



# public works

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Department:

Public Works

**PROVINCE OF KWAZULU-NATAL**

WIMS NUMBER : 074365/0001

TENDER NO : ZNTU\_074365\_Civil\_PSP

DESCRIPTION OF SERVICE : THE APPOINTMENT OF PROFESSIONAL SERVICE PROVIDER, CIVIL ENGINEER, FOR WIMS 074365 – BENEDICTINE HOSPITAL AT NONGOMA, UPGRADE WATER RETICULATION

Directorate: North Coast Region  
Private Bag X 42  
LA and Administrative Complex  
Prince Mangosuthu Street  
ULUNDI  
3838

**PLEASE NOTE THAT THIS QUOTATION IS SUBJECT TO TREASURY REGULATIONS 16A ISSUED IN TERMS OF THE PUBLIC FINANCE MANAGEMENT ACT, 1999, THE KWAZULU-NATAL SUPPLY CHAIN MANAGEMENT POLICY FRAMEWORK AND THE GENERAL CONDITIONS OF CONTRACT PRESCRIBED BY PROVINCIAL TREASURY.**

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## SECTION A INVITATION TO BID

### DESCRIPTION:

### **THE APPOINTMENT OF PROFESSIONAL SERVICE PROVIDER, CIVIL ENGINEER, FOR WIMS 074365 – BENEDICTINE HOSPITAL AT NONGOMA, UPGRADE WATER RETICULATION**

WIMS Number: 074365/0001

CLOSING DATE: **22 April 2021**

CLOSING TIME: 11H00AM

Compulsory Briefing: None

Bid Document Amount: **R 0**

Tender documents will available at a non-refundable fee (CASH ONLY) payable at Finance Section, alternatively, a nonrefundable fee is to be deposited at the following banking details:

NAME: KZN PROV GOV- WORKS, BANK: ABSA, ACCOUNT NO:4072485515: ACCOUNT TYPE:CURRENT ACCOUNT,  
BRANCH:630495 (CHATTERTON ROAD), REFERENCE NUMBER:14019639NO QUOTATION DOCUMENT WILL BE ISSUED  
UNLESS A DEPOSIT SLIP/ PROOF OF PAYMENT IS PROVIDED.

Tender Validity: 84 Calendar Days

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The successful bidder will be required to fill in and sign a written Contract Form

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BID DOCUMENTS MAY BE POSTED TO

KZN Department of Public Works  
North Coast Region  
Administrative Building (1<sup>st</sup> Floor, Zone 1)  
Prince Mangosuthu Street  
**ULUNDI**  
3838

Tender Box 1

**Bidders should ensure that bids are delivered timeously to the correct address. If the bid is late, it will not be accepted for consideration.**

The bid box is generally open 8 hours a day, 5 days a week (normal office hours)

ALL QUOTATIONS MUST BE SUBMITTED ON THE OFFICIAL FORMS – (NOT TO BE RE-TYPED)

THIS QUOTATION IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2011.

<p align="center"><b>THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO MAY RESULT IN YOUR BID BEING DISQUALIFIED)</b></p>
---

NAME OF BIDDER .....

POSTAL ADDRESS .....

STREET ADDRESS .....

TELEPHONE NUMBER CODE.....NUMBER.....

CELLPHONE NUMBER .....

FACSIMILE NUMBER CODE .....NUMBER.....  
E-MAIL ADDRESS .....  
VAT REGISTRATION NUMBER .....  
SIGNATURE OF BIDDER .....  
DATE .....  
CAPACITY UNDER WHICH THIS BID IS SIGNED .....

