Province of the
EASTERN CAPE
HEALTH

**Office of: The Deputy Director of Supply Chain Management – Livingstone Tertiary Hospital**

Livingstone Hospital • Ground Floor • Nurses' Home • Room 12 • Stanford Road • Korsten • Port Elizabeth • Eastern Cape
Private Bag X • Korsten • 6014 • REPUBLIC OF SOUTH AFRICA
Mr V Coetzee - Tel: 041 405 2424 OR Ms T Mnabisa 041 405 2183 • OR: Mr K Jooste 041 405 2320 •
Email: valentine.coetzee@echealth.gov.za OR thandi.mnabisa@echealth.gov.za

**RE-ADVERTISEMENT**

**REQUEST FOR 07 DAY QUOTATION BID**

**BID NO: SCMU3-P26/27-0812-LDH**

**24 NOVEMBER 2026**

## SUPPLY AND DELIVERY OF LEAD- LINED SHARPS CONTAINERS FOR RADIOACTIVE WASTE FOR A PERIOD OF 12 (TWELVE) MONTHS AT LIVINGSTONE TERTIARY HOSPITAL

Quotations are hereby invited from all interested and relevant service providers that can offer the above-mentioned service.

**PLEASE TAKE NOTE: BID DOCUMENTS ARE NOT ISSUED BY THE DEPARTMENT – BIDDERS ARE THEREFORE REQUESTED TO DOWNLOAD THE BID DOCUMENTS FROM CSD OR e-Tender Portal**

Bidders must immediately ensure that they are **registered on Centralized Supplier Database**

**Bids will only be awarded to the supplier registered on Centralized Suppliers Database (CSD).**

**Bid documents shall be uploaded on CSD or e-Tender -Portal.**

**CLOSING DATE: 03 DECEMBER 2026 AT 11H00**

Further enquiries can be directed to MR V COETZEE / MS N MNABISA at the following numbers (041) 405 2424 / 405 2183

.....  DATE: 04/11/2026

**MRS T. NOTSHE**

**CHIEF EXECUTIVE OFFICER**

**LIVINGSTONE TERTIARY HOSPITAL**

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Email: valentine.coetzee@echealth.gov.za OR thandi.mnabisa@echealth.gov.za

## SPECIFICATION FOR LEAD-LINED SHARPS CONTAINERS FOR RADIOACTIVE WASTE

| | SPECIFICATIONS<br>The above must have/consist of the following (Measurements are approx.) | | COMMENTS | Comply | |
|---|---|---|---|---|---|
| | | | | YES | NO |
| 1 | **NON-NEGOTIABLE – MEDICAL EQUIPMENT** | | | | |
| 1.1 | **SCOPE:**<br>This specification defines the minimum requirements for lead-lined sharps containers intended for collection, storage, transport and disposal of radioactive sharps generated in Nuclear Medicine, Nuclear Pharmacy and Healthcare institution. | | | | |
| 1.2 | **APPLICABLE STANDARDS:**<br>• The container shall comply with applicable local, national and | | | | |



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Fraud prevention line: 0800 701 701

24 hour Call Centre: 0800 032 364
Website: www.ecdoh.gov.za

| | | | | | |
|---|---|---|---|---|---|
| | international standards including but not limited to:<br>• IAEA safety standards for radioactive waste management.<br>• ISO 23907-1: (International standard specifying requirements for sharps injury protection and the safe collection and disposal of used medical sharps) sharps injury protection requirements.<br>• IAEA SSR 6 regulations for the safe transport of radioactive material.<br>• SAHPRA radiation standards.<br>• Local Occupational Health and safety regulations governing sharps waste. | | | | |
| 1.3 | **CONSTRUCTION**<br>The container shall consist of:<br>• An outer impact/shutter-resistant polymer shell.<br>• An internal lead shielding layer. | | | | |



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| | | | | | |
|---|---|---|---|---|---|
| | • A puncture-resistant sharps receptacle inside column.<br>• A lockable closure system. | | | | |
| 1.4 | **CONTAINER BODY**<br>MATERIAL:<br>• High-density polyethylene or equivalent medical-grade polymer.<br>• UV- resistant and chemically resistant. | | | | |
| 1.5 | **WALL CONSTRUCTION:**<br>• Double-wall construction incorporating lead shielding.<br>• Smooth, impermeable internal surfaces to facilitate effective decontamination. | | | | |
| 1.6 | **LEAD SHIELDING**<br>Material:<br>• Pure lead sheet with minimum purity of 100% or equivalent shielding.<br>Thickness:<br>• Standard shielding thickness of 3 mm Pb equivalent.<br>• Alternative | | | | |



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| | | | | | |
|---|---|---|---|---|---|
| | thicknesses of 5 mm Pb equivalent, 10 mm Pb equivalent or as specified by the radiation safety assessment.<br><br>Shielding Performance:<br>• Continuous shielding around sides and base.<br>• No gaps or discontinuities exceeding 1 mm.<br>• Shielding effectiveness verified by radiation attenuation testing. | | | | |
| 1.7 | **SHARPS CONTAINMENT**<br>The sharps receptacle shall:<br>• Resist penetration by hypodermic needles, scalpels and broken glass.<br>• Meet or exceed ISO 23907-1 puncture resistance requirements.<br><br>Fill opening<br>The container shall include:<br>• Restricted access aperture.<br>• One-way entry mechanism.<br>• The container shall allow its contents to be safely transferred | | | | |



