



Province of the  
**EASTERN CAPE**  
HEALTH

REQUEST FOR QUOTATION

YOU ARE HEREBY INVITED TO QUOTE FOR RENDERING OF HORTICULTURAL SERVICES TO FRERE HOSPITAL.					
BID NUMBER: SCMU3-P23/24-0957-FRE		CLOSING DATE: 29/02/2024		CLOSING TIME: 10:00 a.m.	
COMPULSORY BRIEFING SESSION		BRIEFING DATE: 22/02/2024		BRIEFING TIME: 10:00 a.m.	
DESCRIPTION		RENDERING OF HORTICULTURAL SERVICES AT FRERE HOSPITAL INCLUDING DOCTOR'S FLATS FOR A PERIOD OF 12 MONTHS			
SUBMISSION		BID RESPONSE DOCUMENTS MUST BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS) NB: EMAILED DOCUMENTS WILL NOT BE ACCEPTABLE			
FRERE HOSPITAL: Y – ADMINISTRATION BLOCK, CONNAUGHT/AMALINDA MAIN ROADS EAST LONDON					
BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO			TECHNICAL ENQUIRIES MAY BE DIRECTED TO:		
CONTACT PERSON		Alex Ngqwebo		CONTACT PERSON	
TELEPHONE NUMBER		043 709 2583		TELEPHONE NUMBER	
FACSIMILE NUMBER		043 743 5317		FACSIMILE NUMBER	
E-MAIL ADDRESS		<a href="mailto:Alex.Ngqwebo@echealth.gov.za">Alex.Ngqwebo@echealth.gov.za</a>		E-MAIL ADDRESS	
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
QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS					
IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)? <input type="checkbox"/> YES <input type="checkbox"/> NO					
DOES THE ENTITY HAVE A BRANCH IN THE RSA? <input type="checkbox"/> YES <input type="checkbox"/> NO					
DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA? <input type="checkbox"/> YES <input type="checkbox"/> NO					
DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA? <input type="checkbox"/> YES <input type="checkbox"/> NO					
IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION? <input type="checkbox"/> YES <input type="checkbox"/> 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.					