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**ANY ENQUIRIES REGARDING THE BIDDING PROCEDURE MAY BE DIRECTED TO:**

Department : KZN - Department of Public Works  
Contact Person : Mandla Nkosi  
Tel : 035 8742080  
E-mail address : [Mandla.nkosi@kznworks.gov.za](mailto:Mandla.nkosi@kznworks.gov.za)

**ANY ENQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO:**

Department : KZN - Department of Public Works  
Contact Person : E Crafford  
Tel : 035 874 3349 / 0832754006  
E-mail address : [evertc@sivest.co.za](mailto:evertc@sivest.co.za)

## **SECTION B**

### **SPECIAL INSTRUCTIONS AND NOTICES TO BIDDERS REGARDING THE COMPLETION OF FORMS**

PLEASE NOTE THAT THIS QUOTATION IS SUBJECT TO TREASURY REGULATIONS 16A ISSUED IN TERMS OF THE PUBLIC FINANCE MANAGEMENT ACT, 1999, THE KWAZULU-NATAL SUPPLY CHAIN MANAGEMENT POLICY FRAMEWORK AND THE GENERAL CONDITIONS OF CONTRACT.

1. Unless inconsistent with or expressly indicated otherwise by the context, the singular shall include the plural and visa versa and with words importing the masculine gender shall include the feminine and the neuter.
2. Under no circumstances whatsoever may the quotation/bid forms be retyped or redrafted. Photocopies of the original bid documentation may be used, but an original signature must appear on such photocopies.
3. The bidder is advised to check the number of pages and to satisfy himself that none are missing or duplicated.
4. Quotation submitted must be complete in all respects.
5. Quotation shall be lodged at the address indicated not later than the closing time specified for their receipt, and in accordance with the directives in the bid documents.
6. Each quotation shall be addressed in accordance with the directives in the quotation documents and shall be lodged in a separate sealed envelope, with the name and address of the bidder, the bid number and closing date indicated on the envelope. The envelope shall not contain documents relating to any quotation other than that shown on the envelope. If this provision is not complied with, such quotations/bids may be rejected as being invalid.
7. All quotations received in sealed envelopes with the relevant bid numbers on the envelopes are kept unopened in safe custody until the closing time of the quotation/bids. Where, however, a quotation is received open, it shall be sealed. If it is received without a quotation/bid number on the envelope, it shall be opened, the quotation number ascertained, the envelope sealed and the quotation number written on the envelope.
8. A specific box is provided for the receipt of quotations, and no quotation found in any other box or elsewhere subsequent to the closing date and time of quotation will be considered.
9. No quotation/bid sent through the post will be considered if it is received after the closing date and time stipulated in the quotation documentation, and proof of posting will not be accepted as proof of delivery.
10. No quotation submitted by telefax, telegraphic or other electronic means will be considered.
11. Quotation documents must not be included in packages containing samples. Such quotations may be rejected as being invalid.
12. Any alteration made by the bidder must be initialed.
13. Use of correcting fluid is prohibited
14. Quotation will be opened in public as soon as practicable after the closing time of bid.
15. Where practical, prices are made public at the time of opening quotations.
16. If it is desired to make more than one offer against any individual item, such offers should be given on a photocopy of the page in question. Clear indication thereof must be stated on the schedules attached.

## **SECTION C**

### **REGISTRATION ON THE CENTRAL SUPPLIERS DATABASE**

- 1 In terms of the Public Finance Management Act (PFMA), 1999 (Act No 1 of 1999) Section 38 (1) (a) (iii) and 51 (1) (iii) and Section 76 (4) of PFMA National Treasury developed a single platform, The Central Supplier Database (CSD) for the registration of prospective suppliers including the verification functionality of key supplier information.
- 2 Prospective suppliers will be able to self-register on the CSD website: [www.csd.gov.za](http://www.csd.gov.za)
- 3 Once the supplier information has been verified with external data sources by National Treasury a unique supplier number and security code will be allocated and communicated to the supplier. Suppliers will be required to keep their data updated regularly and should confirm at least once a year that their data is still current and updated.
- 4 Suppliers can provide their CSD supplier number and unique security code to organs of state to view their verified CSD information.

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**CSD Number**

**SECTION D**  
**DECLARATION THAT INFORMATION ON CENTRAL SUPPLIER DATABASE IS CORRECT**  
**AND UP TO DATE**  
(To be completed by bidder)

THIS IS TO CERTIFY THAT I (name of bidder/authorised representative).....

....., WHO REPRESENTS (state name of bidder).....

