



Province of the  
**EASTERN CAPE**  
HEALTH

| YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE EC DEPARTMENT OF HEALTH              |                                                                                                                                        |               |                   |               |       |
|--------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|---------------|-------------------|---------------|-------|
| BID NUMBER:                                                                                | SCMU3-P26/27-0617-EMSCH                                                                                                                | CLOSING DATE: | 03 SEPTEMBER 2026 | CLOSING TIME: | 11H00 |
| DESCRIPTION                                                                                | APPOINTMENT OF SERVICE PROVIDER TO PROVIDE CLEANING SERVICES FOR A PERIOD OF 36 MONTHS AT CRADOCK EMS BASE IN THE EASTERN CAPE         |               |                   |               |       |
| COMPULSORY BRIEFING & SITE INSPECTION                                                      | CRADOCK EMS BASE BOARDROOM ON THE 01 SEPTEMBER 2026 @ 11:00<br>CDK TRUCK & BUS SPARES & REPAIRS<br>1 MIDDLEBURG ROAD<br>OUKOP, CRADOCK |               |                   |               |       |
| THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7). |                                                                                                                                        |               |                   |               |       |

**SUBMISSION OF BIDS SHOULD BE MADE ONLINE AND NO PHYSICAL BID DOCUMENTS WILL BE ACCEPTED ([www.etenders.gov.za](http://www.etenders.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                                                                                                                                   |                                                             |                                                                                    |                                     |                                                             |  |
|                                                                                                                                                           | TCS PIN:                                                    |                                                                                    | OR                                  | CSD No:                                                     |  |
| B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE [TICK APPLICABLE BOX]                                                                                        | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |                                                                                    | B-BBEE STATUS LEVEL SWORN AFFIDAVIT | <input type="checkbox"/> Yes<br><input type="checkbox"/> No |  |
| IF YES, WHO WAS THE CERTIFICATE ISSUED BY?                                                                                                                |                                                             |                                                                                    |                                     |                                                             |  |
| AN ACCOUNTING OFFICER AS CONTEMPLATED IN THE CLOSE CORPORATION ACT (CCA) AND NAME THE APPLICABLE IN THE TICK BOX                                          | <input type="checkbox"/>                                    | AN ACCOUNTING OFFICER AS CONTEMPLATED IN THE CLOSE CORPORATION ACT (CCA)           |                                     |                                                             |  |
|                                                                                                                                                           | <input type="checkbox"/>                                    | A VERIFICATION AGENCY ACCREDITED BY THE SOUTH AFRICAN ACCREDITATION SYSTEM (SANAS) |                                     |                                                             |  |
|                                                                                                                                                           | <input type="checkbox"/>                                    | A REGISTERED AUDITOR                                                               |                                     |                                                             |  |
|                                                                                                                                                           |                                                             | NAME:                                                                              |                                     |                                                             |  |
| [A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/SWORN AFFIDAVIT (FOR EMEs & QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE] |                                                             |                                                                                    |                                     |                                                             |  |

|                                                                                                                          |                                                                                    |                                                                          |                                                                                            |
|--------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED?                            | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF] | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES /WORKS OFFERED? | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ANSWER PART B:3 BELOW] |
| SIGNATURE OF BIDDER                                                                                                      | .....                                                                              | DATE                                                                     |                                                                                            |
| CAPACITY UNDER WHICH THIS BID IS SIGNED (Attach proof of authority to sign this bid; e.g. resolution of directors, etc.) |                                                                                    |                                                                          |                                                                                            |
| TOTAL NUMBER OF ITEMS OFFERED                                                                                            |                                                                                    | TOTAL BID PRICE (ALL INCLUSIVE)                                          |                                                                                            |
| BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO:                                                                          |                                                                                    | TECHNICAL INFORMATION MAY BE DIRECTED TO:                                |                                                                                            |
| DEPARTMENT/ PUBLIC ENTITY                                                                                                | HEALTH                                                                             | CONTACT PERSON                                                           | MRS. S. DYAN                                                                               |
| CONTACT PERSON                                                                                                           | MRS. P WILLIAMS                                                                    | TELEPHONE NUMBER                                                         | 045 838 1356                                                                               |
| TELEPHONE NUMBER                                                                                                         | 045 839 2190                                                                       | FACSIMILE NUMBER                                                         | N/A                                                                                        |
| FACSIMILE NUMBER                                                                                                         | N/A                                                                                | E-MAIL ADDRESS                                                           | Sikelelwa.dyan@echealth.gov.za                                                             |
| E-MAIL ADDRESS                                                                                                           | Pumla.ncedani@echealth.gov.za                                                      |                                                                          |                                                                                            |