## TERMS AND CONDITIONS

<b>1. QUOTE SUBMISSION:</b>								
<p>1.1. QUOTATIONS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE QUOTATIONS WILL NOT BE ACCEPTED FOR CONSIDERATION.</p> <p>1.2. ALL QUOTATIONS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED –(NOT TO BE RE-TYPED) OR ONLINE</p> <p>1.3. SUPPLIERS MUST REGISTER ON THE CENTRAL SUPPLIER DATABASE (CSD) TO UPLOAD MANDATORY INFORMATION NAMELY: ( BUSINESS REGISTRATION/ DIRECTORSHIP/ MEMBERSHIP/IDENTITY NUMBERS; TAX COMPLIANCE STATUS; AND BANKING INFORMATION FOR VERIFICATION PURPOSES). B-BBEE CERTIFICATE OR SWORN AFFIDAVIT FOR B-BBEE MUST BE SUBMITTED TO QUOTEDING INSTITUTION.</p> <p>1.4. WHERE A SUPPLIER IS NOT REGISTERED ON THE CSD, MANDATORY INFORMATION NAMELY: (BUSINESS REGISTRATION/ DIRECTORSHIP/ MEMBERSHIP/IDENTITY NUMBERS; TAX COMPLIANCE STATUS MAY NOT BE SUBMITTED WITH THE QUOTE DOCUMENTATION. B-BBEE CERTIFICATE OR SWORN AFFIDAVIT FOR B-BBEE MUST BE SUBMITTED TO QUOTEDING INSTITUTION.</p> <p>1.5. THIS QUOTE IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER LEGISLATION OR SPECIAL CONDITIONS OF CONTRACT.</p>								
<b>2. TAX COMPLIANCE REQUIREMENTS</b>								
<p>2.1 SUPPLIERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.</p> <p>2.2 SUPPLIERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VIEW THE TAXPAYER'S PROFILE AND TAX STATUS.</p> <p>2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) OR PIN MAY ALSO BE MADE VIA E-FILING. IN ORDER TO USE THIS PROVISION, TAXPAYERS WILL NEED TO REGISTER WITH SARS AS E-FILERS THROUGH THE WEBSITE <a href="http://WWW.SARS.GOV.ZA">WWW.SARS.GOV.ZA</a>.</p> <p>2.4 SUPPLIERS MAY ALSO SUBMIT A PRINTED TCS TOGETHER WITH THE QUOTE.</p> <p>2.5 IN QUOTATIONS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE PROOF OF TCS / PIN / CSD NUMBER.</p> <p>2.6 WHERE NO TCS IS AVAILABLE BUT THE SUPPLIER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.</p>								
<b>3. QUESTIONNAIRE TO QUOTEDING FOREIGN SUPPLIERS</b>								
<table style="width: 100%; border: none;"> <tr> <td style="width: 70%;">3.1. IS THE SUPPLIER A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>3.2. DOES THE SUPPLIER HAVE A BRANCH IN THE RSA?</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>3.3. DOES THE SUPPLIER HAVE A PERMANENT ESTABLISHMENT IN THE RSA?</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>3.4. DOES THE SUPPLIER HAVE ANY SOURCE OF INCOME IN THE RSA?</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> </table> <p><b>IF THE ANSWER IS "NO" TO ALL OF THE ABOVE, THEN, IT IS NOT A REQUIREMENT TO OBTAIN A TAX COMPLIANCE STATUS / TAX COMPLIANCE SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 ABOVE.</b></p>	3.1. IS THE SUPPLIER A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?	<input type="checkbox"/> YES <input type="checkbox"/> NO	3.2. DOES THE SUPPLIER HAVE A BRANCH IN THE RSA?	<input type="checkbox"/> YES <input type="checkbox"/> NO	3.3. DOES THE SUPPLIER HAVE A PERMANENT ESTABLISHMENT IN THE RSA?	<input type="checkbox"/> YES <input type="checkbox"/> NO	3.4. DOES THE SUPPLIER HAVE ANY SOURCE OF INCOME IN THE RSA?	<input type="checkbox"/> YES <input type="checkbox"/> NO
3.1. IS THE SUPPLIER A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?	<input type="checkbox"/> YES <input type="checkbox"/> NO							
3.2. DOES THE SUPPLIER HAVE A BRANCH IN THE RSA?	<input type="checkbox"/> YES <input type="checkbox"/> NO							
3.3. DOES THE SUPPLIER HAVE A PERMANENT ESTABLISHMENT IN THE RSA?	<input type="checkbox"/> YES <input type="checkbox"/> NO							
3.4. DOES THE SUPPLIER HAVE ANY SOURCE OF INCOME IN THE RSA?	<input type="checkbox"/> YES <input type="checkbox"/> NO							

SIGNATURE OF BIDDER:

.....

CAPACITY UNDER WHICH THIS BID IS SIGNED:

.....

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

DATE:

*Together, moving the health system forward*

Fraud prevention line: 0800 701 701



## INDEX

### RETURNABLE SCHEDULES

(All schedules must be completed and returned by the SUPPLIER)

SBD 1 (Part A and B)

Evaluation criteria Evaluation criteria

- Administrative compliance
- Compliance with Non-Negotiable Requirements
- Price & Specific Goals

Specification

Price Schedule

Declaration of Interest

Preference points claim form

# 1. EVALUATION CRITERIA

## 1.1 The Quote will be evaluated as follows:



- Stage 1: Administrative compliance
- Stage 2: Compliance to non-negotiable requirements.
- Stage 3: Price & Specific Goals' Points