.....

AM AWARE OF THE CONTENTS OF THE CENTRAL SUPPLIER'S DATABASE WITH RESPECT TO THE BIDDER'S DETAILS AND REGISTRATION INFORMATION, AND THAT THE SAID INFORMATION IS CORRECT AND UP TO DATE AS ON THE DATE OF SUBMITTING THIS QUOTATION/BID.

AND I AM AWARE THAT INCORRECT OR OUTDATED INFORMATION MAY BE A CAUSE FOR DISQUALIFICATION OF THIS QUOTATION/BID FROM THE BIDDING PROCESS, AND/OR POSSIBLE CANCELLATION OF THE CONTRACT THAT MAY BE AWARDED ON THE BASIS OF THIS BID.

.....

**NAME OF BIDDER**

.....

**SIGNATURE OF BIDDER OR AUTHORISED REPRESENTATIVE**

**DATE:**.....

## SECTION E DECLARATION OF INTEREST

1. Any legal person, including persons employed by the state<sup>1</sup>, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid (includes an advertised competitive bid, a limited bid, a proposal or written price quotation). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where-
  - the bidder is employed by the state; and/or
  - the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the bid.
  
2. **In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.**
  - 2.1 Full Name of bidder or his or her representative:  
.....
  - 2.2 Identity Number:.....
  - 2.3 Position occupied in the Company (director, trustee, shareholder<sup>2</sup>, member):  
.....
  - 2.4 Registration number of company, enterprise, close corporation, partnership agreement or trust:  
.....
  - 2.5 Tax Reference Number:  
.....
  - 2.6 VAT Registration Number:  
.....
  - 2.6.1 The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / PERSAL numbers must be indicated in paragraph 3 below.
  - 2.7 Are you or any person connected with the bidder presently employed by the state? **YES / NO**
  - 2.7.1 If so, furnish the following particulars:

<sup>1</sup>"State" means –

- (a) 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);
- (b) any municipality or municipal entity;
- (c) provincial legislature;
- (d) national Assembly or the national Council of provinces; or
- (e) Parliament.

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



Name of person / director / trustee / shareholder/ member: .....

Name of state institution at which you or the person  
connected to the bidder is employed : .....

Position occupied in the state institution: .....

Any other particulars:  
.....  
.....  
.....

2.7.2 If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector? **YES / NO**

2.7.2.1 If yes, did you attach proof of such authority to the bid document? **YES / NO**

(Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the bid.

2.7.2.2 If no, furnish reasons for non-submission of such proof:  
.....  
.....  
.....

2.8 Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses conduct business with the state in the previous twelve months? **YES / NO**

2.8.1 If so, furnish particulars:  
.....  
.....  
.....

2.9 Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this bid? **YES / NO**

2.9.1 If so, furnish particulars.  
.....  
.....  
.....

2.10 Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this bid? **YES/NO**

2.10.1 If so, furnish particulars.  
.....  
.....  
.....

2.11 Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract? **YES/NO**

2.11.1 If so, furnish particulars:

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

**3 Full details of directors / trustees / members / shareholders.**

Full Name	Identity Number	Personal Income Tax Reference Number	State Employee Number / Persal Number

**4 DECLARATION**

I, THE UNDERSIGNED (NAME).....

CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 2 and 3 ABOVE IS CORRECT.  
I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME SHOULD THIS

DECLARATION PROVE TO BE FALSE.

.....  
**Signature**

.....  
**Date**

.....  
**Position**

.....  
**Name of bidder**

**SECTION F  
FORM OF OFFER AND ACCEPTANCE**

**Offer**

The Employer, identified in the acceptance signature block, has solicited offers to enter into a contract for the procurement of:

**THE APPOINTMENT OF PROFESSIONAL SERVICE PROVIDER, CIVIL ENGINEER, FOR  
WIMS 074365 – BENEDICTINE HOSPITAL AT NONGOMA, UPGRADE WATER  
RETICULATION**

The tenderer, identified in the offer signature block, has examined the documents listed in the Tender Data and addenda thereto as listed in the returnable schedules, and by submitting this offer has accepted the conditions of tender.

