damping technology.				10
47	Magnet cooling system:				

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
47.1	The magnet shall have the latest low helium boil off technology and zero boil-off under normal operating conditions.				10
47.2	Helium Boil off rate must be 0.0 liter / year				10
48	Patient Table:				
48.1	Fixed patient table.				10
48.2	Maximum scannable range ≥ 200 cm				10
48.3	Maximum horizontal travel ≥ 280 cm				10
48.4	Maximum horizontal speed ≥ 20 cm/s				10
48.5	Minimum vertical travel ≥ 55 cm				10
48.6	Maximum vertical travel ≥ 100 cm				10
48.7	Patient weight limit more than 250 kg				10
48.8	Repositioning accuracy shall be ± 0.5 mm				10
48.9	Patient Table accessories like Positioning pads, Immobilization straps, table cushion must be included				10
48.10	Table must be able to connect minimum 32 coils simultaneously on the table				10
48.11	The table must deliver the protocols for automatic bolus chasing in peripheral angiography with automatic table movement.				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
48.12	The table must have facility for manual traction in case of emergency.				10
49	RF Transmit Technology:				
49.1	System shall offer latest high-density RF transmit technology.				10
49.2	Integrated whole body no tune transmit / receive coil with minimum 32 rungs				10
49.3	Transmit amplifier shall be compact and water-cooled technology				10
49.4	Receiver bandwidth for each channel must be ≥ 1 MHz				10
49.5	Transmit amplifier peak power must be ≥ 35 kW				10
49.6	Transmit amplifier bandwidth must be ≥ 500 kHz				10
50	RF Receiver Technology:				
50.1	The offered system shall have the latest RF technology, where the RF signals from the receiver coil are digitized at the magnet end (Inside the RF shielded room) and are transmitted as a digital signal outside the Magnet room. The vendor is to confirm the details of the RF technology being offered.				10
50.2	Maximum number of channels shall be more than 200.				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
50.3	Number of independent receiver channels that can be used simultaneously in one single scan and in one single FOV, each generating an independent partial image shall be ≥ 64				10
50.4	Coils shall be automatic or no tune coil technology.				10
50.5	System shall facilitate auto coil select and combination of coils for extended FOV				10
50.6	Receiver bandwidth for each channel must be ≥ 1 MHz				10
50.7	Receiver resolution shall be ≥ 32 bit				10
50.8	ADC sampling rate shall be ≥ 80 MHz				10
50.9	Dynamic range must be ≤ 160 dB				10
50.10	System must be capable of onsite upgradable to higher number of channels in future.				10
51	Coils:				
51.1	The system must provide capability of doing whole body scanning from head to toe using sufficient and optimal coil elements at a time for better image quality.				10
51.2	Coils must include latest technology for high density design. Coils shall be capable combining for extended FOV examinations				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
51.3	System must be capable of connecting more than 200 coil elements without patient repositioning.				10
51.4	All array coils must be compatible with parallel imaging techniques				10
51.5	Must allow remote selection of coils and/or coil elements.				10
51.6	System must be able to select coil elements in single, dual or triple combinations				10
51.7	Head & Neck coil: System shall include Head & Neck coil with minimum 32 channels. Coil shall be cable less direct plugged-in coil, with open patient friendly design.				10
51.8	Head/Neck coil must have variable tilt facility with different positions and a look-out mirror for maximum patient comfort.				10
51.9	Head/Neck Coil shall have built in shimming facility to reduce patient-induced Bo inhomogeneities				10
51.10	Spine coil: System must include Spine coil with minimum 32 channels. Coil shall be cable less direct plugged in coil, with open patient friendly design.				10
51.11	Spine coil must have integrated Respiratory Sensors measure the patient's respiratory signal				10
51.12	Body coil: System shall include light weight Body coil with minimum 18 channels. Coil shall be light weight, less than 1.5 Kg.				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
51.13	Neurovascular Coil: System must include dedicated or in combination coil for high density Neurovascular examinations of more than 70 elements.				10
51.14	Flexible coil large: System must include light weight flexible coil large with minimum 4 channels				10
51.15	Flexible coil small: System must include light weight flexible coil small with minimum 4 channels				10
51.16	High density flexible large and small coils with minimum 18 channels each.				10
51.17	Knee Tx/Rx Coil: high-density dedicated rigid transmit / receive knee coil with minimum 18 elements.				10
51.18	Shoulder Coil: high density dedicated rigid shoulder coil with minimum 16 elements.				10
51.19	Hand Wrist Coil: high density dedicated rigid Hand/Wrist coil with minimum 16 elements.				10
51.20	Foot/Ankle Coil: high density dedicated rigid Foot/Ankle coil with minimum 16 elements.				10
51.21	Breast Coil: high density Breast coil with minimum 18 elements, shall be capable of simultaneous imaging of both breasts in all directions.				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
	Dedicated Rigid Paediatric Coil: High density minimum 16 elements, dedicated paediatric coil for head and neck imaging of new-borns and children up to 18 months of age.				
52	Accessories:				
52.1	RF cage including viewing window and a door				10
52.2	Air / Water cooled Fan unit/chiller				10
52.3	Intercom system between console and MR room				10
52.4	A CCTV system with LCD display to observe the patient shall be provided.				10
52.5	Physiological Monitoring Unit for wireless VCG, respiration and pulse sensors				10
52.6	Fixed height Patient stretcher				10
52.7	MR compatible wheelchair				10
52.8	Handheld ferromagnetic detector				10
52.9	Coil rack				10
52.10	The bidder must supply American College of Radiology (ACR) MRI to access the geometric accuracy, high and low contrast resolution, slice selection, position, accuracy or noise				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
52.11	Phantoms for head protocols				10
52.12	Phantoms for general daily and for weekly quality assurance				10
52.13	Phantom Trolley				10
52.14	MRI fire extinguisher				10
52.15	Ear plugs				10
53	UPS				
53.1	A capable, adequate and suitable inline UPS must be supplied and installed by the successful bidder. The UPS must be able to run for a minimum period of 30 minutes fully functional. Thereafter it must run the MRI machine in standby mode (The MRI machine and the chiller), for an indefinite amount of time while the generator charges the UPS automatically when and how needed. (As per request in this section, a UPS with a two year warranty and additional five years fully inclusive maintenance, callout and repair contract must be priced)				10
53.2	MRI compatible Anaesthetic unit should be connected to the UPS				10
53.3	UPS to also cover the Chiller				10