**PART B  
TERMS AND CONDITIONS FOR BIDDING**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. BID SUBMISSION:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| <p>1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.</p> <p>1.2. <b>ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED–(NOT TO BE RE-TYPED) OR ONLINE</b></p> <p>1.3. <b>BIDDERS MUST REGISTER ON THE CENTRAL SUPPLIER DATABASE (CSD) TO UPLOAD MANDATORY INFORMATION NAMELY: (BUSINESS REGISTRATION/ DIRECTORSHIP/ MEMBERSHIP/IDENTITY NUMBERS; TAX COMPLIANCE STATUS; AND BANKING INFORMATION FOR VERIFICATION PURPOSES).</b></p> <p>1.4. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER LEGISLATION OR SPECIAL CONDITIONS OF CONTRACT.</p>                                                                    |
| <b>2. TAX COMPLIANCE REQUIREMENTS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <p>2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.</p> <p>2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VIEW THE TAXPAYER'S PROFILE AND TAX STATUS.</p> <p>2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) OR PIN MAY ALSO BE MADE VIA E-FILING. IN ORDER TO USE THIS PROVISION, TAXPAYERS WILL NEED TO REGISTER WITH SARS AS E-FILERS THROUGH THE WEBSITE WWW.SARS.GOV.ZA.</p> <p>2.4 BIDDERS MAY ALSO SUBMIT A PRINTED TCS TOGETHER WITH THE BID.</p> <p>2.5 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE PROOF OF TCS / PIN / CSD NUMBER.</p> <p>2.6 WHERE NO TCS IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.</p> |
| <b>3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <p>3.1. IS THE BIDDER A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?<br/> <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>3.2. DOES THE BIDDER HAVE A BRANCH IN THE RSA? <span style="float: right;"><input type="checkbox"/> YES</span><br/> <input type="checkbox"/> NO</p> <p>3.3. DOES THE BIDDER HAVE A PERMANENT ESTABLISHMENT IN THE RSA?<br/> <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p>3.4. DOES THE BIDDER HAVE ANY SOURCE OF INCOME IN THE RSA?<br/> <input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><b>IF THE ANSWER IS "NO" TO ALL OF THE ABOVE, THEN, IT IS NOT A REQUIREMENT TO OBTAIN A TAX COMPLIANCE STATUS / TAX COMPLIANCE SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 ABOVE.</b></p>                                          |

**NB: FAILURE TO PROVIDE ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**  
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|                          |   |                                                        |
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| <b><u>Schedule A</u></b> | – | Government Procurement: General Conditions of Contract |
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## DEFINITIONS

The rules of interpretation and defined terms contained in the General Conditions of Contract (GCC) shall apply to this invitation to bid unless the context requires otherwise. In addition the following terms used in this invitation to bid shall, unless indicated otherwise, have the meanings assigned to such terms in the table below.

|                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|--------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DoH</b>               | means the Eastern Cape Department of Health acting for and on behalf of the Eastern Cape Provincial Government;                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| <b>Invitation to bid</b> | means this invitation to bid comprising <ul style="list-style-type: none"> <li>○ The cover page and the table of content and definitions</li> <li>○ Part 1 which details the Conditions of Bid;</li> <li>○ Part 2 which details the Conditions of Contract and Operational Requirements;</li> <li>○ Part 3 which details the bid strategy</li> <li>○ Part 4 which details the Specifications relating to the Technology / Services</li> <li>○ Part 5 which contains all the requisite bid forms and certificates;</li> </ul> <p>As read with GCC – <i>General Conditions of Contract</i></p> |
| <b>Services</b>          | means the services defined on the cover page of this invitation to bid and described in detail in the Specifications;                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>Specifications</b>    | means the specifications contained in Part 4 of this invitation to bid;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

## **PART 1**

### **Special Conditions of Bid**

#### **1. BACKGROUND AND INTRODUCTORY PROVISIONS**

Refer to Part 3 of this invitation to bid for background and introductory information relating to the Services and this invitation to bid.

#### **2. OFFER AND SPECIAL CONDITIONS**

2.1 Without detracting from the generality of clause below, bidders must submit a completed and signed Invitation to Bid form (SBD 1) and requisite bid forms attached as Part 5 with its bid. Bidders must take careful note of the special conditions.

2.2 **All bids submitted in reply to this invitation to bid should incorporate all the forms, parts, certificates and other documentation forming part of this invitation to bid, duly completed where required.**

2.3 **It is a requirement that bidders register Central Supplier Database before submitting the bid. Failure to register may invalidate your bid.**

2.4 In the event that any form or certificate provided in Part 5 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.

#### **3. CLOSING TIME OF BIDS AND PROVISIONS RELATING TO SUBMISSION OF BIDS**

3.1 The closing time for the receipt of bids in response to this invitation to bid is detailed on the cover page of this invitation to bid.

3.2 All bids must be submitted in a sealed envelope bearing the bid number, bid description and closing date.

3.4 All bids must be received before the closing time and date stipulated above and must be posted to or deposited in the bid box at the address detailed on the cover page of this invitation to bid.

#### **4. ENQUIRIES**

Should any bidder have any enquiries relating to this invitation to bid, such inquiries may only be addressed to the person/s detailed on the cover page to this invitation to bid at the number/s stipulated.

#### **5. COMPULSORY BID BRIEFING**

The details of the compulsory briefing session are indicated on the cover page of the bid. Bidders will be required to sign the attendance register at the briefing session. Signature of the attendance register will constitute proof of compliance with this condition. **Bidders who do not attend or do not sign the attendance register, will not be considered**

**6. TAX CLEARANCE**

Tax Clearance Compliance Verification will be done with the CSD and SARS.

**7. PRICING**

- 7.1 The bidder must submit details regarding the bid price for the Services on the Pricing Schedule form/s attached as Part 5 – Schedule C which completed form/s must be submitted together with the bid documents.
- 7.2 Pricing must be stipulated INCLUSIVE OF VALUE ADDED TAX.
- 7.3 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 5 – Schedule C

**8. DECLARATION OF INTEREST**

The bidder should submit a duly signed declaration of interest (SBD 4) together with the bid. The declaration of interest is attached as Part 5 – Schedule E (ii).

**9. DECLARATION OF BIDDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES**

The bidder must complete the declaration and sign accordingly to submit with the bid. The declaration of bidder's past supply chain management practices is attached as Part 5 – Schedule E

**10. QUALIFICATIONS OF BIDDERS**

Bidders must submit detailed information together with their bid of their experience in the relevant trade together with present contracts. These details should be submitted together with the bid on the form attached as Part 5 – Schedule F.

