

REQUEST FOR QUOTATION – CUL 04/2016

RE-ADVERTISEMENT

PROVISION OF HYGIENE AUDITS FOR A PERIOD OF 12 MONTHS

1. Background

The Durban ICC is one of the most advanced conferencing facilities in the world, having been voted Africa's Leading Conference Centre by World Travel Awards for 14 years. The Centre has also obtained certification for ISO14001 (Environmental Management), ISO22000 (Food Safety), ISO9001 (Quality Management) which requires the implementation of a quality, safety and hygiene assurance system within the Durban ICC's food production facilities.

2. Purpose of the Request for Proposal

The Durban ICC requires a service provider to assist in implementing a quality, safety and hygiene assurance system within their food production facilities by means of hygiene audits being facilitated.

3. Mandatory Requirements

| Does the service provider comply with the Mandatory Requirements? Please tick as illustrated | Yes | No |
|---|-----|----|
| | ✓ | X |
| <ul style="list-style-type: none"> The service provider must be an internationally accredited laboratory through the South African National Accreditation System (SANAS) in compliance with ISO/IEC 17025. Please attach proof | | |
| <ul style="list-style-type: none"> The service provider's team should include only qualified microbiologists and food technologists in all key positions (Organogram and CV's of the team are to accompany this proposal) | | |
| <ul style="list-style-type: none"> The service provider is to serve as a member of the South African Association for Food Science and Technology (SAAFoST). Please attach proof | | |
| <ul style="list-style-type: none"> The service provider must have extensive field experience in HACCP and ISO 22000 systems and follows applicable food safety legislation and regulations including R962 of Act No. 54 of 1972 and SANS 10049 Food Hygiene Management. Please attach proof | | |
| Hygiene Audits | | |
| <ul style="list-style-type: none"> A hygiene audit report is to be compiled which reflects the results of the tests conducted | | |
| <ul style="list-style-type: none"> The hygiene audits are to be performed four (4) times per annum | | |
| <ul style="list-style-type: none"> Provide professional advice regarding microbiological, food safety and hygiene issues and recommendations for continuous improvement | | |

| | | |
|---|--|--|
| <p>The hygiene audits must cover the following key result areas:</p> <ul style="list-style-type: none"> o Bacteriological evaluation of all major processing areas and equipment including but not limited to swabbing or surfaces/equipment (Standard Plate Count) and refrigeration (Standard Plate Count, Yeasts and moulds and Listeria monocytogenes); o Staff Hygiene including but not limited to swabbing for Staphylococcus aureus and Escherichia coli; o Bacteriological evaluation of prepared foods (including but not limited to testing for Staphylococcus aureus, Escherichia coli, Salmonella spp, Clostridium perfringens, Standard Plate Count, Coliforms) o Supplier product evaluation; o Bacteriological evaluation of drinking water/ice in accordance with SANS 241; o Chemical application, cleaning and sanitising; o Refrigeration for food storage; o Temperature control; o Areas allied to production | | |
|---|--|--|

Please Note: Failure to meet all of the stipulated mandatory requirements will result in the service provider being deemed non-responsive and will not be evaluated further.

4. Preconditions

A written proposal/quotation will not be considered unless the service provider who submits the quotation provides the following with their proposal/quotation:

- 4.1 Full name.
- 4.2 Identification or company or other registration number.
- 4.3 Tax reference number and VAT number, if any.
- 4.4 Valid original Tax Clearance Certificate from the South African Revenue Services which proves that the service provider's tax matters are in order.
- 4.5 Valid BBBEE Certificate.
- 4.6 MBD 4 Declaration of Interest form must be completed.
- 4.7 Statement that the company's water, electricity and rates are up to date or formal payment arrangements have been made.

5. Terms and Conditions

It must be noted that the service provider assumes full risk when submitting bid proposals to the Durban ICC.

6. Requirements to submit quotations

- 6.1 All schedules in this document must be populated and will form part of the quotation.
- 6.2 A completed ICC Durban (Pty) Ltd supplier application form which is available for download from the Durban ICC website (www.icc.co.za). Alternatively, if the supplier is registered on the Durban ICC database, then the service provider need only submit their supplier number. All the mandatory documents must be included with this application.

7. THIS RFQ DOCUMENT CAN BE DOWNLOADED FROM THE VENDORS SECTION OF THE DURBAN ICC WEBSITE WWW.ICC.CO.ZA

8. Compulsory Pricing Schedule:

| Description | Quantity | Unit Price | Total Price (Quantity x Unit price) |
|--------------------------------|----------|------------|--|
| Provision of hygiene audits | 4 | R | R |
| Subtotal (VAT excl.) | | | R |
| VAT @ 14% | | | R |
| Grand Total (VAT Incl.) | | | R |

Note: The Durban ICC is not liable to make any deposit payments upfront.

I.....being duly authorized thereto by do hereby confirm that the information contained herein is true and correct and acknowledge that, should it be established that any of the information contained herein is false and incorrect, my company may be disqualified from quoting to the Durban ICC.

Signature: _____ **Date:** _____

Note: Failure of a Service Provider to complete and sign this page will invalidate the quotation.