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| | | | | | |
|---|---|---|---|---|---|
| | into another container when required.<br>• Needle removal features were required.<br><br>Closure<br>The closure system shall provide:<br>• Temporary closure for operational use.<br>• Tamper-evident locking mechanism<br><br>CAPACITY:<br>1. 20L or max available | | | | |
| 1.8 | **RADIATION PROTECTION**<br>The container shall:<br>• Maintain occupational exposure according to the ALARA/ALARP principle.<br>• Provide full shielding coverage on all sides and lid.<br>• Prevent direct line-of-sight radiation streaming through access ports.<br>• Allow storage of radioactive sharps contaminated with Beta/Gamma emitting radionuclides. | | | | |



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| | | | | | |
|---|---|---|---|---|---|
| | • Be suitable for controlled radiation areas. | | | | |
| 1.9 | **QUANTITY**<br>• Gamma Camera room x1.<br>• Nuclear Pharmacy x2<br>• Cannulation room x 1<br>• Decay room x1<br><br>There should be a minimum of 5 lead-lined containers. | | | | |

**PRICING SCHEDULE**

| **Spec ref. no.** | **Component** | **Qty** | **Price incl. VAT** |
|---|---|---|---|
| 3.1 | LEAD-LINED SHARPS WASTE CONTAINERS | 1 | Estimated price R |
| | | | |

**Total incl. VAT** ...R.....
.....



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## 1. APPLICABLE BID DOCUMENTS

1.1 Bid documents with necessary terms of reference may be obtained from CSD Web site
1.2 /Supply Chain Management Unit, Department of Health, Room 239, 241, 2ND Floor, Nurse's Home, Livingstone Hospital, Korsten, Gqeberha,6014. OR CSD web site

### 1.3 EVALUATION CRITERIA

**The bid will be evaluated as follows:**

**Stage 1: Administrative Compliance /Pre-Qualification**

- **Stage 2: Mandatory Requirements (non - negotiables)**
- **SEE SPECFICATIONS ITEMS –**
- **Tenderer must provide CE compliance document and ISO 9000 certificate with RFQ/BID documents failure to comply with invalid your RFQ/BID submission.**
- **Quoted equipment must be SABS certified, Attached a copy of certification. Failure to comply invalid your RFQ/BID submission.**
- **The mains cable of the unit being quoted for must be the hospital grade type and it must be minimum length of 3 three meters. NB the main cable of the unit tendered for must be SABS color coded**

**Stage 3: Price and Specific goals**
**Stage 4: N/A**

**The stages are further detailed below:**

### 2.1 Stage 1: Administrative Compliance/ Pre-qualification evaluation

2.1.1 ECDOH has defined minimum pre-qualification criteria that must be met by the Bidder for ECDoH to accept a bid for evaluation. In this regard a pre-qualification verification will be carried out by ECDoH to determine whether a bid complies in this regard

2.1.2 Where the Bidder's bid fails to comply fully with any of the pre-qualification criteria, or ECDoH is for any reason unable to verify whether the pre-qualification criteria are fully complied with, ECDoH will have the right to either:

2..1.3 reject the Bid in question and not to evaluate it at all.

2.1.4 give the Bidder an opportunity to submit and/or supplement the information and/or documentation provided by it under its Bid so as to achieve full compliance with the pre-qualification criteria, provided that such information and/or documentation can be provided within a period of 7 (seven) days, or such alternative period as ECDoH may determine, of it being requested by ECDoH and is administrative in nature, as opposed to forming a material part of the Bidder's Bid;

2.1.5 in any event permit the bid to be evaluated, subject to the outstanding information and/or documentation being submitted prior to the award of the Bid.

2.1.6 All bidders must be registered on Central Supplier Database (CSD) on the date of submission of their bid documents, a proof of registration e.g. a printout from CSD must be attached on the bid document.

### 2.2 The following pre-qualification criteria shall apply:

2.2.1 The bid documentation must be completed comprehensively and correctly.

2.2.2 Declaration forms (SBD 4) and SBD 6.1 must be completed and signed.

2.2.3 Bidders must be a legal entity or partnership (consortia/joint ventures are acceptable subject to Paragraph 11 of Part 1 of the Bid Document).

2.2.4 No bids will be considered from persons in the service of the state, companies with directors who are persons in the service of the state, or close corporations with member's persons in the service of the state.