	General Specification description	Compliance Yes / No	Response (Bidders to state their offers in line with specifications)	Reference in manufacturer documentation/ brochures. Brochure No. & Page No	Weights: High Priority Items-10; Medium Priority- 4; Normal Priority-2
53.4	UPS for the console computer				10
53.5	Remote Diagnostics: Remote on-line support functions for service and also applications shall be provided.				10
54	GENERATOR				
54.1	In case of a municipality electricity outage, there must be an adequately capable and suitable generator that automatically runs the chiller and the 3T machine (while the MRI machine is on standby) for an indefinite amount of time until the municipality electricity is restored. This must be separately priced in the pricing schedule as an option. (As per request in this section, a generator with a two year warranty and additional five years fully inclusive maintenance, callout and repair contract must be priced)				10
54.2	This MRI generator must be connected to capable UPS. This UPS must be connected to the chiller and the MRI machine				10

E. PRICING SCHEDULES

1. Bidders must complete in full the pricing schedules (Annexure 1, 2& 3). The bidder must complete the pricing schedule for each and every equipment item offered in this bid.
2. Bidders must indicate by selecting the items being offered from the list below.
3. During any stage of procurement and execution of the contract, the Purchaser reserves the right to select priority items from the priced list excluding unwanted items, as in when required by the health service.
4. The Purchaser reserves the right to participate in National Treasury Contracts and procure similar equipment and products from such contracts as in when required by the health service.