#	Requirement	Please Tick ✓	
		Complied	Not Complied
A	Invitation to Quote (SBD1) completed and signed		
B	Signed Pricing Schedule (SBD 3.1)		
C	Signed Declaration of Interest (SBD 4)		
D	Signed Preferential Points Claim (SBD 6.1)		
E	Latest CSD report attached		
F	Bank confirmation letter (Not older than 3 months)		

## Stage 2: Compliance to Non-Negotiable Requirements

Spec Item No.	NON- NEGOTIABLE REQUIREMENTS	Comply	Not Comply
1.	<p>Indicate availability of the following Resources:</p> <p>a. 10 People/Workers with appropriate gear and identification (bearing the name of the Company) required on site.</p> <p>b. Equipment:</p> <ul style="list-style-type: none"> <li>• 5 Brush Cutters,</li> <li>• 5 Rakes,</li> <li>• 2 Fork Spade.</li> <li>• Truck/Bakkie.</li> <li>• 2 Blowers.</li> </ul> <p>Must provide refuse bags for removal. Must have Safety gear for the 10 workers on site</p>		
2	<p>Indication of compliance/knowledge of the following Acts/Legislation:</p> <p>Gardening services service provider must comply with the following legal prescripts as required by the Frere Hospital.</p> <ul style="list-style-type: none"> <li>• The Constitution of South Africa Act, Act 108 of 1996.</li> <li>• National Health Act No 61 of 2003</li> <li>• Occupational Health &amp; Safety Act No 181 of 1993</li> <li>• Fertilizer, Farm Feeds, Agricultural Remedies and Stock Act No 36 of 1947 (Attach a copy of the first page of each of the Acts cited above)</li> </ul>		
3	Compulsory Briefing Session (Attendance Register will be used and Roll call made)		
4.	Attach 2 reference letters where horticultural service/gardening were rendered not older than 5 years		

**NB: Failure to comply with any of the above requirements, the submission shall be disqualified and shall not be evaluated further.**

	SIGNATURE	DATE
REVIEWED BY:		14/02/2024
APPROVED BY RFQ SPECIFICATION COMMITTEE (CHAIRPERSON)		14/02/2024

### **Stage 3: Price & Specific Goals**

	POINTS
PRICE	80
SPECIFIC GOALS	20
Total points for Price and SPECIFIC GOALS	100

**NB: Complete as required under SBD 6.1 and attach appropriate supporting documents.**

#### **4. SPECIAL CONTRACT CONDITIONS**

- 4.1 General Conditions of Contract (GCC) are a point of reference for this RFQ.
- 4.2 Frere reserves the right to award or not to award this RFQ.
- 4.3 Budget availability shall influence the operation of the contract emanating from this RFQ.
- 4.4 Suppliers are expected to comply with the Specification/Requirements throughout the period of engagement, cancellation where there is no compliance with requirements shall be applied.
- 4.6 Frere Hospital has a right not to accept lowest quote.

#### **5. STRATEGY**

##### **THE BID CALLS FOR RENDERING OF HORTICULTURAL SERVICES AT FRERE HOSPITAL FOR A PERIOD OF 12 MONTHS**

- Frere Hospital under the Eastern Cape Department of Health (ECDoH) intends appoint a qualifying supplier to render horticultural services.
- The RFQ will be awarded to the supplier based on meeting all the requirements of this RFQ.
- The successful supplier render services directly to where the services are required as per the Project Manager
- The successful supplier will be required to have all the workforce and equipment required to render this service.

##### **SCOPE OF WORK**

- The suppliers will be requested to render horticultural services for a period of 12 months.

##### **DECLARATION OF THE BIDDER'S ABILITY TO RENDER HORTICULTURAL SERVICES FOR A PERIOD OF 12 MONTHS**

- We hereby declare that we, \_\_\_\_\_ (name of the bidder), have the capacity and capability to render horticultural services.

SIGNATURE OF BIDDER: .....