2.2.5 Bidders must provide supporting documentation as per the bid requirements.

**Prospective bidders are required to submit the following documentation for quality Administrative compliance.**

| # | *Requirement* | Complied | |
|---|---|---|---|
| | | YES | NO |
| A | Invitation to Bid (SBD1) completed and signed | | |
| B | Pricing Schedule (SBD 3.2) **correctly calculated** | | |
| C | Declaration of Interest (SBD 4) | | |
| D | Preferential Points Claim (SBD 6.1) | | |
| E | JV agreement (if applicable) | | |
| F | Bidder must provide a valid License from the Wholesaler, Producers and Manufacturer where groceries/ dry goods will be sourced (in the case of a third party). **(Compulsory and non-negotiable).** | N/A | N/A |
| G | Valid Certificate of Acceptability for Premises from the municipality for where groceries/dry goods will be sources. **(Compulsory and non-negotiable)** | N/A | N/A |
| H | Compulsory Bid Briefing will be on the at | N/A | N/A |

**PLEASE NOTE:**

**Failure to comply with the** non-negotiable requirements will invalidate your bid, and your bid will not be evaluated further.

**Stage 2: Mandatory requirements (non-negotiables)**

**Stage 3: Price and Specific goals**

The bid will be evaluated in terms of Regulation 4(1) of the Preferential Procurement Regulation 80/20 Preference Point system will be applied where the lowest bidder will be allocated 80 Points for price. A maximum of 20 points will be awarded for specific goals.

The following formula will be used to calculate points out of 80 for price.

$$Ps = 80\left(1 - \frac{Pt - P\min}{P\min}\right) \text{ or } Ps = 90\left(1 - \frac{Pt - P\,min}{P\,min}\right)$$

Where
Ps = points scored for comparative price of bid or offer under consideration.
Pt =Comparative price of bid or offer under consideration.
Pmin = comparative price of lowest acceptable bid or offer.

| B-BBEE Status Level of Contribution | Weighting (of 20/10 POINTS) | Number of points (80/20 system) |
|---|---|---|
| Historically Disadvantage Individuals | 20% | 4 |
| Women | 20% | 4 |
| Youth | 20% | 4 |
| Disability | 20% | 4 |
| Military Veterans | 10% | 2 |
| Locality | 10% | 2 |
| TOTAL | 100% | 20 |

The following table must be calculated the score out of 20 points for Specific Goals

a) A tenderer must submit proof of its Specific Goals.

b) A tenderer failing to submit proof of specific Goals may not be disqualified, but may only score point out of 80 price, and scores 0 points out of 20 for Specific Goals.

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

**HDI** - means a South African citizen who, due to the apartheid policy that had been in place, had no franchise in national elections prior to the introduction of the Republic of South Africa, 1983 (Act No 110 of 1983) or the Constitution of the Republic of South Africa, 1993 (Act No 200 of 1993) (The interim Constitution).

**WOMEN** – South African citizen who is a female

**YOUTH** – South African citizen who is not more than the age of 14-35 years.

**DISABILITY** - Medical Certificate / Doctor's medical report (Impairment should be substantially limited long term or of recurring nature)

**MILITARY VETERANS** – Military veterans' certificate

**LOCALITY** - Municipal accounts or Lease agreement with 3 months' proof of rental payment

**CSD report** (must be recent within 7 days from closing date):

**CIPRO Certificate with members details that are owning shares and / or ID copies** (must be certified with original stamp within 3 months from closing date of bid/quote):

The points scored for the specific goal shall be added to the points scored for price and the total shall be rounded off to the nearest two decimal places.

**CIPRO Certificate with members details that are owning shares and / or ID copies** (must be certified with original stamp within 3 months from closing date of bid/quote):

The points scored for the specific goal shall be added to the points scored for price and the total shall be rounded off to the nearest two decimal places.

**CONFIRMATION OF SPECIFICATION**

END USER: S. Mdingi ---------- DATE: 01/07/2026

PRINT NAME: SIYANDA MDINGI

**CONFIRMATION OF THE SPEC MEETING**

CHAIRPERSON: BSC ---------- DATE: 01/07/2026

PRINT NAME: AR Knock

# INVITATION TO BID

pages 1-18

**Part 1 – Signed Bid Advert, Specifications, Operational / Services Conditions and requirements and Pricing Schedule(s) : SBD3.1(Form prices) / SBD3.2(Non-Firm Prices)**

**Part 2 – Bid Conditions of Bid / Contract**

**Part 3 – Bid Forms and related documentation**

| | |
|---|---|
| **Schedule A** – | SBD1 Bid Advert |
| **Schedule B** – | SBD2, CSD Registration, Logis and Tax Information |
| **Schedule C** – | Consent Form by the Supplier |
| **Schedule D** – | Declaration of Interest (SBD 4) |
| **Schedule E** - | Preference Points Claim Forms (SBD 6.1) |
| **Schedule F** – | Qualifications and experience |
| **Schedule G** – | Details of Bidder's nearest office |
| **Schedule H** – | Financial Particulars |

## DEFINITIONS

The rules of interpretation and defined terms contained in the General Conditions of Contract (GCC) shall apply to this invitation to bid unless the context requires otherwise.

