



## KWAZULU-NATAL PROVINCE

ECONOMIC DEVELOPMENT, TOURISM  
AND ENVIRONMENTAL AFFAIRS  
REPUBLIC OF SOUTH AFRICA

Private Bag X9152, PIETERMARITZBURG, 3200

270 Jabu Ndlovu Street, Pietermaritzburg, 3200

Tel: 033 264 2500 Fax: 033 264 2864

F005

# INVITATION TO QUOTE

TECHNICAL ENQUIRIES: Thandazile Ntuli- 033 264 2852

QUOTATION NO: 2021030811

SERVICE/ITEM DESCRIPTION: Photocopying Machine

|                                  |            |
|----------------------------------|------------|
| TO                               |            |
| ATTENTION                        |            |
| TELEPHONE NUMBER                 |            |
| FAX NUMBER                       |            |
| EMAIL ADDRESS                    |            |
| NO OF PAGES (INCLUDING THIS ONE) |            |
| DATE                             | 01/07/2021 |

CLOSING DATE: 05/07/2021

TIME: 11:00

Quotations may be emailed at [scmquotations11@kznedtea.gov.za](mailto:scmquotations11@kznedtea.gov.za) faxed to 086 762 3968 or be deposited into the quotation box situated at main foyer at 270 Jabu Ndlovu Street, Pietermaritzburg on or before closing date and time.

Regards

Thokozani Zondo

033 264 2730



## ANNEXURE F1

### RT3-2018 Rental & Copy Analysis Questionnaire for Categories 1 to 3

(TO BE COMPLETED BY THE END-USER WITHIN A STATE INSTITUTION)

State Institution : Dept of Economic Development Tourism and Env affairs

Division within State Institution : UTHUNGULU DISTRICT OFFICE Env Office

Address : LOT 61137 opposite mhlathuze sports complex  
MAINGATE ,VLEDVLEI  
Richardsbay

Name & Surname of End-User : TP Ntuli refer to attached list  
*(If more than 1 end-user attach a separate list to the Supplier)*

End-User email Address : Thamsanqa.Ntuli@kznedtea.gov.za

End-User telephone

Or cellphone numbers : 033 264 2797

| #                                                      | Element                                                                                                      | Response                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
|--------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|------------------------------------------------------------------------------------------------|-------------------|------------|-------------------------------|-------|--------------------------------|-------------------------|-----------------------------------|--|--------------------------------------------------------|--|-------------------------------|--------------------------------------------------------------------------|
|                                                        |                                                                                                              | Complete or tick v                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| <b>CURRENT EQUIPMENT / PRINTING SOLUTION</b>           |                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| 1                                                      | How many users are utilizing the equipment?                                                                  | 21 users                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| 2                                                      | Is the current equipment leased or owned?                                                                    | Leased <input checked="" type="checkbox"/> Owned <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| 3                                                      | Does your institution want to trade-in the current equipment (if owned)                                      | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| 4                                                      | Do you use user codes/ ID cards on your current equipment?                                                   | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| 5                                                      | Current equipment details<br><i>(if space is not sufficient, please provide a separate list to Supplier)</i> | <table border="1"> <tr> <td>Make, model &amp; serial number</td> <td><i>(if space is not sufficient please attach a separate list)</i><br/>Xerox.C8035/14,3717674307</td> </tr> <tr> <td>Contract end date</td> <td>27/06/2021</td> </tr> <tr> <td>Maximum monthly volume prints</td> <td>30000</td> </tr> <tr> <td>Average 6 months volume prints</td> <td>B:6000+ C:6000 =12000PM</td> </tr> <tr> <td>Average 6 months costing/payments</td> <td></td> </tr> <tr> <td colspan="2">Were you Institution printing in Mono / Color or Both?</td> </tr> <tr> <td>Mono <input type="checkbox"/></td> <td>Colour <input type="checkbox"/> Both <input checked="" type="checkbox"/></td> </tr> </table> | Make, model & serial number | <i>(if space is not sufficient please attach a separate list)</i><br>Xerox.C8035/14,3717674307 | Contract end date | 27/06/2021 | Maximum monthly volume prints | 30000 | Average 6 months volume prints | B:6000+ C:6000 =12000PM | Average 6 months costing/payments |  | Were you Institution printing in Mono / Color or Both? |  | Mono <input type="checkbox"/> | Colour <input type="checkbox"/> Both <input checked="" type="checkbox"/> |
| Make, model & serial number                            | <i>(if space is not sufficient please attach a separate list)</i><br>Xerox.C8035/14,3717674307               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| Contract end date                                      | 27/06/2021                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| Maximum monthly volume prints                          | 30000                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| Average 6 months volume prints                         | B:6000+ C:6000 =12000PM                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| Average 6 months costing/payments                      |                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| Were you Institution printing in Mono / Color or Both? |                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |
| Mono <input type="checkbox"/>                          | Colour <input type="checkbox"/> Both <input checked="" type="checkbox"/>                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                             |                                                                                                |                   |            |                               |       |                                |                         |                                   |  |                                                        |  |                               |                                                                          |