By the representative of the tenderer, deemed to be duly authorized, signing this part of this form of offer and acceptance, the tenderer offers to perform all of the obligations and liabilities of the Service Provider under the Contract including compliance with all its terms and conditions according to their true intent and meaning for remuneration to be determined in accordance with the conditions of Contract identified in the Contract Data.

**The offered price inclusive of value added tax, is**

**R** ..... (in figures)

.....

..... **Rand** (in words)

This offer may be accepted by the Employer by signing the acceptance part of this form of offer and acceptance and returning one copy of this document to the tenderer before the end of the period of validity stated in the Tender Data, whereupon the tenderer becomes the party named as the Service Provider in the conditions of Contract identified in the Contract Data.

**THIS OFFER IS MADE BY THE FOLLOWING LEGAL ENTITY: (cross out block which is not applicable)**

Company or close corporation:

.....  
.....

and: whose registration number is:

.....

and: whose income tax reference number is:

.....

Natural person or partnership:

.....  
.....

**OR** whose identity number(s) is/are:

.....

whose income tax reference number is/are:

.....

**AND WHO IS** (if applicable):

Trading under the name and style of: .....

**AND WHO IS:**

Represented herein, and who is duly authorised to do so, by:  Mr/Mrs/Ms: .....  In his/her capacity as:  .....	<b>Note:</b>  A resolution / power of attorney, signed by all the directors / members / partners of the legal entity must accompany this offer, authorising the representative to make this offer.
--	--

**SIGNED FOR THE TENDERER:**

Name of representative	Signature	Date

**WITNESSED BY:**

Name of witness	Signature	Date

The tenderer elects as its *domicilium citandi et executandi* in the Republic of South Africa, where any and all legal notices may be served, as (physical address):

.....

.....

**Other contact details of the Tenderer are:**

Telephone no: ..... Cellular phone no: .....

Fax no: .....

Postal address: .....

Banker: ..... Branch: .....

**Acceptance**

By signing this part of this form of offer and acceptance, the Employer identified below accepts the tenderer's offer. In consideration thereof, the Employer shall pay the Service Provider the amount due in accordance with the conditions of Contract identified in the Contract Data. Acceptance of the tenderer's offer shall form an agreement between the Employer and the tenderer upon the terms and conditions contained in this agreement and in the Contract that is the subject of this agreement.

The terms of the Contract are contained in:

- Part C1 Agreements and Contract Data, (which includes this agreement)
- Part C2 Pricing Data
- Part C3 Scope of Services

and documents or parts thereof, which may be incorporated by reference into Parts C1 to C3 above.

Deviations from and amendments to the documents listed in the Tender Data and any addenda thereto as listed in the tender schedules as well as any changes to the terms of the offer agreed by the tenderer and the Employer during this process of offer and acceptance, are contained in the schedule of deviations attached to and forming part of this agreement. No amendments to or deviations from set documents are valid unless contained in this schedule.

The tenderer shall within two weeks after receiving a completed copy of this agreement, including the schedule of deviations (if any), contact the Employer's agent (whose details are given in the Contract Data) to arrange the delivery of any bonds, guarantees, proof of insurance and any other documentation to be provided in terms of the conditions of Contract identified in the Contract Data. Failure to fulfil any of these obligations in accordance with those terms shall constitute a repudiation of this agreement.

Notwithstanding anything contained herein, this agreement comes into effect, if sent by registered post, 4 days from the date on which it was posted, if delivered by hand, on the day of delivery, provided that it has been delivered during ordinary business hours, or if sent by fax, the first business day following the day on which it was faxed. Unless the tenderer (now Service Provider) within seven working days of the date of such submission notifies the Employer in writing of any reason why he cannot accept the contents of this agreement, this agreement shall constitute a binding contract between the Parties.