In addition, the following terms used in this invitation to bid shall, unless indicated otherwise, have the meanings assigned to such terms in the table below.

| | |
|---|---|
| **ECDoH** | means the Eastern Cape Department of Health acting for and on behalf of the Eastern Cape Provincial Government; |
| **Invitation to bid** | means this invitation to bid comprising<br>o The cover page and the table of content and definitions<br>o Part 1 which details the Conditions of Bid;<br>o Part 2 which details the Conditions of Contract and Operational Requirements;<br>o Part 3 which details the bid Specifications<br>o Part 4 which contains all the requisite bid forms and certificates;<br>As read with GCC – *General Conditions of Contract*<br>http://www.treasury.gov.za/divisions/ocpo/sc/GeneralConditions/General%20Conditions%20of%20Contract.pdf |
| **Services** | means the services defined on the cover page of this invitation to bid and described in detail in the Terms of Reference; |
| **Terms of Reference** | means the Terms of Reference contained in Part 4 of this invitation to bid; |

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# CONDITIONS OF BID

## 1. BACKGROUND AND INTRODUCTORY PROVISIONS

Refer to Part 1 of this invitation to bid for background and introductory information relating to the Services and this invitation to bid.

## 2. OFFER AND SPECIAL CONDITIONS

2.1. Without detracting from the generality of clause 2.2 below, bidders must submit a completed and signed Invitation to Bid form (SBD 1) and requisite bid forms attached as (Part 3 – Schedule A) with their bids. Bidders must take careful note of the special conditions.

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

2.3. **It is a requirement that the bidder must attach proof of registration with (CSD) Central Supplier Database. Failure to submit will invalidate your bid.**

2.4. In the event that any form or certificate provided in Part 5 of this invitation to bid does not have adequate space for the bidder to provide the requested details, the bidder should attach an annexure to such form or certificate on which the requested details should be provided, and the bidder should refer to such annexure in the form or certificate provided.

2.5. Proof of Service Delivery
To submit invoice along with the following documents,

a.) proof of service rendered in a form of a service voucher signed by the end user:

b.) Proof of delivery of goods signed by the end user on receipt of delivery

2.6 Penalty Clauses will be monitored by contract office where the appointed bidder fails to comply as per the scope of work.

2.7 The ECDOH reserves the right to award the bid to one or more than one bidder/s. The difference in point score should not exceed 10% between the lowest and highest point scorer.

2.8 There will be a reserve bidder appointed in a case of poor or non-delivery

2.9 If the price offered by a tenderer scoring the highest points is not market related, the organ of state may not award the contract to that tenderer. **The organs of state may**

(i) Negotiate a market-related price with the tenderer scoring the highest points or cancel the tender;

(ii) If the tenderer does not agree to a market-related price, negotiate a market-related price with the tenderer scoring the second highest points or cancel the tender;

(iii) If the tenderer scoring the second highest points does not agree to a market-related price, negotiate a market-related price with the tenderer scoring the third highest points or cancel the tender.

2.10 If a market-related price is not agreed as envisaged in paragraph (b)(iii), the organ of state must cancel the tender.

2.11 The bid shall be terminated as soon as the Provincial / National tender is awarded.

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

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

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

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

## 4. ENQUIRIES

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

## 5. SITE BRIEFING

Refer to Part 1 Advert & Specifications of bid documents

5.1 **Pricing must be stipulated INCLUSIVE OF VALUE ADDED TAX** if you are a VAT vendor. Please Note : NON VAT vendors may not charge VAT.

## 6. DECLARATION OF INTEREST

The bidder should submit a duly signed declaration of interest (SBD 4) together with the bid. The declaration of interest is attached as (Part 3 – Schedule D). Failure to do so will invalidate your bid.

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7. **CONSORTIUM/JOINT VENTURE**

7.1 It is recognized that bidders may wish to form consortia to provide the Services.

7.2 A bid in response to this invitation to bid by a consortium shall comply with the following requirements:-

7.2.1 It shall be signed so as to be legally binding on all consortium members;

7.2.2 One of the members shall be nominated by the others as authorized to be the lead member and this authorization shall be included in the agreement entered into between the consortium members;

7.2.3 The lead member shall be the only authorized party to make legal statements, communicate with the Technical Review Committee and/or the ECDoH and receive instructions for and on behalf of any and all the members of the consortium;

7.2.4 A copy of the agreement entered into by the consortium members shall be submitted with the bid.

7.2.5 Each party to the Consortium must submit a consolidated BBBEE status Level Verification certificate for every separate BID.

8. **ORGANISATIONAL PRINCIPLES AND EXPERIENCE**

The bidder should submit a clear indication of the envisaged authorized organizational principles, procedures and functions for an effective delivery of the required Service at the relevant Institutions with the bid. These details should be submitted on the form attached as (Part 3 – Schedule F)

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

The bidder should provide full details regarding the bidders nearest office to the Institutions at which the Services are to be provided (see Part 4 of this invitation to bid). These details should be provided on the form attached as (Part 3 – Schedule G) which completed form, must be submitted together with the bid.

10. **FINANCIAL PARTICULARS**

Bidder must provide full details regarding its financial particulars and standing, which particulars should be submitted together with the bid on the form attached as (Part 34- Schedule H). If no such details are submitted it would be assumed that the bidder is not in good standing with his/her financial institution. Official latest audited financial statements signed by the relevant authorized authority to be attached (Accounting firm).