| #                                                                                                                                                                                               | Element                                                                               | Response<br>Complete or tick v                                                                                                                                                                                                                                                      |                                                                                                         |                                                                                                   |                                                                                            |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
|                                                                                                                                                                                                 |                                                                                       | Was your institution printing A4 or A3?                                                                                                                                                                                                                                             | A4 <input type="checkbox"/>                                                                             | A3 <input type="checkbox"/>                                                                       | Both <input checked="" type="checkbox"/>                                                   |
|                                                                                                                                                                                                 |                                                                                       | Current location of equipment                                                                                                                                                                                                                                                       | Richardsbay env office,                                                                                 |                                                                                                   |                                                                                            |
|                                                                                                                                                                                                 |                                                                                       | Were you having these functions?                                                                                                                                                                                                                                                    |                                                                                                         |                                                                                                   |                                                                                            |
|                                                                                                                                                                                                 |                                                                                       | Print <input checked="" type="checkbox"/>                                                                                                                                                                                                                                           | Copy <input checked="" type="checkbox"/>                                                                | Scan <input checked="" type="checkbox"/>                                                          | Fax (you must have dedicated fax line) <input type="checkbox"/>                            |
| 6                                                                                                                                                                                               | Are you satisfied with your current printing solution?                                | Very satisfied<br>Somewhat satisfied<br>Somewhat unsatisfied<br>Very unsatisfied<br>Not sure                                                                                                                                                                                        |                                                                                                         |                                                                                                   |                                                                                            |
| 7                                                                                                                                                                                               | Is your institution looking to optimize the current equipment / printing solution by: | Procuring maintenance?<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>                                                                                                                                                                                       | Procuring additional service(s)?<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Procuring accessory (ies)?<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | Combination or all?<br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| If you answered Yes on any of the number 7 questions above, you need not continue to complete the below section but contact ALL Suppliers on Categories 1 to 3 for any of the options selected. |                                                                                       |                                                                                                                                                                                                                                                                                     |                                                                                                         |                                                                                                   |                                                                                            |
| <b>NEW EQUIPMENT / PRINTING SOLUTION</b>                                                                                                                                                        |                                                                                       |                                                                                                                                                                                                                                                                                     |                                                                                                         |                                                                                                   |                                                                                            |
| ALL Suppliers are to provide basic services of electronic monitoring, meter reading and print release by pin codes as it is a standard function on the equipment.                               |                                                                                       |                                                                                                                                                                                                                                                                                     |                                                                                                         |                                                                                                   |                                                                                            |
| 8                                                                                                                                                                                               | Are you looking for a?                                                                |                                                                                                                                                                                                                                                                                     |                                                                                                         |                                                                                                   |                                                                                            |
|                                                                                                                                                                                                 | Printer                                                                               | Copier                                                                                                                                                                                                                                                                              | Scanner                                                                                                 | Fax                                                                                               | All of the them                                                                            |
|                                                                                                                                                                                                 | Yes <input type="checkbox"/> No <input type="checkbox"/>                              | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                            | Yes <input type="checkbox"/> No <input type="checkbox"/>                                                | Yes <input type="checkbox"/> No <input type="checkbox"/>                                          | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                        |
| 9                                                                                                                                                                                               | What is the reason for the procurement/rental of new equipment / printing solution?   |                                                                                                                                                                                                                                                                                     |                                                                                                         |                                                                                                   |                                                                                            |
|                                                                                                                                                                                                 | Replacement of existing?                                                              |                                                                                                                                                                                                                                                                                     |                                                                                                         | Yes <input checked="" type="checkbox"/>                                                           | No <input type="checkbox"/>                                                                |
|                                                                                                                                                                                                 | Cost cutting removing existing desktop printers?                                      |                                                                                                                                                                                                                                                                                     |                                                                                                         | Yes <input type="checkbox"/>                                                                      | No <input checked="" type="checkbox"/>                                                     |
|                                                                                                                                                                                                 | New department within the State institution?                                          |                                                                                                                                                                                                                                                                                     |                                                                                                         | Yes <input type="checkbox"/>                                                                      | No <input checked="" type="checkbox"/>                                                     |
| 10                                                                                                                                                                                              | What type of paper is your institution looking for?                                   | <u>Uncoated paper</u><br>Typically found in most office printers, uncoated paper has no coating, making it excellent for ink receptivity and absorbency. As it is uncoated it has the advantage of being used by both printer and pen, ideal for forms, letterheads and memo paper. |                                                                                                         |                                                                                                   | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                        |
|                                                                                                                                                                                                 |                                                                                       | <u>Gloss coated paper</u><br>Gloss paper is typically used for flyers and brochures as it has a high shine. As the ink dries well there is no need for a seal varnish as the ink does not rub off.                                                                                  |                                                                                                         |                                                                                                   | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                        |