NAME: ..... DESIGNATION: .....

SUPPLIER'S SIGNATURE OF COMPLIANCE.....

## **RETURNABLE SCHEDULE 5: SPECIFICATION**

### **BID SPECIFICATION: GARDENING SERVICES**

#### **1. THE SCOPE**

Frere Hospital calls for the maintenance of Gardening Services to all areas of the hospital for the period of 12 months including Doctors flats, Dawson Road in Serlbone, Eton, Hafod Flats, Northedene / Lorraine flats and Amalinda Flat. The total area is **102 320** square meters.

#### **2. THE SERVICES**

- 2.1 Cutting of all the grass and mowing of all the lawns within the perimeter fence of the premises of the hospital, namely; Frere Hospital and the Doctors flats at Dawson Road – Selborne, Eton, Hafod Flats, Northedene/Lorraine and Amalinda Flats.
- 2.2 Felling, trimming and pruning of trees, hedges and shrubs.
- 2.3 Tending of gardens by removing weeds in flowerbeds and loosening the soil by turning the soil over.
- 2.4 Applying compost into flowerbeds.
- 2.5 Planting of flowers, plants, ground cover and shrubs.
- 2.6 Top dressing of lawns.
- 2.7 Sweep and clean all tarred and cemented areas, drains including pathways or walkways, cemented backyards, and remove all weeds by using herbicides (weed killer chemicals).
- 2.8 Watering and irrigation of flowerbeds and lawns.
- 2.9 Daily site Clearance for all garden refuse and rubble.

#### **3. FREQUENCY OF SERVICE**

- 3.1 The gardening services to be rendered according to the table below between 07H30 and 16H00 during weekdays, excluding weekends and public holidays, and/or on days to be agreed upon between hospital management and the preferred bidder.

#### **4. RESOURCES EXPECTED ON SITE**

- 10 People.
- All equipment required at each given time.
- Truck/Bakkie for refuse removal daily.

## 5. THE SERVICES

ITEM NO	PERIOD	DESCRIPTION
1	Twice/ week	Sweep and clean all tarred and cemented areas, drains, including pathways or walkways, cemented backyards, and remove all dry weeds.
2	Twice/month with sprinkler	Watering and irrigation of flowerbeds and lawns.
3	Twice/week	Tending of gardens by removing weeds in flowerbeds and loosening the soil by turning the soil over.
4	Once/month during WINTER & twice/month in SUMMER	Cutting of all the grass and mowing of all the lawns within the perimeter fence of the premises of the hospital, namely; (1) total area of Frere Hospital. List attached.
5	monthly	Cutting of all the grass and mowing of all the lawns within the perimeter fence of Doctors flats at Eton Flats, Dawson Road – Selborne, Hafod Flats, Northdene/Lorraine flats and Amalinda Flats.
6	monthly	remove all weeds by using herbicides ( weed killer chemicals)
7	Once in two months	Top dressing of lawns
8	Once in three months	Felling, trimming, pruning of trees, hedges and shrubs. <b>NB: Felling of trees and removal thereof shall be as and when the need arises</b>
9	Once in three months	Applying compost into flowerbeds.
10.	Daily	Removal of all gardening refuse and rubble
11	Once off	Planting of trees
12.	Whenever need arise	Tree felling and removal
12	Twice a year	Planting of flowers and plants

## BID SPECIFICATION: HORTICULTURAL SERVICES

### 6. RESOURCES TO BE SUPPLIED BY THE CONTRACTOR AT FRERE HOSPITAL & DOCTORS FLATS DAWSON ROAD-SELBORNE, ETON, HAFOD FLAT, NORTHDENE/LORRAINE FLATS & AMALINDA FLATS

- The Contractor must provide sufficient manpower and gardening equipment to render the services.
- The Contractor must provide protective clothing and protective equipment to gardening employees deployed on the premises of the Hospital.
- The Contractor must supervise the gardening services employees while they are deployed on the premises of the Hospital.