11. **PREFERENCE POINTS CLAIM FORMS**

(Part 3 – Schedule E) SBD6.1 contains the Preference Points Claim Forms in terms of Preferential Procurement Regulations to be completed and signed by the bidder to the extent applicable and returned with this bid.

12. **ACCEPTANCE OF BIDS**

The Eastern Cape Department of Health (ECDoH) does not bind itself to accept either the lowest or any other bid and reserves the right to accept the bid which it deems to be in the best interest of the State even if it implies a waiver by the State, the Eastern Cape Department of Health (ECDoH) of certain requirements which the State, Eastern Cape Department of Health (ECDoH) considers to be of minor importance and not complied with by the bidder.

13. **NO RIGHTS OR CLAIMS**

13.1 Receipt of the invitation to bid does not confer any right on any party in respect of the Services or in respect of or against the State, Eastern Cape Department of Health (ECDoH). The State, the Eastern Cape Department of Health (ECDoH) reserves the right, in its sole discretion, to withdraw by notice to bidders any Services or combination of Services from the bid process, to terminate any party's participation in the bid process or to accept or reject any response to this invitation to bid on notice to the bidders without liability to any party. Accordingly, parties have no rights, expressed or implied, with respect to any of the Services as a result of their participation in the bid process.

13.2 Eastern Cape Department of Health (ECDoH), nor any of their respective directors, officers, employees, agents, representatives or advisors will assume any obligations for any costs or expenses incurred by any party in or associated with any appraisal and/or investigation relating to this invitation to bid or the subsequent submission of a bid in response to this invitation to bid in respect of the Services or any other costs, expenses or liabilities of whatsoever nature and howsoever incurred by bidders in connection with or arising out of the bid process.

14. **NON DISCLOSURE, CONFIDENTIALITY AND SECURITY**

14.1 The invitation to bid and its contents are made available on condition that they are used in connection with the bid process set out in the invitation to bid and for no other purpose. All information pertaining to this invitation to bid and its contents shall be regarded as restricted and divulged on a "need to know" bases with the approval of the ECDoH.

14.2 In the event that the bidder is appointed pursuant to this invitation to bid such bidder may be subject to security clearance prior to commencement of the Services.

15. **ACCURACY OF INFORMATION**

15.1 The information contained in the invitation to bid has been prepared in good faith. Eastern Cape Department of Health (ECDoH) nor any of their respective directors, advisors, officers, employees, agents, representatives make any representation or warranty or give any undertaking express or implied, or accept any responsibility or liability whatsoever, as to the contents, accuracy or completeness of the information contained in the invitation to bid, or any other written or oral information made available in connection with the bid and nothing contained herein is, or shall be relied upon as a promise or representation, whether as to the past or the future.

15.2 This invitation to bid may not contain all the information that may be required to evaluate a possible submission of a response to this invitation to bid. The bidder should conduct its own independent analysis of the operations to the extent required to enable it to respond to this bid.

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16. **COMPETITION**

16.1 Bidders and their respective officers, employees and agents are prohibited from engaging in any collusive action with respect to the biding process which serves to limit competition amongst bidders.

16.2 In general, the attention of bidders is drawn to Section 4(1)(iii) of the Competition Act1998 (Act No. 89 of 1998) (the Competition Act) that prohibits collusive biding.

16.3 If bidders have reason to believe that competition issues may arise from any submission of a response to this bid invitation they may make, they are encouraged to discuss their position with the competition authorities before submitting response.

16.4 Any correspondence or process of any kind between bidders and the competition authorities must be documented in the responses to this invitation to bid.

17. **RESERVATION OF RIGHTS**

17.1 Without limitation to any other rights of the ECDoH (whether otherwise reserved in this invitation to bid or under law), the ECDoH expressly reserves the right to:-

17.2 Request clarification on any aspect of a response to this invitation to bid received from the bidder, such requests and the responses to be in writing;

17.3 Amend the biding process, including the timetables, closing date and any other date at its sole discretion;

17.4 Reject all responses submitted by bidders and to embark on a new bid process.

17.5 Check the bidder involvement in the local economic development of the region (employment of the staff from Nelson Mandela Metro to reflect on the bid).

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

18.1 The bidder must complete the declaration and sign accordingly to submit with the bid. The declaration of bidder's past supply chain management practices is attached as Part 3– Schedule F

19. **REQUIREMENTS**

19.1 Previous performance of the bidder will be considered in the evaluation of the bid.

19.2 Form Part 5 schedule J must be completed accordingly.

19.3 Financial standing of the bidder will be considered for risk analysis and bidders are required to submit documentary proof to demonstrate financial stability in the form of:-

a. Latest Audited financial statements in the case of Companies and in the case of Close Co-operation CC.**OR**

b. Letter from the financial institution confirming availability of funds OR

c. Letter of good standing and/or proof from the financial institution indicating a positive rating must be attached.