| Element |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Response<br>Complete or tick ✓                     |                                                                                                |                                             |                                                  |  |
|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------------------------|--------------------------------------------------|--|
|         | <p><b>Matt coated paper</b><br/>Matt paper is the opposite to gloss – it is coated with a matt finish to produce a paper that isn't shiny, preventing glare. This type of paper is perfect for reports, flyers and leaflets.</p> <p><b>Recycled paper</b><br/>Made from re-used paper products, recycled paper is perfect for those who are trying to reduce their environmental impact. It can be used for most documents including reports, memo paper and forms.</p> <p><b>Bond paper</b><br/>This type of paper is stronger and more durable than the average sheet of paper. It's perfect for letterheads, typed reports and envelopes.</p> <p><b>Silk coated paper</b><br/>The interim between gloss and matt, silk coated paper has a smooth silky coating, leaving it smooth to the touch but without the shine of glass paper. This type of paper can be used for many things such as magazines, books and catalogues.</p> <p><b>Watermarked paper</b><br/>Used in high quality paper watermarked paper give a feel of luxury and high quality. To create its desired effect an impression is pressed into the paper by attaching a wire pattern. This type of paper is commonly used as a security feature for important documents, including exam certificates.</p> | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
| 11      | What is the paper size required?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | A4<br><input type="checkbox"/>                     | A3<br><input type="checkbox"/>                                                                 | Both<br><input checked="" type="checkbox"/> | Any other<br><input checked="" type="checkbox"/> |  |
| 12      | Does your institution expect copy volume to increase or decrease?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes<br>Why?<br><input checked="" type="checkbox"/> |                                                                                                |                                             | No<br><input type="checkbox"/>                   |  |
| 13      | What is the paper weight and thickness required?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                    |                                                                                                |                                             |                                                  |  |
|         | 35-55 gsm : Most newspapers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>                           | <input checked="" type="checkbox"/>                                                            |                                             |                                                  |  |
|         | 75-100 gsm : Standard paper for common business applications including mid-market magazine inner pages                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
|         | 130-250 gsm : A good quality promotional poster                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
|         | 180-250 gsm : Mid-market magazine cover                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input checked="" type="checkbox"/>                | <input type="checkbox"/>                                                                       |                                             |                                                  |  |
|         | 350 gsm : Most reasonable quality business cards                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Yes                                                | No                                                                                             |                                             |                                                  |  |
|         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/>                           | <input checked="" type="checkbox"/>                                                            |                                             |                                                  |  |
| 14      | Will your institution be printing in mono / colour / both?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Mono<br><input type="checkbox"/>                   | Colour<br><input type="checkbox"/>                                                             | Both<br><input checked="" type="checkbox"/> |                                                  |  |
| 15      | Will Supplier be required to link all the users to the equipment?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Yes<br><input checked="" type="checkbox"/>         | No<br><input type="checkbox"/>                                                                 |                                             |                                                  |  |
| 16      | Is there a required or preferred print speed and if so why?                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | No<br><input type="checkbox"/>                     | Yes and why?<br><input checked="" type="checkbox"/><br>50 copies per minute to save time MFPC7 |                                             |                                                  |  |



