OFFICIAL HSRC – SCM REQUEST FOR QUOTATION (RFQ) FORM

RFQ NUMBER	29194

Buyer Name	Phumlani Ndlovu	Contact details	(012) 302 2160
RFQ Issue date	17/05/2024	Closing date	27/05/2024

REQUIRED SERVICE DESRCIPTION

NO	SERVICE OR ITEMS REQUIRED	QUANTITIES
1	Cleaning of Mobile clinic toilets and caravans	24 months
2		
3		
4		
5		
6		
7		
8		
9		
10		

SHOULD YOUR QUOTATION EXCEED THE THRESHOLD VALUE ABOVE R30 000.00, PLEASE COMPLETE THE FOLLOWING FORMS FOR SUBMISSION WITH YOUR QUOTATION:

SBD 4		✓
Preference Points for Specific Goals (Supplier to claim points & provide proof)		**20**
SMME (EME &QSE)	4	
Owned by black people (50% or more)	4	
Owned by black people who are youth (30% or more)	4	
Owned by black people who are women (30% or more)	4	
Owned by black people with disabilities (30% or more)	4	
SBD 6.1		✓

SPECIAL CONDITIONS:

- **UNDER NO CIRCUMSTANCES, WILL TIPPEXED INFORMATION ON THE ABOVE OFFICIAL FORMS BE ACCEPTED. YOUR PROFESSIONALISM IS THEREFORE REQUIRED IN COMPLETING THE ABOVE LEGAL DOCUMENTATIONS.**
- **KINDLY ENSURE THAT THE DATE OF YOUR QUOTATION CORRESPOND TO COMPLETION DATE ON THE ABOVE STANDARD BIDDING DOCUMENTS FORMS (SBD FORMS).**
- **FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL RESULT IN DISQUALIFICATIO OF YOUR QUOTATION.**
- ***KINDLY SUBMIT EVIDENCE FOR YOUR CLAIMED SPECIFIC GOALS TO ASSIST US IN FAIRLY EVALUATING YOUR SUBMITTED QUOTATION (Example: Copy of your Detailed BEE SCORE - CARD AND MEDICAL REPORT IN CASE OF POINTS CLAIMED FOR DISABILITY PREFERENCE POINTS).***


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