**For the Employer:**

Name of signatory	Signature	Date

<b>Name of Organisation:</b>	Department of Public Works
<b>Address of organisation:</b>	

**Witnessed by:**

Name of witness	Signature	Date

## **SECTION G SPECIFICATIONS AND EVALUATION**

### **THE APPOINTMENT OF PROFESSIONAL SERVICE PROVIDER, CIVIL ENGINEER, FOR WIMS 074365 – BENEDICTINE HOSPITAL AT NONGOMA, UPGRADE WATER RETICULATION**

#### **1. BACKGROUND**

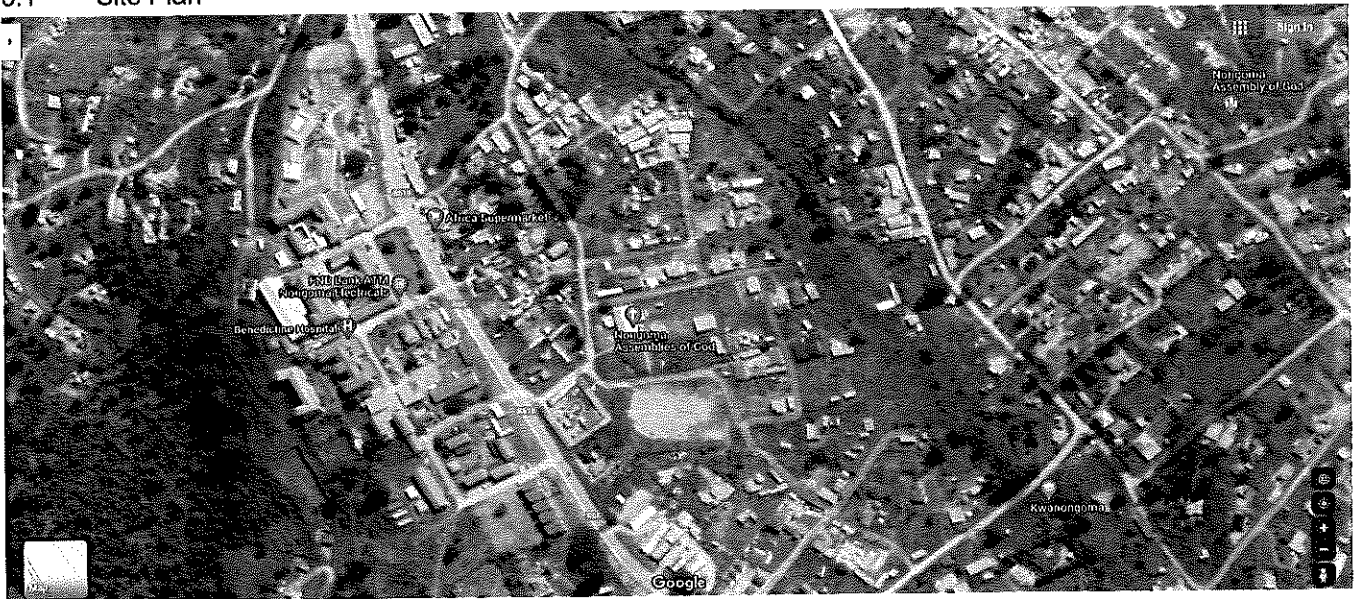
The Benedictine Hospital is located in the North Coast Region, Zululand District Municipality, within Nongoma Local Municipality, with GPS Co-ordinates -27.892995, 31.639668

#### **2. PURPOSE**

To appoint a Professional Service Provider, Civil Engineer, to undertake FIDPM implementation stages 2 to 8 for the project.

#### **3. SCOPE OF WORK/SPECIFICATION**

##### **3.1 Site Plan**



### 3.2 Scope of Works

#### a) Implementation of the Project as per FIDPM Stage requirements **(Refer to Appendix C)**

<ul style="list-style-type: none"> <li>• Stage 2 – Project Feasibility Assessment and Concept Design – Approval by the Department of Health – HIAC committee</li> <li>• Stage 3 – Detailed Design – Approval by the Department of Health – HIAC committee and Department of Public Works (DRC)</li> <li>• Stage 4 – Tender Document Production – Approval by the Department of Health – HIAC committee</li> </ul>	4 Months
<ul style="list-style-type: none"> <li>• Stage 5 – Construction Monitoring</li> </ul>	6 months
<ul style="list-style-type: none"> <li>• Stage 6 – Retention Period</li> </ul>	12 months
<ul style="list-style-type: none"> <li>• Stage 7 – Project handover</li> <li>• Stage 8 – Project Closeout</li> </ul>	1 month