| #  | Element                                                                                                            | Response<br>Complete or tick ✓                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|----|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 17 | Will the equipment be connected to a network or by USB?                                                            | Network <input checked="" type="checkbox"/><br>USB <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                        | Yes <input checked="" type="checkbox"/><br>No <input type="checkbox"/><br>Yes <input checked="" type="checkbox"/><br>No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 18 | Do you have an in-house printing facility? Dedicated print room?                                                   | Yes                                                                                                                                                                                                                                                                                                                                                                                                                                                                | No <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 19 | Will your institution be making use of the following finishing options?                                            | Stapling <input checked="" type="checkbox"/><br>Booklet Printing <input type="checkbox"/><br>Punching <input checked="" type="checkbox"/><br>Mobile print <input type="checkbox"/><br>Any other <input type="checkbox"/><br>None <input checked="" type="checkbox"/><br>Sort Only <input checked="" type="checkbox"/><br>Hole Punch <input type="checkbox"/><br>2 Holes <input checked="" type="checkbox"/><br>4 Holes <input type="checkbox"/><br>*List any other | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/><br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br>Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |
| 20 | Will your institution be making use of mobile printing?                                                            | Yes <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                       | No <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 21 | What type of jobs will your institution be printing?                                                               | Graphics/Presentation handouts <input checked="" type="checkbox"/><br>Reports, plans, spreadsheets <input checked="" type="checkbox"/><br>Memos, letters, E-mail <input checked="" type="checkbox"/><br>Other <input type="checkbox"/>                                                                                                                                                                                                                             | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                    |
| 22 | Does your institution have a document management system or content management system?                              | Yes <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                       | No <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 23 | Special scan requirements                                                                                          | Do you wish to make use of OCR scanning to enable your scanned documents to be editable?                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|    |                                                                                                                    | Yes <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                       | No <input checked="" type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| 24 | What are the printer security requirements for your institution?                                                   | Network security / Hard drive Encryptions?<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                  | Adherence to special security regulations?<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| 25 | Is there any other technology your institution knows of and would like to add to your equipment/printing solution? |                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 26 | How does your institution intend to control or release print job?                                                  | Access Cards<br>Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                           | Pin Codes<br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|    |                                                                                                                    | Parking Tags<br>Yes <input type="checkbox"/> No <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |

Completed at Pietermaritzburg on this 05 of March 2021  
(State Institution's location) (Day) (Month & year)

End-user Signature [Signature] date 05/03/2021  
Note: Supplier and Participant are still to engage for better understanding of the printing requirements and an analysis of the printing environment must still be conducted by the Supplier.