19.4 All bidders to familiarize themselves with the General conditions of contract on http://www.treasury.gov.za/divisions/ocpo/sc/GeneralConditions/General%20Conditions%20of%20Contract.pdf

**SBD1**

# PART A
# INVITATION TO BID

| YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (*NAME OF DEPARTMENT/ PUBLIC ENTITY*) | | | | | |
|---|---|---|---|---|---|
| BID NUMBER: | SCMU3-P26/27-0812-LDH | CLOSING DATE: | 03rd DECEMBER 2026 | CLOSING TIME: | 11H00 |
| DESCRIPTION | SUPPLY AND DELIVERY OF LEAD-LINED SHARPS CONTAINERS FOR RADIOACTIVE WASTE FOR A PERIOD OF 12 (TWELVE) MONTHS AT LIVINGSTONE TERTIARY HOSPITAL | | | | |

**BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT *(STREET ADDRESS)***

Department of Health – Livingstone Tertiary Hospital

Bid Box - Main Entrance Nurses Home Building Ground Floor

Standford Road

Korsten-Port Elizabeth 6014

| **BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO** | | **TECHNICAL ENQUIRIES MAY BE DIRECTED TO:** | |
|---|---|---|---|
| CONTACT PERSON | **Mr Valentine Coetze / Ms Thandi Mnabisa** | CONTACT PERSON | Mr Siyanda Mdingi |
| TELEPHONE NUMBER | **041-405 2424 / 405 2183** | TELEPHONE NUMBER | 041 405 2411 / 405 2471 |
| FACSIMILE NUMBER | | FACSIMILE NUMBER | |
| E-MAIL ADDRESS | **valentine.coetzee@echealth.gov.za** | E-MAIL ADDRESS | siyanda.mdingi@echealth.gov.za |

**SUPPLIER INFORMATION**

| | | | | |
|---|---|---|---|---|
| NAME OF BIDDER | | | | |
| POSTAL ADDRESS | | | | |
| STREET ADDRESS | | | | |
| TELEPHONE NUMBER | CODE | | NUMBER | |
| CELLPHONE NUMBER | | | | |
| FACSIMILE NUMBER | CODE | | NUMBER | |
| E-MAIL ADDRESS | | | | |
| VAT REGISTRATION NUMBER | | | | |
| SUPPLIER COMPLIANCE STATUS | TAX COMPLIANCE SYSTEM PIN: | | OR | CENTRAL SUPPLIER DATABASE No: MAAA |

| | | | |
|---|---|---|---|
| ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES OFFERED? | ☐ Yes ☐ No [IF YES ENCLOSE PROOF] | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS/SERVICES OFFERED? | ☐ Yes ☐ No [IF YES, ANSWER THE QUESTIONNAIRE BELOW] |

**QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS**

| | |
|---|---|
| IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)? | ☐ YES ☐ NO |
| DOES THE ENTITY HAVE A BRANCH IN THE RSA? | ☐ YES ☐ NO |
| DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA? | ☐ YES ☐ NO |
| DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA? | ☐ YES ☐ NO |
| IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION? | ☐ YES ☐ NO |

**IF THE ANSWER IS "NO" TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 BELOW.**

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# PART B
# TERMS AND CONDITIONS FOR BIDDING

| | |
|---|---|
| **1.** | **BID SUBMISSION:** |
| 1.1. | BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION. |
| 1.2. | **ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED (NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.** |
| 1.3. | THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT. |
| 1.4. | **THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).** |
| **2.** | **TAX COMPLIANCE REQUIREMENTS** |
| 2.1 | BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS. |
| 2.2 | BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS. |
| 2.3 | APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE WWW.SARS.GOV.ZA. |
| 2.4 | BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID. |
| 2.5 | IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED; EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER. |
| 2.6 | WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED. |
| 2.7 | NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE." |

**NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**

SIGNATURE OF BIDDER: .....

CAPACITY UNDER WHICH THIS BID IS SIGNED: .....
(Proof of authority must be submitted e.g. company resolution)

DATE: .....

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SBD 2

## TAX CLEARANCE REQUIREMENTS

## IT IS A CONDITION OF BIDDING:-

1. The Department of Health must verify the tax compliance status of bidders on the Central Supplier Database (CSD) for all price quotations R0-R30 000 and competitive bids exceeding the value of R30 001 (vat inclusive) prior to award as per National Treasury Instruction no. 4A of 2016/17 Central Supplier Database and circular compiled thereafter governing Tax Compliance Status.
2. Also note that it is the responsibility of the services provider registered on the CSD to ensure Tax Compliance at all times.