**11. PARTNERSHIPS AND LEGAL ENTITIES**

In the case of the bidder being a partnership, close corporation or a company all certificates reflecting the names, identity numbers and address of the partners, members or directors (as the case may be) must be submitted with the bid. These details should be submitted on the form attached as Part 5 – Schedule G

**12. CONSORTIUM / JOINT VENTURE**

- 12.1 It is recognized that bidders may wish to form consortia to provide the Services.
- 12.2 A bid in response to this invitation to bid by a consortium shall comply with the following requirements: -
- 12.2.1 It shall be signed so as to be legally binding on all consortium members;

- 12.2.2 One of the members shall be nominated by the others as authorized to be the lead member and this authorization shall be included in the agreement entered into between the consortium members;
- 12.2.3 The lead member shall be the only authorized party to make legal statements, communicate with the DOH and receive instructions for and on behalf of any and all the members of the consortium;
- 12.2.4 A copy of the agreement entered into by the consortium members shall be submitted with the bid.

**13. ORGANISATIONAL PRINCIPLES**

The bidder should submit a clear indication of the envisaged authorized organizational principles, procedures and functions for an effective delivery of the required Service at the relevant Institutions with the bid. These details should be submitted on the form attached as Part 5 – Schedule H

**14. DETAILS OF THE PROSPECTIVE BIDDERS NEAREST OFFICE TO THE LOCATION OF THE CONTRACT**

The bidder should provide full details regarding the bidders nearest office to the Institutions at which the Services are to be provided (see Part 4 of this invitation to bid). These details should be provided on the form attached as Part 5 – Schedule I which completed form, must be submitted together with the bid.

**15. FINANCIAL PARTICULARS**

Bidder must provide full details regarding its financial particulars and standing, which particulars should be submitted together with the bid on the form attached as Part 5- Schedule J.

**16. PREFERENCE POINTS CLAIM FORMS**

Part 5 – Schedule K contains the Preference Points Claim Forms in terms of Preferential Procurement Regulations to be completed and signed by the bidder to the extent applicable and returned with this bid.

**17. VALIDITY**

Bid documentation submitted by the bidder will be valid and open for acceptance for a period of **120 (One hundred and twenty)** calendar days from the closing date and time stipulated on the front cover of this invitation to bid.

**18. ACCEPTANCE OF BIDS**

The State, the DoH does not bind itself to accept either the lowest or any other bid and reserves the right to accept the bid which it deems to be in the best interest of the State



even if it implies a waiver by the State, the DoH, of certain requirements which the State, the DoH, considers to be of minor importance and not complied with by the bidder.

## **19. NO RIGHTS OR CLAIMS**

- 19.1 Receipt of the invitation to bid does not confer any right on any party in respect of the Services or in respect of or against the DoH. The DoH reserves the right, in its sole discretion, to withdraw by notice to bidders any Services or combination of Services from the bid process, to terminate any party's participation in the bid process or to accept or reject any response to this invitation to bid on notice to the bidders without liability to any party. Accordingly, parties have no rights, expressed or implied, with respect to any of the Services as a result of their participation in the bid process.
- 19.2 Neither the DoH, nor any of their respective directors, officers, employees, agents, representatives or advisors will assume any obligations for any costs or expenses incurred by any party in or associated with any appraisal and/or investigation relating to this invitation to bid or the subsequent submission of a bid in response to this invitation to bid in respect of the Services or any other costs, expenses or liabilities of whatsoever nature and howsoever incurred by bidders in connection with or arising out of the bid process.

## **20. NON DISCLOSURE, CONFIDENTIALITY AND SECURITY**

- 20.1 The invitation to bid and its contents are made available on condition that they are used in connection with the bid process set out in the invitation to bid and for no other purpose. All information pertaining to this invitation to bid and its contents shall be regarded as restricted and divulged on a "need to know" basis with the approval of the DoH.
- 20.2 In the event that the bidder is appointed pursuant to this invitation to bid such bidder may be subject to security clearance prior to commencement of the Services.

## **21. ACCURACY OF INFORMATION**

- 21.1 The information contained in the invitation to bid has been prepared in good faith. Neither the DoH nor any of their respective directors, advisors, officers, employees, agents, representatives make any representation or warranty or give any undertaking express or implied, or accept any responsibility or liability whatsoever, as to the contents, accuracy or completeness of the information contained in the invitation to bid, or any other written or oral information made available in connection with the bid and nothing contained herein is, or shall be relied upon as a promise or representation, whether as to the past or the future.
- 21.2 This invitation to bid may not contain all the information that may be required to evaluate a possible submission of a response to this invitation to bid. The bidder should conduct its own independent analysis of the operations to the extent required to enable it to respond to this bid.

## **22. COMPETITION**

- 22.1 Bidders and their respective officers, employees and agents are prohibited from engaging in any collusive action with respect to the bidding process which serves to limit competition amongst bidders.
- 22.2 In general, the attention of bidders is drawn to Section 4(1) (iii) of the Competition Act 1998 (Act No. 89 of 1998) (the Competition Act) that prohibits collusive bidding.

- 22.3 If bidders have reason to believe that competition issues may arise from any submission of a response to this bid invitation they may make, they are encouraged to discuss their position with the competition authorities before submitting response.
- 22.4 Any correspondence or process of any kind between bidders and the competition authorities must be documented in the responses to this invitation to bid.