### 3.3 Prising Schedule to be complete by bidder and transfer to form of offer

The prising schedule should include all activates to be performed by the Professional Service Providers for FIDPM stage 2 – 8 as outlined for remunerations in line with duties of the Gazetted

- Civil Engineer- ECSA Gazette 34875 Board Notice 206 of 2011

Disbursement reimbursement in accordance with the prevailing tariffs laid down by National Department of Public Works will be made in respect of the costs of copies of drawings and of typing and copying of Reports and Specifications but not for typing and copying of minutes of meetings, general correspondence, payments, postage, etc.

Reimbursement in accordance with the prevailing tariffs laid down by National Department of Public Works will be made in respect of travel costs.

Please note that travelling costs may only be claimed when the site of the Works is beyond a 50 kilometre radius from your place of practice or when, for official purposes, the return trip exceeds 50 kilometres.

Traveling reimbursement is as per National Department of Public Works rates, table 3, and should not exceed the vehicle capacity of 2150cc

NO.	DESCRIPTION	Item	% Fees	AMOUNT
Estimated Construction Cost R 4,000,000 (excluding VAT)				
1	Civil Engineer fees based on ECSA Gazette 34875 Board Notice 206 of 2011	R 4,000,000	%	R
2	Detailed Topographic Survey and as built survey of all buildings onsite	Max of 50 hours	Item	R
Subtotal				
Vat @ 15%				
TOTAL (To Form of Offer)				

**Disbursements in respect of all travelling and related expenses** are excluded in the price



### 3. CONDITIONS OF APPOINTMENT

- 3.1 All returnable documents as listed on Section B herein. Failure to submit all the requested documents could result in the quote not being considered
- 3.2 Your detailed organogram is to provide details of the various **Registered Professionals** who will be dedicated to this project as well details of who will lead the team as in this case. Approval must be made in writing to the Department for any replacement of the designated professional/s.
- 3.3 Appointment will be as per Departmental Standard Conditions of Appointment

## PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2017

This preference form must form part of all bids invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (B-BBEE) Status Level of Contribution

**NB: BEFORE COMPLETING THIS FORM, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF B-BBEE, AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.**

### 1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to all bids:

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

1.2

- a) The value of this bid is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the .....80/20..... preference point system shall be applicable; or
- b) The 80/20 preference point system will be applicable to this tender

1.3 Points for this bid shall be awarded for:

- (a) Price; and
- (b) B-BBEE Status Level of Contributor.

1.4 The maximum points for this bid are allocated as follows:

	POINTS
PRICE	
B-BBEE STATUS LEVEL OF CONTRIBUTOR	
Total points for Price and B-BBEE must not exceed	100

1.5 Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the bid, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.

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

## 2. DEFINITIONS

- (a) **“B-BBEE”** means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic Empowerment Act;
- (b) **“B-BBEE status level of contributor”** means the B-BBEE status of an entity in terms of a code of good practice on black economic empowerment, issued in terms of section 9(1) of the Broad-Based Black Economic Empowerment Act;
- (c) **“bid”** means a written offer in a prescribed or stipulated form in response to an invitation by an organ of state for the provision of goods or services, through price quotations, advertised competitive bidding processes or proposals;
- (d) **“Broad-Based Black Economic Empowerment Act”** means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003);
- (e) **“EME”** means an Exempted Micro Enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (f) **“functionality”** means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- (g) **“prices”** includes all applicable taxes less all unconditional discounts;
- (h) **“proof of B-BBEE status level of contributor”** means:
- |    |   |                       |
|----|---|-----------------------|
| 1) | certificate issued by an authorized body or person; | B-BBEE Status level   |
| 2) | prescribed by the B-BBEE Codes of Good Practice;    | A sworn affidavit as  |
| 3) | prescribed in terms of the B-BBEE Act;              | Any other requirement |
- (i) **“QSE”** means a qualifying small business enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (j) **“rand value”** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