MRI

ANNEXURE 1: PRICING SCHEDULE

Spec Ref No	Component	Qty.	Year 1 Price Including VAT	Year 2 Price Including VAT	Year 3 Price Including VAT
	MRI				
1	MRI complete with all standard accessories	1			
	De-installation of existing MRI	1			
	Installation Cost of the new MRI in Livingstone Hospital (All electrical, Plumbing, medical gas and carpentry etc) must be including.	1			
	Installation Cost of the new MRI in Frere Hospital (All electrical, Plumbing, medical gas and carpentry etc) must be including.	1			
	Installation Cost of the new MRI in Nelson Mandela Hospital (All electrical, Plumbing, medical gas and carpentry etc) must be including.	1			
3	UPS (as stipulated in section 55) with a 2-year warrantee	1			
	UPS 5 year (Year 3 to 7) fully inclusive maintenance contract	1			
	UPS extended 5-year maintenance contract (year 8 to 12)				
3.1	Generator (as stipulated in section 54) with a 2-year warrantee	1			
	Generator 5 year fully inclusive maintenance contract (year 3 to 7)	1			
	Generator extended 5-year maintenance contract (year 8 to 12)	1			

Spec Ref No	Component	Qty.	Year 1 Price Including VAT	Year 2 Price Including VAT	Year 3 Price Including VAT
	Allocated Provisional sum for building alterations (The successful bidder will have no claim to this sum for any fees or handling charges)	1	R1,500,000	R1,500,000	R1,500,000
3.2	Head Coil	1			
3.3	Body Coil	1			
3.4	Spine Coil	1			
	Breast Coil	1			
	Neck coil	1			
	Paediatric coil	1			
	Double head injector	1			
	MRI Stretcher	1			
4	Options				
	Neurovascular coil	1			
	Cardiac coil	1			
	Prostate coil	1			
	Hand and Wrist coil	1			
	Non-magnetic MRI Wheelchair	1			
4.1	A 5-year preventative maintenance and service (Year 3 to Year 7) should be quoted for, as per the SCC document	1			
4.2	A 5-year comprehensive extended warranty (Year 3 to Year 7) shall be quoted for, as per the SCC document	1			
	SUB TOTAL				
	Add 15% VAT				

Spec Ref No	Component	Qty.	Year 1 Price Including VAT	Year 2 Price Including VAT	Year 3 Price Including VAT
	TOTAL				

Bidders must complete in full the pricing schedule. The bidder must complete the pricing schedule for each and every equipment item offered in this bid

TOTAL PRICE OFFERED (year1, year2 and year 3), INCLUSIVE OF VALUE ADDED TAX, FOR TENDER NO. SCMU3-25/26-0069-HO

R _____

AMOUNT IN WORDS: _____

Signed by authorised representative of the Tenderer: _____

*Should any discrepancy occur between this figure and that stated in the Form of Offer and Acceptance, the latter shall take precedence and apply.

MRI

ANNEXURE 2- ADDITIONAL OPTIONS

No	Component	Qty.	Part No.	Year 1 Price Excluding VAT	Year 2 Price Excluding VAT	Year 3 Price Excluding VAT
	MRI					
	SUB TOTAL					
	ADD 15% VAT					
	TOTAL					

NOTE: This should not form part of the final offer. The purchaser reserves the right to select the required items.

MRI

ANNEXURE 3: MAINTENANCE BREAKDOWN

Contract Year	Description	Qty	Year 3 Price Including VAT	Year 4 Price Including VAT	Year 5 Price Including VAT	Year 6 Price Including VAT	Year 7 Price Including VAT	Year 8 Price Including VAT	Year 9 Price Including VAT
	MRI, Patient, Trauma								
1		1							
1		1							
2		1							
2		1							
3		1							
3		1							

Note: The sum of the annual cost breakdown should be equal to the amount in the pricing schedule, excluding VAT