### **23. RESERVATION OF RIGHTS**

- 23.1 Without limitation to any other rights of the DOH (whether otherwise reserved in this invitation to bid or under law), the DOH expressly reserves the right to:-
  - 23.1.1 Request clarification on any aspect of a response to this invitation to bid received from the bidder, such requests and the responses to be in writing;
  - 23.1.2 Amend the bidding process, including the timetables, closing date and any other date at its sole discretion;
  - 23.1.3 Reject all responses submitted by bidders and to embark on a new bid process.
  - 23.1.4 Cancel the bid if all bids received are below or equal to R1 000 000.
  - 23.1.5 Award the bid to one or more than one service provider.
- 23.2 All shortlisted bidders will be subjected to screening by National Intelligent Agency (NIA)
- 23.3 It is recommended that the successful bidder employ the labourers (semi-skilled) that are within the sub-district

### **24. SPECIAL CONDITIONS**

- 24.1 **Bidders must complete, sign all the prescribed bid forms and all pages must be initialed.**
- 24.2 Bidders must submit a confirmation letter from an accredited financial institution that the bidder will be assisted financially once the bid is awarded.
- 24.3. Bidders must attach a proof of a valid CSD Registration (Central Supplier Database) and Ensure that bided commodity appear on CSD.
- 24.4 Bidders must be registered on LOGIS with active banking details
- 24.5 Bidders must submit / attach written quotation on a letterhead or quotation book, even if the pricing schedule has been filled.
- 24.6 Quotations must have a company stamp, clear unit price and total price of all goods/service required and signed.
- 24.7 Bidders must ensure that they quoted according to our specification.
- 24.7.3 Form Part 5 schedule J must be completed accordingly

## 25. EVALUATION CRITERIA

### 25.1 Stage 1 Administrative Compliance/ Pre-Qualification

#### STAGE 1: ADMINISTRATIVE COMPLIANCE

| # | <i>Requirement</i>                                                                                                                    | Please Tick <input type="checkbox"/> |            |
|---|---------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|------------|
|   |                                                                                                                                       | Comply                               | Not Comply |
| A | Invitation to Quote (SBD1) completed and signed                                                                                       |                                      |            |
| B | Pricing Schedule (SBD 3.1) completed and signed                                                                                       |                                      |            |
| C | Declaration of Interest (SBD 4) completed and signed                                                                                  |                                      |            |
| D | Preferential Points Claim (SBD 6.1)                                                                                                   |                                      |            |
| E | Latest CSD report attached                                                                                                            |                                      |            |
| F | Letter from the Bank / financial institution confirming financial stability or audited financial statement ( not older than 3 months) |                                      |            |
| G | JV or Consortium Agreement (if applicable) All service providers to attach CSD reports                                                |                                      |            |

**NB: Failure to comply with the above pre-qualification will be invalidated the bid and the bid will not be evaluated.**

## 25.2 Stage 2: Price and Preference Points Evaluation

The bid will be evaluated in terms of the 80/20-point system as stipulated in the Preferential Procurement Regulations 2017. The 80 points will be allocated for price and 20 points for attaining Specific goals of contributor

- Preference points for this bid shall be awarded for:
  - (a) Price; and
  - (b) Specific goals.

### 25.2.1 THE 80/20 PREFERENCE POINT SYSTEMS

A maximum of 80 or 90 points is allocated for price on the following basis:

#### 80/20

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

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

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

#### 3.2.1. POINTS AWARDED FOR PRICE

A maximum of 80 or 90 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

## **PART 2**

### **Conditions of Contract and Operational Requirements**

#### **1. CONTRACT**

The contract for the supply of the required Service in terms of this invitation to bid shall come into being on the date of issue of the letter of acceptance of the bidders bid by the DoH or any other authorized authority or person (as the case may be). The bidder is further obliged for the future support while the contract is in force.

#### **2. FEES AND CHARGES**

- 2.1 Payment of any consideration in terms of the contract shall not constitute acceptance of any defective or non-conforming Services or otherwise relieve Service Provider of any of its obligations under the contract.
- 2.2 To the extent that the DoH disputes the correctness, nature, extent or calculation of any fees or expenses payable to Service Provider in terms of the contract, DoH shall be entitled to withhold payment of such disputed amounts until such time as such dispute is resolved.

#### **3. GENERAL RESPONSIBILITIES OF THE SERVICE PROVIDER**

- 3.1 ***The DoH's operational requirements.*** The Service Provider shall, in the provision of the required service, have due regard to the operational requirements of the DoH and other parties occupying or operating from the relevant institution, clinic and Office and shall not do, or permit to be done, anything which may negatively impact on such parties' operational requirements.
- 3.2 ***Problem identification and reporting.*** The Service Provider shall be proactive in reporting any matters which it may become aware of which may impact on the business continuity or operations of the DoH at the relevant institution, clinic and office. Without detracting from the generality of this statement, Service Provider shall:-
  - Without delay inform the DoH of all incidents or accidents which may occur at the relevant Complex which involve Service Provider's personnel;
  - Co-operate fully with the DoH in analyzing and investigating such incidents or accidents.

**3.3 Other Service Providers** The Service Provider acknowledges that it may be required to provide the Services in conjunction with third party service providers and shall, where requested by the DoH, co-operate fully with such persons.

**3.4 Regulations and statutes** The Service Provider shall, in the provision of the Services observe and comply with all relevant provisions of all applicable legislation and regulation

**3.5 Compliance with procedures.**

It is recorded that during the currency of the contract the DoH may implement procedures and policies at the relevant Institution. The Service Provider shall comply fully with any such reasonable procedures and policies, including the permit to work procedures and health and safety procedures.