**Directorship (Print clearly)**

| Surname & Initials | Identity No. | Gender | % |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

Central Supplier Database (CSD) Number:_____

EC Department of Health Logis Number: _____

Company Registration Number: _____

Company Vat Registration Number: _____

Company Tax Reference Number: _____

## BANK DETAIL CONFIRMATION

| | |
|---|---|
| Bank Name | |
| Branch Code | |
| Account Type | |
| Account No | |

**Please answer the following questions carefully-:**

| Questions | Yes | No | Year |
|---|---|---|---|
| Is your business under voluntary suspension? | | | |
| Is your business under suspension by the Authority? | | | |
| Are all the directors provided above registered as directors of the business by the Authority? | | | |
| Has your business or any of the directors found guilty by the Authority or any agencies of the state of improper conduct in terms of the Act? If so please provide a separate paper for explanation. | | | |
| Is your business in partnership with any of the well-established businesses? | | | |
| Has your business status changed in the last five years? | | | |

**Instructions**

**Please read the instructions carefully**

1. **The form must be completed in full.**
2. **The list of directors means all those directors who are shareholders in business and who are registered as such.**
3. **Only the number of personnel registered under the name of the business should be provided.**

**Conditions**

1. The Eastern Cape Department of Health will not be responsible in any way for incorrect information supplied by the service provider or any agencies/authority/state organs holding such information.
2. It is the responsibility for each business to update the Eastern Cape Department of Health with any change in its status.
3. It is the responsibility for the business to ensure that the information provided to South African Revenue Services is correct and up-to-date.

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## PART 3
## BID STRATEGY

**THE BID CALLS**

- The contract is rate item based and will be utilized on an as and when as required principle.

**SCOPE OF WORK**

- The suppliers will be requested to supply and delivery of lead-lined sharps containers for radioactive waste as per delivery schedule / order.
- The successful bidder will be required to do service directly to Livingstone Tertiary Hospital as stated in the specification.
- The ECDOH reserves the right to award the bid to one or more than one bidder/s. The difference in point score should not exceed 10% between the lowest and highest point scorer.

**DECLARATION OF THE BIDDER'S ABILITY TO THE SUPPLY AND DELIVERYOD LEAD-LINED SHARPS CONTAINERS FOR ADIOACTIVE FOR A PERIOD OF TWELVE MONTHS (12) FOR THE DEPARTMENT OF HEALTH**

- We hereby declare that we

- _____ (name of the bidder), have the capacity and capability for the supply and delivery of lead-lined sharps containers for radioactive waste.

SIGNATURE OF BIDDER: ----------

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# CONSENT FORM BY THE BIDDER

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

The Head
Department of Health
Private Bag X0038
Bisho, 5605

Sir/Madam

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

1) I/we acknowledge that the information herein contained shall constitute the basis on which my/our bid is to be considered. I/we grant approval that any source regarding this bid may be fully investigated and that all such information shall be of material importance and directly relevant to the consideration of our bid. I /we further grant my/our consent to such source to provide confidential information.

2) I/we warrant that all the information herein contained is to the best of my/our knowledge and belief true and correct in all material respects and I/we am /are not aware of any information which, should it become known to the Eastern Cape Department of Health, would affect the consideration of my/our bid in any way.

3) The Eastern Cape Department of Health wishes to inform you that all information regarding your personal matters is treated as strictly as confidential.

## PLEASE TICK AND SIGNED ONE OF THE APPROPRIATE BOXES.

| | |
|---|---|
| | I/We hereby consent to the above |

Signature _____ Date _____

## OR

| | |
|---|---|
| | **I/We hereby withhold consent** and fully understand the implications and ramifications of my/our decision and will not hold the Eastern Cape Department of Health responsible for not considering my/our tender |

Signature _____ Date _____

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## BIDDER'S DISCLOSURE

### 1. PURPOSE OF THE FORM

1.1 Any person (natural or juristic) may make an offer or offers in terms of this invitation to bid. In line with the principles of transparency, accountability, impartiality, and ethics as enshrined in the Constitution of the Republic of South Africa, 1996 (Constitution), and further expressed in the various applicable legislation, it is required for the bidder to make this declaration in respect of the details required hereunder.

1.2 If a person is listed in the Register for Tender Defaulters and/or the List of Restricted Suppliers, that person will automatically be disqualified from the bid process.

### 2. DECLARATION ON EMPLOYMENT BY ORGAN OF STATE

2.1 Is the bidder, or any of the directors / trustees / shareholders / members / partners of the bidder employed by an organ of state, as defined in section 239 of the Constitution? **YES/NO**

2.2 If YES, furnish particulars of the names, individual identity numbers, in the table below:

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

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

2.3.1 If so, furnish particulars:

.....
.....
.....

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

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

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

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

## 3 GENERAL DECLARATION

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

3.1 I have read and I understand the contents of this disclosure.

3.2 I understand that the accompanying bid will be disqualified if this disclosure is found to be false.

3.3 The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor.

3.4 In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications, prices, including methods, factors or formulas used to calculate prices, market allocation, the intention or decision to submit or not to submit the bid, bidding with the intention not to win the bid and conditions or delivery particulars of the products or services to which this bid invitation relates.

3.5 The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening or of the awarding of the contract.

3.6 There have been no consultations, communications, agreements or arrangements made by the bidder with any official of the procuring institution in relation to this procurement process prior to and during the bidding process except to provide clarification on the bid submitted where so required by the institution; and the bidder was not involved in the drafting of the specifications or terms of reference for this bid.