### 7. APPLICABLE CONDITIONS

- Fertilizers, herbicides, compost, trees, shrubs and plants are to be supplied by the Contractor and must be supplied with the consultation of Project Manager.

7.2 The Chief Executive Officer, Hospital Manager, Head of Facilities, Soft Services Manager or designated person responsible or Grounds will be entitled to give reasonable instructions to gardening employees while they are deployed on the premises of the Hospital.

7.3 Conduct monthly site inspection by the service provider and the project manager.

7.4 Project manager must submit a monthly report to Contract Management.

8. **STATUTES RELATING TO HORTICULTURAL SERVICES**

8.1 The service provider must provide a high standard of gardening services with safe results in accordance with the National Health under Act No 61 of 2003

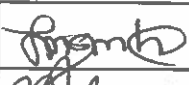
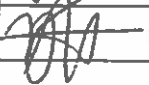
9. **The handling and treatment of using chemicals e.g. weed killer must be in compliance with the following Legislation, guidelines and codes of practice as required by the Frere Hospital.**

9.1 The Constitution of South Africa Act, Act 108 of 1996.

9.2 National Health Act No 61 of 2003

9.3 Occupational Health & Safety Act No 181 of 1993

9.4 Fertilizer, Farm Feeds, Agricultural Remedies and Stock Act No 36 of 1947

	SIGNATURE	DATE
REVIEWED BY:		14/02/2024
APPROVED BY RFQ SPECIFICATION COMMITTEE (CHAIRPERSON)		14/02/2024



### RETURNABLE SCHEDULE 6: PRICING SCHEDULE

Rates Valid for the duration of the RFQ Based Contract (12 months).

Company name: .....

Please complete the table below:

NO	AREA	PRICE PER MONTH	COST FOR 12 MONTHS
1	Hospital grounds		
2	Eton Flats		
3.	Dawson Road - Selborne		
4.	Hafod flats		
5.	Northdene/ Lorraine flats		
	<b>SUBTOTAL</b>	R	
	<b>VAT</b>	R	
	<b>TOTAL COST INCL VAT</b>	R	

<b>Signature</b>			
<b>Company Representative</b>			
<b>Company Director / Manager</b>	<b>Initial and surname</b>	<b>Signature</b>	<b>Date</b>

Company official  
stamp

**RETURABLE SCHEDULE 5: DECLARATION OF INTEREST****SBD 4****BIDDER'S DISCLOSURE****1. PURPOSE OF THE FORM**

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

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

**2. Bidder's declaration**

- 2.1 Is the bidder, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest<sup>1</sup> in the enterprise, employed by the state?

**YES/NO**

- 2.1.1 If so, furnish particulars of the names, individual identity numbers, and, if applicable, state employee numbers of sole proprietor/ directors / trustees / shareholders / members/ partners or any person having a controlling interest in the enterprise, in table below.

Full Name	Identity Number	Name of State institution

- 2.2 Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution?

**YES/NO**

- 2.2.1 If so, furnish particulars:

.....  
.....

- 2.3 Does the bidder or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise whether or not they are bidding for this contract?

**YES/NO**

- 2.3.1 If so, furnish particulars:

.....  
.....

**3 DECLARATION**

<sup>1</sup> the power, by one person or a group of persons holding the majority of the equity of an enterprise, alternatively, the person/s having the deciding vote or power to influence or to direct the course and decisions of the enterprise.