3.6 The Service Provider shall ensure that it and its personnel shall at all times comply fully with any safety, fire, emergency and security procedures and policies applicable at the relevant Institution.

3.7 Should the DoH at any time believe that any member of Service Provider's personnel is failing to comply with any such procedures or policies, the DoH shall be entitled to deny such personnel member access to the relevant premises and require Service Provider to replace such person without delay?

**3.8 Service Provider's procedures** The Service Provider shall, upon receipt of written request from the DoH or its appointed Manager:-

**4.**

The Service Provider:-

- ❖ acknowledges that he is fully aware of the terms and conditions of the Act;
- ❖ acknowledges that he is an employer in its own right with duties and responsibilities as prescribed in the Act;
- ❖ agrees to comply with all rules and regulations implemented by or on behalf of the DoH at the relevant Institution in covering letter relating to health and safety and will inform the DoH immediately should Service Provider for any reason be unable to comply with the provisions of the Act and such rules and regulations.

## **8. SERVICE LEVEL AGREEMENT**

It is recorded that the DoH and the service provider will enter into a Service Level Agreement stipulating exact deliverables and terms of payment. Performance measurement provisions shall be reduced to writing in a service level agreement if required and signed by both parties.

## **9. PERFORMANCE MEASUREMENT PROVISIONS**

### **9.1 *Introduction.***

Service Provider shall provide the Services during the term of the contract in compliance with the quality and related standards stipulated in the Specifications and the service level agreement (if any) contemplated in clause 11 above.

The provisions of Clause 10 document contains the manner in which Service Provider's performance will be measured throughout the term of the contract.

**9.2 *Compliance.*** For purposes of the contract the compliance by Service Provider with the stipulated responsibilities and service standards will be determined:-

- with reference to reports provided by Service Provider;
- with reference to reports or complaints received from third parties;
- by means of user satisfaction surveys conducted by DoH
- by means of service reviews, inspections or any audit carried out by or on behalf of the DoH.

**9.3 *Records.*** Service Provider shall at all times keep full and accurate records of all Services provided in terms of the contract and shall retain such records for the currency of the contract. Upon termination of the contract such records must be provided to the DoH upon request.

### **9.4 *Measurement of performance***

- Periodic checks: DoH and/or its appointed Technical Support Manager shall carry out periodic checks (the intervals to be determined by DoH) the purpose of which shall be to determine whether Service Provider is providing the Services in accordance with the terms and conditions of the contract if accepted by DoH.

- Service complaints: All service complaints, deviations, non-conforming services and suggestions that are reported to Service Provider by DoH, its appointed facilities manager, or any other party shall be given proper and speedy consideration by Service Provider. The Service Provider shall investigate complaints, deviations and non-conforming services in accordance with procedures approved by the DoH.
- User satisfaction survey: A user satisfaction survey shall be conducted by DoH at such intervals as DoH may determine to assess service user satisfaction. The user satisfaction survey shall be conducted in such form and in accordance with such procedures as the parties may agree to in writing from time to time.

**9.5 Results of checks, audits and surveys** DoH shall be entitled to utilize the findings of the surveys, checks, audits and reports contemplated above to determine compliance by Service Provider with the service standards and responsibilities stipulated in the contract. It is recorded that the results of the above checks shall, save to the extent that Service Provider can prove otherwise be binding on Service Provider and DoH shall be entitled to exercise its remedies stipulated in the contract based on such findings.

## **10. BREACH AND TERMINATION**

Bidders are referred to Paragraph 23 of General Conditions of Contract (GCC) relating to failure to comply with conditions of this contract.



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**Part 4 – Schedule B**  
**Tax Clearance Certificate**

---

**TAX CLEARANCE REQUIREMENTS**

**IT IS A CONDITION OF BIDDING: -**

1. The Department of Health will verify the tax compliance status of bidders on the central Supplier Database (CSD) for all price quotations and competitive bids prior to award as per National Treasury Instruction no 4A of 2016/17 Central Supplier Database.

**Part 5 - Schedule C**

**SPECIFICATION**

NAME OF BIDDER: .....BID NO.: .....

**CLOSING TIME 11:00 ON THE .....**

| GOODS              | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | UNIT OF ISSUE        | PRICE PER UNIT |
|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------|
| Cleaning Services. | <ul style="list-style-type: none"> <li>- <b>Need one (1) cleaner</b> to clean the inside of the building offices.</li> <li>- 5 offices which needs to be cleaned with a tile cleaner.</li> <li>- 2 Toilets which needs to be cleaned with a tile cleaner.</li> <li>- 1 Kitchen which needs to be cleaned with a tile cleaner.</li> </ul> <p>The department expects that the cleaner provided by the company to have a good personality, honest, reliable, and healthy. To have a good work record. If the department is not happy with the cleaner, then it is expected from the service provider to replace that cleaner with another. The cleaner must be always neat and tidy. The uniform must be clearly marked with the company name, and they must wear comfortable shoes. The service provider must do a weekly check with the worker and the supervisor at EMS. The contract can be terminated at any time if prescript have not been adhered to.</p> <p><u>CLEANING MATERIAL AND EQUIPMENT</u></p> <p>CLEANING MATERIAL &amp; EQUIPMENT</p> <p>All cleaning material and equipment, as well as well as clear refuse bags and clear plastic bags must be provided by the company.</p> <ol style="list-style-type: none"> <li>1. I X Mop</li> <li>2. I X Broom</li> <li>3. I X Mop buckets</li> </ol> | 250,55 square meters |                |

