

**REQUEST FOR QUOTATION – CUL 12/2018**

**PREVENTATIVE SERVICE AND MAINTENANCE OF THE SALVIS COMBI STEAM OVENS FOR A PERIOD OF 8 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 the World Travel Awards for 16 years.

**2. Purpose**

The Durban ICC requires a service provider for the provision of preventative maintenance services for the Salvis Combi Steam Ovens currently in operation at the Centre, for a period of 8 months.

**3. Service requirements (but not limited to)**

The appointed service provider must be to perform the following:

- Full service of Salvis Combi steam oven components
- Cleaning or replacement of Salvis Combi steam oven air filters
- Service of Salvis roll in oven trollies and castors
- Upgrade of Salvis oven software if required
- Support response time of 4 hours (during normal work hours)

**4. Mandatory Requirements:**

- The service provider must have sufficient requisite experience in servicing equipment similar in nature and composition to the Salvis Combi Steam Ovens. Kindly attach at least one detailed reference from clients serviced.
- The service provider must have access to critical spares or equipment which may be required to undertake the service on this specific brand of equipment (foreign parts / spares will not be considered)
- Please attach a detailed schedule which illustrates the checks and services to be undertaken on a monthly basis.
- Considering the monetary value of these ovens and the facility as a whole, the service provider must have or intend acquiring 3rd party liabilities cover of minimum 5 million rand to compensate for any form of negligence / damage on the part of the appointed service provider. Kindly attach proof of insurance or letter of intent.

***Failure to comply with the mandatory requirements as illustrated above will result in the service provider being deemed non-responsive and not evaluated further.***

## 5. Preconditions

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

- 5.1 Full name
- 5.2 Identification or company or other registration number
- 5.3 Tax reference number and VAT number, if any
- 5.4 Valid original Tax clearance from South African Revenue Services which proves that the providers tax matters are in order
- 5.5 Valid BBBEE Certificate
- 5.6 MBD 4 Declaration of Interest form must be completed
- 5.7 The service provider must be registered on the CSD database and EThekweni Vendor Portal. Proof of registration needs to be submitted. Failure to be registered on these databases will adversely affect the awarding process and may result in the service provider being deemed non-responsive.

**CSD registration website:** <https://secure.csd.gov.za>

**EThekweni Vendor Portal registration:** <https://ethekwinivendor.durban.gov.za>

Or contact 031 322 7011 / 7154

[Fatima.milazi@durban.gov.za](mailto:Fatima.milazi@durban.gov.za) / [phumla.mdabe@durban.gov.za](mailto:phumla.mdabe@durban.gov.za)

## 6. Contact Person

Ritesh Ramkisson  
Tel: +27 31 360 1125  
[riteshr@icc.co.za](mailto:riteshr@icc.co.za)  
SCM Compliance Officer

## 7. 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 **26<sup>th</sup> February 2018**.

**8. Compulsory Pricing Schedule**

Description	Monthly service cost (VAT excl.)	Number of months	Total (Monthly service cost x 8 months)
Preventative maintenance plan for the Salvis Combi steam ovens	R	8 months	R
Please state any additional cost:			R
Total excl. VAT			R
14 % VAT			R
Total incl. VAT			R

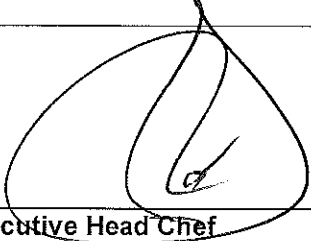

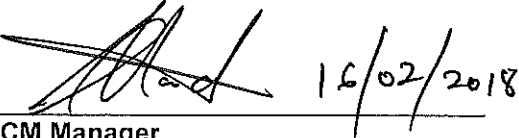
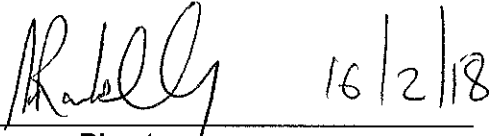
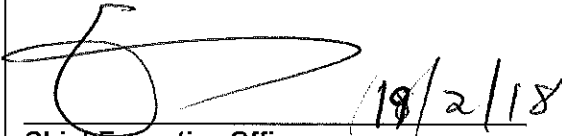
I.....being duly authorized thereto by ..... do hereby confirm that the information contained herein is true and correct and acknowledge that, should it be established that any of the information contained herein is false and incorrect, my company may be disqualified from quoting to the Durban ICC.