3.7 I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act, 1998 (Act No. 89 of 1998) and or may be referred to law enforcement agencies for criminal investigation and or may be restricted from conducting business with the state for a period not exceeding 10 years in terms of the Prevention and Combating of Corrupt Activities Act, 2004 (Act No. 12 of 2004) or any other applicable legislation.

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I CERTIFY THAT THE ABOVE IS CORRECT.

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

| | |
|---|---|
| ..... | ..... |
| Signature | Date |
| ..... | ..... |
| Designation | Name of bidder |

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SBD 6.1

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

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

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

### 1. GENERAL CONDITIONS

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

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

**1.2 To be completed by the organ of state**

(*delete whichever is not applicable for this tender*).

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

b) The applicable preference point system for this tender is the 80/20 preference point system.

c) Either the ~~90/10 or~~ 80/20 preference point system will be applicable in this tender. The lowest/ highest acceptable tender will be used to determine the accurate system once tenders are received.

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

(a) Price; and

(b) Specific Goals.

**1.4 To be completed by the organ of state:**

The maximum points for this tender are allocated as follows:

| | POINTS |
|---|---|
| **PRICE** | |
| **SPECIFIC GOALS** | |
| **Total points for Price and SPECIFIC GOALS** | **100** |

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

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

### 2. DEFINITIONS

(a) **"tender"** means a written offer in the form determined by an organ of state in response to an invitation to provide goods or services through price quotations, competitive tendering process or any other method envisaged in legislation;

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(b) **"price"** means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;
(c) **"rand value"** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;
(d) **"tender for income-generating contracts"** means a written offer in the form determined by an organ of state in response to an invitation for the origination of income-generating contracts through any method envisaged in legislation that will result in a legal agreement between the organ of state and a third party that produces revenue for the organ of state, and includes, but is not limited to, leasing and disposal of assets and concession contracts, excluding direct sales and disposal of assets through public auctions; and
(e) **"the Act"** means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

## 3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

### 3.1. POINTS AWARDED FOR PRICE

### 3.1.1 THE 80/20 OR 90/10 PREFERENCE POINT SYSTEMS

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

**80/20** **or** **90/10**

$$Ps = 80\left(1 - \frac{Pt - P\,min}{P\,min}\right) \quad \text{or} \quad Ps = 90\left(1 - \frac{Pt - P\,min}{P\,min}\right)$$

Where

Ps = Points scored for price of tender under consideration

Pt = Price of tender under consideration

Pmin = Price of lowest acceptable tender

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

### 3.2.1. POINTS AWARDED FOR PRICE

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

**80/20** **or** **90/10**

$$Ps = 80\left(1 + \frac{Pt - P\,max}{P\,max}\right) \quad \text{or} \quad Ps = 90\left(1 + \frac{Pt - P\,max}{Pmax}\right)$$

Where

Ps = Points scored for price of tender under consideration

Pt = Price of tender under consideration

Pmax = Price of highest acceptable tender

## 4. POINTS AWARDED FOR SPECIFIC GOALS

4.1. In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential Procurement Regulations, preference points must be awarded for specific goals stated in the tender. For the purposes of this tender the tenderer will be allocated points based on the goals stated in table 1 below as may be supported by proof/ documentation stated in the conditions of this tender:

4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the tender documents, stipulate in the case of—

(a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or

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(b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system,

then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

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

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

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

| **The specific goals allocated points in terms of this tender** | **Number of points allocated (80/20 system)** | **Number of points claimed (80/20 system) (To be completed by the tenderer)** |
|---|---|---|
| Historically Disadvantaged Individuals Ownership | 20% (4) | |
| Women Ownership | 20% (4) | |
| Youth Ownership | 20% (4) | |
| Disability Ownership | 20% (4) | |
| Military Veterans Ownership | 10% (2) | |
| Locality Ownership | 10% (2) | |
| TOTAL | 100% (20) | |

**DECLARATION WITH REGARD TO COMPANY/FIRM**

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

4.4. Company registration number: .....

4.5. TYPE OF COMPANY/ FIRM

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

4.6. I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points

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claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I acknowledge that:

i) The information furnished is true and correct;

ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;

iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;

iv) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may have –

(a) disqualify the person from the tendering process;

(b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;

(c) cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;

(d) recommend that the tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted from obtaining business from any organ of state for a period not exceeding 10 years, after the *audi alteram partem* (hear the other side) rule has been applied; and

(e) forward the matter for criminal prosecution, if deemed necessary.

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

**SURNAME AND NAME:** .....

**DATE:** .....

**ADDRESS:** .....

.....

.....

.....

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# EXPERIENCE

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

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

   Description of contract period contact person & tel no.

   (please provide contactable references)

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

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

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

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

witnesses :

1. .....

2. .....

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# DETAILS OF SUPPLIERS OFFICE

1. Physical address of supplier's office

_____

_____

_____

2. Telephone No of office: _____

3 Time period for which such office has been used by supplier: _____

.....

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

.....

**NAME IN CAPITALS**

Witnesses

1. .....

2. .....

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# FINANCIAL PARTICULARS

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

Nature of Service: _____

Name of bidder: _____

Bid Number: _____

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

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

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

Witnesses

1. .....

2. .....

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