9. Contact Person

Desmond Davies
desmond@icc.co.za
Tel: +27 31 360 1049
Executive Sous Chef

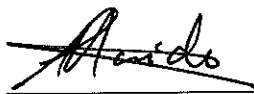
10. Closing Date

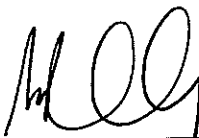
Quotations, together with this document and supplier registration forms are to be placed in a sealed envelope marked for the attention of the Procurement Department and are to be placed in the Tender Box at the Durban ICC security entrance on the ground floor, 45 Bram Fischer Road Durban before **12h00 on 29 April 2016**

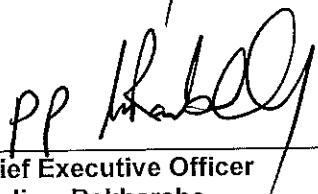
11. Request for proposals approved by:


Executive Head Chef
John Moatshe

 21/04/2016
SCM Compliance Officer
Ritesh Ramkissoon

 21/04/2016
SCM & Compliance Manager
Thenashree Naidoo

 21/4/16
Finance Director
Melanie Rambally

 21/4/16
Chief Executive Officer
Lindiwe Rakharebe



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DURBAN SOUTH AFRICA

12. Past experience in similar assignments

| Assignment Description | Key Elements | Duration | Contact Person and Telephone Number | Assignment Value |
|------------------------|--------------|----------|-------------------------------------|------------------|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

13. Declaration of Municipals Fees

I / we do hereby declare that the Municipal fees of the company:-

.....
 (Company Name)

are, as at the date of the quotation closing, fully paid up, or arrangements have been concluded with the Municipality to pay the said fees:

| Account | Account Number * |
|-------------|------------------|
| Electricity | |
| Water | |
| Rates | |
| | |

*** To be completed by Service Provider.**

I / we acknowledge that should it be found that Municipal fees are not up to date, the Council may take such remedial action as is required, including termination of contract and any income due to the Company shall be utilized to offset any monies due to the Council.

In addition to completion of the above – **please attach a copy of your Metro Bill**

Name: (Block Capitals)

Signature: _____ **Date:** _____
 (of person authorized to sign on behalf of the Tenderer)

14. MBD4 Declaration of Interest

No bid will be accepted from persons in the service of the state¹.

14.1 Any person, having a kinship with persons in the service of the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid. In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons connected with or related to persons in service of the state, it is required that the bidder or their authorised representative declare their position in relation to the evaluating/adjudicating authority.

14.2 In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

14.2.1 Full name of bidder or his/her representative

14.2.2 Identity number:

14.2.3 Position occupied in the Company (director, trustee, shareholder²):

14.2.4 Company Registration Number:

14.2.5 Tax Reference Number:

14.2.6 VAT Registration Number:

14.2.7 The names of all directors / trustees / shareholders members, their individual identity numbers and state employee numbers must be indicated in paragraph 4 below.

References:

¹ MSCM Regulations: "in the service of the state" means to be –

- (a) a member of –
 - any municipal council
 - any provincial legislature
 - the National Assembly or the National Council of Provinces
- (b) a member of the board of directors of any municipal entity;
- (c) an official of any municipality or municipal entity;
- (d) an employee of any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No.1 of 1999);
- (e) a member of the accounting authority of any national or provincial public entity;
- (f) an employee of parliament or a provincial legislature.

² "Shareholder" means a person who owns shares in the company and is actively involved in the management of the company or business and exercises control over the company.



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14.2.8 Are you presently in the service of the state?
If yes, furnish particulars:

| | |
|-----|----|
| YES | NO |
|-----|----|

14.2.9 Have you been in the service of the state for the past twelve months? If yes, furnish particulars:

| | |
|-----|----|
| YES | NO |
|-----|----|

14.2.10 Do you have any relationship (family, friend, other) with persons in the service of the state and who may be involved with the evaluation and/or adjudication of this bid?
If yes, furnish particulars:

| | |
|-----|----|
| YES | NO |
|-----|----|

14.2.11 Are you aware of any relationship (family, friend, other) between any other bidder and any persons in the service of the state who may be involved with the evaluation and/or adjudication of this bid? If yes, furnish particulars:

| | |
|-----|----|
| YES | NO |
|-----|----|

14.2.12 Are any of the company's directors, trustees, managers, principal shareholders or stakeholders in service of the state?
If yes, furnish particulars:

| | |
|-----|----|
| YES | NO |
|-----|----|

14.2.13 Is any spouse, child or parent of the company's directors, trustees, managers, principal shareholders or stakeholders in service of the state? If yes, furnish particulars:

| | |
|-----|----|
| YES | NO |
|-----|----|

14.2.14 Do you or any of the directors, trustees, managers, principal shareholders or stakeholders of this company have any interest in any other company or business whether or not they are bidding for this contract? If yes, furnish particulars:

| | |
|-----|----|
| YES | NO |
|-----|----|



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15. Full details of directors / trustees / members / shareholders

| Full Name | Identity Number | State Employee No. |
|-----------|-----------------|--------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

Signature

Date

Capacity

Name of Bidder