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |  |
|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
|  | <ol style="list-style-type: none"> <li>4. 1 X sweeper Mops</li> <li>5. Mr Min furniture polish</li> <li>6. Dust cloths and feather duster</li> <li>7. Window Leen to clean windows</li> <li>8. Gloves for the staff</li> <li>9. Dish cloths</li> <li>10. Tile cleaner for floors</li> </ol> <p><u>WORKING HOURS</u></p> <p>Monday to Friday from 07H30 to 16H00<br/> Saturday from 08H00 to 12H00<br/> Tea Breaks from 10H00 to 10H15<br/> Lunch Break from 13H00 to 14H00<br/> Off on Sunday and Public Holidays<br/> The company must provide a cleaner if the current cleaner is off sick or did not report for duty.</p> <p><u>DUTIES OF THE CLEANER</u></p> <p>All admin offices to be dusted and vacuumed every day, including the window sills.<br/> All tiles to be swept and mopped daily. (Tiles have been sealed and therefore it must be cleaned only with light soapy water.) (<u>Tiles must be stripped and sealed every 6 months.</u>)<br/> Report broken items and toilets that are leaking immediately to the person in charge.<br/> The cleaner to make sure that all dirty cups and plates are washed after teas and lunch times before they go off duty.<br/> All the bathroom floors must be mopped every day, hand basins and toilets must be cleaned and disinfected every day.</p> |  |  |
|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |  |  |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
|  | <p>Toilets must be checked before going off duty and to see that there is enough toilet paper and hand soap in the holders.</p> <p>The kitchen to be left neat and tidy at all times and all cutlery, glasses and water bottles locked up before going off duty.</p> <p>Dirt bins to be cleaned in the morning and afternoon and replace the plastic bag if soiled before going off duty.</p> <p>Office equipment (photocopier machines, faxes, desks and chairs) to be dusted daily.</p> <p>Offices with carpets to be vacuumed daily and dirty marks on carpets to be cleaned.</p> <p>Walls and doors to be washed off, where dirty marks are on carpets to be cleaned.</p> <p>Walls and doors to be washed off, where dirty marks are visible.</p> <p>All windows of the building to be washed at least twice a month.</p> <p><u>ANNEXTURE A</u></p> <p>An attendance register will be provided to be completed daily by the cleaners. The attendance register will be attached to the invoice as proof that the cleaners did work for the whole month as stipulated. If found that the cleaner did not work, then the payment will be deducted from the invoice for those days they were absent.</p> <p><u>ANNEXTURE B</u></p> <p>If any toilets, basins or drains are blocked and not reported as soon as the problem is discovered, the supplier will be held responsible for the call out of the</p> |  |  |
|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|

|  |                                                                                                                                                                                                                                                                                                                                                                                                                                                           |  |  |
|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|
|  | <p>plumbers. Any leakages of breakage of toilet, taps and drains must be reported to stores.</p> <p><u>ANNEXTURE C</u></p> <p>NO OTHER SPRAY WILL BE USED TO POLISH THE FURNITURE, COMPUTERS OR TV.</p> <ol style="list-style-type: none"><li>1. MR MIN for the furniture</li><li>2. Computers will not be cleaned</li><li>3. Only a dry cloth to be used on the TV's</li></ol> <p>NO CLEANER WILL BE FETCHED OR TAKEN HOME WITH A GOVERNMENT VEHICLE</p> |  |  |
|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|

Part 5 – Schedule

SBD 3.1

**PRICING SCHEDULE**  
(Professional Services)

NAME OF BIDDER: .....BID NO.: .....

**CLOSING TIME 11:00 ON THE .....**

OFFER TO BE VALID FOR 120 DAYS FROM THE CLOSING DATE OF BID.

**NB:** USE INK, PREFERABLY BLACK, TO FILL IN THIS FORM

**PLEASE USE ATTACHED SPREAD SHEET FOR FULL PRICING**

| DESCRIPTION                                                                      | QUANTITY | UNIT PRICE | TOTAL PRICE |
|----------------------------------------------------------------------------------|----------|------------|-------------|
| Offices                                                                          | 5        |            |             |
| Toilets                                                                          | 2        |            |             |
| Kitchen                                                                          | 1        |            |             |
| Cleaning material (Price must include all the items listed in the specification) |          |            |             |
| VAT                                                                              |          |            |             |
| <b>TOTAL BID PRICE</b>                                                           |          |            |             |

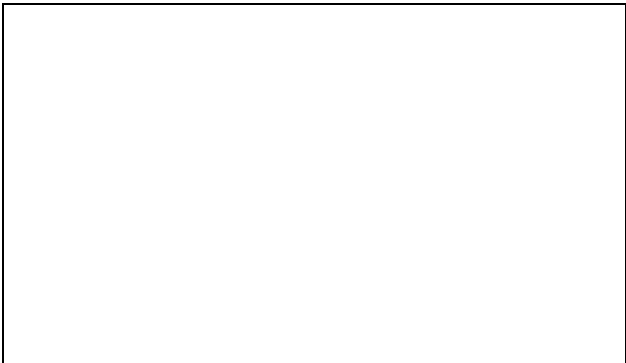
- Required by : Eastern Cape Department of Health
- 
- At : Queenstown

Price must be inclusive of all Taxes

Signature of the Bidder:

.....