*Together, moving the health system forward*



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

- 3.1 I have read and I understand the contents of this disclosure;
- 3.2 I understand that the accompanying bid will be disqualified if this disclosure is found not to be true and complete in every respect;
- 3.3 The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However, communication between partners in a joint venture or consortium<sup>2</sup> will not be construed as collusive bidding.
- 3.4 In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications, prices, including methods, factors or formulas used to calculate prices, market allocation, the intention or decision to submit or not to submit the bid, bidding with the intention not to win the bid and conditions or delivery particulars of the products or services to which this bid invitation relates.
- 3.4 The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening or of the awarding of the contract.
- 3.5 There have been no consultations, communications, agreements or arrangements made by the bidder with any official of the procuring institution in relation to this procurement process prior to and during the bidding process except to provide clarification on the bid submitted where so required by the institution; and the bidder was not involved in the drafting of the specifications or terms of reference for this bid.
- 3.6 I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act No 89 of 1998 and or may be reported to the National Prosecuting Authority (NPA) for criminal investigation and or may be restricted from conducting business with the public sector for a period not exceeding ten (10) years in terms of the Prevention and Combating of Corrupt Activities Act No 12 of 2004 or any other applicable legislation.

**I CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 1, 2 and 3 ABOVE IS CORRECT. I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 6 OF PFMA SCM INSTRUCTION 03 OF 2021/22 ON PREVENTING AND COMBATING ABUSE IN THE SUPPLY CHAIN MANAGEMENT SYSTEM SHOULD THIS DECLARATION PROVE TO BE FALSE.**

.....  
Signature

.....  
Date

.....  
Position

.....  
Name of bidder

## SCHEDULE 6: PREFERENCE POINTS CLAIM FORM

### SBD 6.1

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

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

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

#### 1. GENERAL CONDITIONS

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

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

1.2 To be completed by the organ of state

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

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

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	80
SPECIFIC GOALS	20
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;
- (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 PREFERENCE POINT SYSTEMS

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

**80/20**

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

Where

$P_s$  = Points scored for price of tender under consideration

$P_t$  = Price of tender under consideration

$P_{\min}$  = Price of lowest acceptable tender

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

#### 3.2.1. POINTS AWARDED FOR PRICE

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

**80/20**

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

Where

$P_s$  = Points scored for price of tender under consideration

$P_t$  = Price of tender under consideration

$P_{\max}$  = Price of highest acceptable tender

## 4. POINTS AWARDED FOR SPECIFIC GOALS

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

4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 preference point system applies,



an organ of state must, in the tender documents, stipulate in the case of —

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

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

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

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

The specific goals allocated points in terms of this tender	Number of points allocated (80/20 system) (To be completed by the organ of state)	Number of points claimed (80/20 system) (To be completed by the tenderer)
Historically Disadvantaged Individuals Ownership	20% (4)	
Women Ownership	20% (4)	
Youth Ownership	10% (2)	
Disability Ownership	10% (2)	
Military Veterans Ownership	10% (2)	
Locality Ownership	30% (6)	
<b>TOTAL</b>	<b>100% (20)</b>	

- a) Service providers must submit proof of its Specific Goals points claimed / status of contributor.
- b) The Specific Goals supporting documents required to verify claimed points may inline with the specified requirements include:
  - Historically Disadvantaged Individuals Ownership: Proof of ownership (CIPRO certificate) with id no.
  - Women Ownership: Ownership: Proof of ownership (CIPRO certificate) with id no.
  - Youth Ownership: Ownership: Proof of ownership (CIPRO certificate) with id no.
  - Disability Ownership: Proof of ownership (CIPRO certificate) with valid medical documentary proof.
  - Military Veterans Ownership: Proof of ownership (CIPRO certificate) with valid proof of veteran status.
  - Locality Ownership: Proof of business address (municipal account or valid lease agreement)
  - Updated CSD report

## 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 authorized to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I acknowledge that:

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



.....  
**SIGNATURE(S) OF BIDDER(S)**

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

**DATE:** .....

**ADDRESS:** .....

.....

	SIGNATURE	DATE
REVIEWED BY:		14/02/2024
APPROVED BY RFQ SPECIFICATION COMMITTEE (CHAIRPERSON)		14/02/2024

Together, moving the health system forward

Fraud prevention line: 0800 701 701