**Signature:**

**Date:**

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

9. Request for proposals approved by:


<b>Executive Head Chef</b> <b>John Moatshe</b>
 15/02/2018
<b>SCM Compliance Officer</b> <b>Ritesh Ramkissoon</b>
 16/02/2018
<b>SCM Manager</b> <b>Thenashree Naidoo</b>
 16/2/18
<b>Finance Director</b> <b>Melanie Rambally</b>
 18/2/18
<b>Chief Executive Officer</b> <b>Lindiwe Rakharebe</b>



10. Past experience in similar assignments

Assignment Description	Key Elements	Date Completed	Contact Person and Telephone Number	Assignment Value

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.

Name: (Block Capitals) \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**11. Declaration of Municipals Fees**

I, the undersigned, do hereby declare that the Municipal fees of

.....  
 (Full name of Company / Close Corporation / partnership / sole proprietary/Joint Venture)

(hereinafter referred to as the TENDERER) are, as at the date hereunder, fully paid or an Acknowledgement of Debt has been concluded with the Municipality to pay the said charges in instalments.

The following account details relate to property of the said TENDERER:

<u>Account</u>	<u>Account Number:</u> to be completed by tenderer.
Consolidated Account No.	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Electricity	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Water	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Rates	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Other	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Other	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

I acknowledge that should the aforesaid Municipal charges fall into arrears, the Municipality may take such remedial action as is required, including termination of any contract, and any payments due to the Service provider by the Municipality shall be first set off against such arrears.

- Where the TENDERER'S place of business or business interests are outside the jurisdiction of eThekweni Municipality, a copy of the accounts/agreements from the relevant municipality must be attached (to the back inside cover of this document).
- Where the tenderer's Municipal Accounts are part of their lease agreement, then a copy of the agreement, or official letter to that effect is to be attached (to the back inside cover of this document).

NAME : ..... (Block Capitals)

SIGNATURE : ..... DATE: .....  
 (of person authorised to sign on behalf of the Tenderer)

**12. MBD4 Declaration of Interest**

- 12.1 No bid will be accepted from persons in the service of the state<sup>1</sup>.
- 12.2 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.
- 12.3 In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.
  - 12.3.1 Full name of bidder or his/her representative .....
  - 12.3.2 Identity number: .....
  - 12.3.3 Position occupied in the Company (director, trustee, shareholder<sup>2</sup>):  
.....
  - 12.3.4 Company Registration Number: .....
  - 12.3.5 Tax Reference Number: .....
  - 12.3.6 VAT Registration Number: .....
  - 12.3.7 The names of all directors / trustees / shareholders members, their individual identity numbers and state employee numbers must be indicated in paragraph 4 below.

*References:*

<sup>1</sup> 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.

<sup>2</sup> "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.

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

YES	NO
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12.3.9 Have you been in the service of the state for the past twelve months?  
If yes, furnish particulars: 

YES	NO
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12.3.10 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
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12.3.11 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
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12.3.12 Are any of the company's directors, trustees, managers, principal shareholders or stakeholders in service of the state?  
If yes, furnish particulars: 

YES	NO
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12.3.13 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
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12.3.14 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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13. Full details of directors / trustees / members / shareholders

Full Name	Identity Number	State Employee No.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Capacity

\_\_\_\_\_  
Name of Bidder