Company Stamp



**SBD 4**

**BIDDER'S DISCLOSURE**

**1. PURPOSE OF THE FORM**

- 1.1 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, 1996 (Constitution), and further expressed in the various applicable legislation, it is required for the bidder to make this declaration in respect of the details required hereunder.
- 1.2 If a person is 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. DECLARATION ON EMPLOYMENT BY ORGAN OF STATE**

- 2.1 Is the bidder, or any of the directors / trustees / shareholders / members / partners of the bidder employed by an organ of state, as defined in section 239 of the Constitution? **YES/NO**
- 2.2 If YES, furnish particulars of the names, individual identity numbers, in the table below:

| Full Name | Identity Number | Name of organ of state |
|-----------|-----------------|------------------------|
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |
|           |                 |                        |

- 2.3 Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution? **YES/NO**

- 2.3.1 If so, furnish particulars:

.....

.....

.....



- 2.4 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**

- 2.4.1 If so, indicate all companies registered in the CSD in the table below:

| Supplier registration number (MAAA) | Status (active/inactive/deleted) |
|-------------------------------------|----------------------------------|
|                                     |                                  |
|                                     |                                  |
|                                     |                                  |
|                                     |                                  |
|                                     |                                  |

Failure to disclose all CSD-registered active companies linked to all Directors will lead to disqualification.

### 3 GENERAL DECLARATION

I, ....., the undersigned, 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 to be false.
- 3.3 The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor.
- 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.
- 3.5 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.
- 3.6 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.
- 3.7 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, 1998 (Act No. 89 of 1998) and or may be referred to law enforcement agencies for criminal investigation and or may be restricted from

conducting business with the state for a period not exceeding 10 years in terms of the Prevention and Combating of Corrupt Activities Act, 2004 (Act No. 12 of 2004) or any other applicable legislation.

I CERTIFY THAT THE ABOVE IS CORRECT.

I ACCEPT THAT THE PROCURING INSTITUTION MAY REJECT THE BID OR TAKE APPROPRIATE ACTION AGAINST ME IF THIS DECLARATION IS FALSE.

.....  
Signature

.....  
Date

.....  
Designation

.....  
Name of bidder

---

**Part 5 – Schedule F**  
**Qualifications and Experience**

---

1. Details of the extent of the bidders activities and business, e.g. branches etc:

---

---

---

2. A list of existing /previous contracts relating to services which are similar to the Services:

| Description of Contract | Period | Contact Person & Tel No. |
|-------------------------|--------|--------------------------|
|-------------------------|--------|--------------------------|

|       |       |       |
|-------|-------|-------|
| ..... | ..... | ..... |
| ..... | ..... | ..... |

*(Please provide contactable references)*

3. The number of years that the bidder has been in the business of providing services which are materially the same as the Services:

---

4. The name of the person who shall manage the Services:

---

5. Detail such person's qualifications and experience below :

---

---

---

---

.....  
**SIGNATURE OF (ON BEHALF OF) BIDDER**

.....  
**NAME IN CAPITALS**

In the presence of :

1. ....

2. ....

### **CONSENT FORM BY THE BIDDER**

**The bidder shall be bound by all SCM regulatory provision and amendments thereto whether expressly or impliedly indicated in this document.**

The District Manager  
Department of Health  
Chris Hani District Office  
P.O.BOX 1661  
KOMANI HOSPITAL  
QUEENSTOWN

Sir/Madam

### **Granting of authority to request information from any legal entity relevant to this bid**

1. I/we acknowledge that the information herein contained shall constitute the basis on which my/our bid is to be considered. I/We grant approval that any source regarding this bid may be fully investigated and that all such information shall be of material importance and directly relevant to the consideration of our bid. I/we further grant my/our consent to such source to provide confidential information.
2. I/We warrant that all the information herein contained is to the best of my/our knowledge and belief true and correct in all material respects and I/We am/are not aware of any information which, should it become known to the Eastern Cape Department of Health, would affect the consideration of my/our bid in any way.
3. The Eastern Cape Department of Health wishes to inform you that all information regarding your personal matters is treated as strictly as confidential.

**Please tick the appropriate box.**

|                          |                                                                                                                                                                                                             |
|--------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> | I/We hereby consent to the above                                                                                                                                                                            |
| <input type="checkbox"/> | I/We hereby withhold consent and fully understand the implications and ramifications of my/our decision and will not hold the Eastern Cape Department of Health responsible for not considering my/our bid. |

-----  
**Signature**

-----  
**Date**

-----  
**Witness**

-----  
**Signature**

---

**Part 5 – Schedule G**  
**Organization type**

---

**PARTNERSHIP/CLOSED CORPORATION/COMPANY**  
**(delete which is not applicable)**

The bidder comprises of the following partners/members/directors:

1. NAME

ADDRESS :

ID NUMBER:
2. NAME :

ADDRESS :

ID NUMBER:
3. NAME :

ADDRESS :

ID NUMBER:
4. NAME :

ADDRESS :

ID NUMBER:
5. NAME :

ADDRESS :

ID NUMBER:

.....  
**SIGNATURE OF (ON BEHALF OF) BIDDER**

.....  
**NAME IN CAPITALS**

In the presence of:

1. ....
2. ....

---

**Part 5 – Schedule H**

### Organizational structure

1. Provide full details of the organizational structure which will be utilized in the provision of the Services (including where appropriate an organogram)

[illegible]

.....  
SIGNATURE OF (ON BEHALF OF) BIDDER

NAME IN CAPITALS

In the presence of:

1. ....
2. ....

**Part 5 – Schedule I**  
**Details of Supplier's office**

---

1. Physical address of supplier's office

---

---

---

---

- 1 Telephone No of office: \_\_\_\_\_

- 3 Time period for which such office has been used by supplier: \_\_\_\_\_

.....  
**SIGNATURE OF (ON BEHALF OF) BIDDER**

.....  
**NAME IN CAPITALS**

In the presence of:

1. ....

2. ....

---

**Part 5 – Schedule J**  
**Financial Particulars**

---

This schedule must be completed by the bidder and submitted together with the bid. **Documentary proof confirming availability of financial resources to execute the contract from the bidder's financial institution and /or Audited Financial Statements must be submitted with the bid.** If this requirement is not complied with in full the bid may be considered invalid

Nature of Service: \_\_\_\_\_  
Name of bidder: \_\_\_\_\_  
Bid Number: \_\_\_\_\_

|                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|--------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                      | <p><b><u>FINANCIAL POSITION OF BIDDER</u></b></p> <p>I/we hereby certify that I/we have the necessary financial capacity and resources to execute the above contract successfully for the bid amount. I / we hereby attach letter confirming availability of financial resources from the financial institution. I / we give the DOH permission to contact the financial institution below to confirm the information provided.</p> <p>In the absence of the above, a letter confirming that the bidder has applied for financial assistance from any financial institution and that the institution is willing to favourably consider such application in the event that the bidder is successful, will also satisfy the Department.</p> |
| <b>NAME OF FINANCIAL INSTITUTION</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>ADDRESS</b>                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>TEL.NO</b>                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>FAX NO</b>                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>CONTACT PERSON</b>                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |

.....  
**SIGNATURE OF (ON BEHALF OF) BIDDER**

.....  
**NAME IN CAPITALS**

In the presence of :

1. ....
2. ....



## PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2017

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, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.**

### 1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to all bids:

- 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

- a) The value of this bid is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the R50 000 000 preference point system shall be applicable; or
- b) Either the 80/20 or 90/10 preference point system will be applicable to this tender (*delete whichever is not applicable for this tender*).

1.3 Points for this bid shall be awarded for:

- (c) Price; and
- (d) Specific goals.

1.4 The maximum points for this bid are allocated as follows:

|                                                                  | POINTS     |
|------------------------------------------------------------------|------------|
| <b>PRICE</b>                                                     | 80         |
| <b>SPECIFIC GOALS</b>                                            | 20         |
| <b>Total points for Price and Specific goals must not exceed</b> | <b>100</b> |

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

1.6 The purchaser reserves the right to require of a bidder, either before a bid is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser

### 2. DEFINITIONS

- (a) “**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 or services, through price quotations, advertised competitive bidding processes or proposals;

- (b) **“functionality”** means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- (c) **“prices”** includes all applicable taxes less all unconditional discounts;
- (d) **“rand value”** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

### 3. POINTS AWARDED FOR PRICE

#### 3.1.1 THE 80/20 PREFERENCE POINT SYSTEMS

A maximum of 80 or 90 points is allocated for price on the following basis:

##### 80/20

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

Where

- P<sub>s</sub> = Points scored for price of tender under consideration
- P<sub>t</sub> = Price of tender under consideration
- P<sub>min</sub> = 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 or 90 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<sub>s</sub> = Points scored for price of tender under consideration
- P<sub>t</sub> = Price of tender under consideration
- P<sub>max</sub> = 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 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 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 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 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 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 (80/20 system) (To be completed by the organ of state) | Number of points claimed (80/20 system) (To be completed by the tenderer) |
|-------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| Historically Disadvantaged Individuals Ownership            | 20% (4)                                                                           |                                                                           |
| Women Ownership                                             | 20% (4)                                                                           |                                                                           |
| Youth Ownership                                             | 20% (4)                                                                           |                                                                           |
| Disability                                                  | 20% (4)                                                                           |                                                                           |
| Locality Ownership                                          | 20% (4)                                                                           |                                                                           |
| TOTAL                                                       | 100% (20)                                                                         |                                                                           |

a) Service providers must submit proof of its Specific Goals points claimed / status of contributor.

b) The Specific Goals supporting documents required to verify claimed points may in line with the specified requirements include:

- Historically Disadvantaged Individuals Ownership: Proof of ownership (CIPRO certificate) with id no.
- Women Ownership: Ownership: Proof of ownership (CIPRO certificate) with id no.
- Youth Ownership: Ownership: Proof of ownership (CIPRO certificate) with id no.
- Disability Ownership: Proof of ownership (CIPRO certificate) with valid medical documentary proof.
- Military Veterans Ownership: Proof of ownership (CIPRO certificate) with valid proof of veteran status.
- Locality Ownership: Proof of business address (municipal account or valid lease agreement)
- Updated CSD report

**NB: Bidders who do not claim specific goals will not be legible for preference points claim.**

#### 4. DECLARATION WITH REGARD TO COMPANY/FIRM

- 4.1 Name of company/firm;.....
- 4.2 VAT registration number.....
- 4.3 Company registration number.....

4.4 TYPE OF COMPANY/ FIRM

- ☐ Partnership/Joint Venture / Consortium
- ☐ One person business/sole propriety
- ☐ Close corporation
- ☐ Company
- ☐ (Pty) Limited

[TICK APPLICABLE BOX]

4.5 DESCRIBE PRINCIPAL BUSINESS ACTIVITIES

.....

.....

.....

.....

.....

4.6 COMPANY CLASSIFICATION

- ☐ Manufacturer
- ☐ Supplier
- ☐ Professional service provider
- ☐ Other service providers, e.g. transporter, etc.

[TICK APPLICABLE BOX]

4.7 Total number of years the company/firm has been in business:.....

4.8 I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we 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 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;
- iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have –
  - (a) disqualify the person from the bidding 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 bidder or contractor, its shareholders and

directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted by the National Treasury 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.

WITNESSES

1. ....
2. ....

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SIGNATURE(S) OF BIDDERS(S)

DATE: .....

ADDRESS .....

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