## 3. POINTS AWARDED FOR PRICE

### THE 80/20 PREFERENCE POINT SYSTEM

A maximum of 80 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 bid under consideration
- $P_t$  = Price of bid under consideration
- $P_{\min}$  = Price of lowest acceptable bid

## POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR

In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for attaining the B-BBEE status level of contribution in accordance with the table below:

B-BBEE Status Level of Contributor	Number of points (80/20 system)
1	20
2	18
3	14
4	12
5	8
6	6
7	4
8	2
Non-compliant contributor	0

## BID DECLARATION

Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:

### B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED:

B-BBEE Status Level of Contributor: . = .....(maximum of 20 points)

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.

## 4. SUB-CONTRACTING

4.1 Will any portion of the contract be sub-contracted?

(*Tick applicable box*)

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

4.1.1 If yes, indicate:

- What percentage of the contract will be subcontracted.....%
- The name of the sub-contractor.....
- The B-BBEE status level of the sub-contractor.....
- Whether the sub-contractor is an EME or QSE

(Tick applicable box)

YES		NO	
-----	--	----	--

- v) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations, 2017:

Designated Group: An EME or QSE which is at least 51% owned by:	EME ✓	QSE ✓
Black people		
Black people who are youth		
Black people who are women		
Black people with disabilities		
Black people living in rural or underdeveloped areas or townships		
Cooperative owned by black people		
Black people who are military veterans		
<b>OR</b>		
Any EME		
Any QSE		

## 5. DECLARATION WITH REGARD TO COMPANY/FIRM

5.1 Name of company/firm:.....

5.2 VAT registration number:.....

5.3 Company registration number:.....

5.4 TYPE OF COMPANY/ FIRM

- ☐ Partnership/Joint Venture / Consortium
- ☐ One person business/sole propriety
- ☐ Close corporation
- ☐ Company
- ☐ (Pty) Limited

[TICK APPLICABLE BOX]

5.5 DESCRIBE PRINCIPAL BUSINESS ACTIVITIES

.....

.....

.....

.....

5.6 COMPANY CLASSIFICATION

- ☐ Manufacturer
- ☐ Supplier
- ☐ Professional service provider
- ☐ Other service providers, e.g. transporter, etc.

[TICK APPLICABLE BOX]

5.7 Total number of years the company/firm has been in business:.....

5.8 I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we 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 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;
- iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have –
  - (a) disqualify the person from the bidding 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 bidder or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted by the National Treasury 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

(b)

<p>WITNESSES</p> <p>1. ....</p> <p>2. ....</p>
--

<p>.....</p> <p>SIGNATURE(S) OF BIDDERS(S)</p> <p>DATE:</p> <p>.....</p> <p>ADDRESS</p> <p>.....</p> <p>.....</p>
---

**SECTION H**  
**OFFICIAL BRIEFING SESSION/SITE INSPECTION CERTIFICATE**

**WIMS NUMBER** : 074365/0001

**TENDER NO** : ZNTU\_074365\_Civil\_PSP

**DESCRIPTION OF SERVICE** : THE APPOINTMENT OF PROFESSIONAL SERVICE PROVIDER, CIVIL ENGINEER, FOR WIMS 074365 – BENEDICTINE HOSPITAL AT NONGOMA, UPGRADE WATER RETICULATION

**Date** : None

**Time** : N/A

**Venue** : N/A

\*\*\*\*\*

THIS IS TO CERTIFY THAT (NAME) .....

ON BEHALF OF .....

VISITED AND INSPECTED THE SITE ON .....(DATE)

AND IS THEREFORE FAMILIAR WITH THE CIRCUMSTANCES AND THE SCOPE OF THE SERVICE TO BE RENDERED.

.....  
**SIGNATURE OF BIDDER OR AUTHORISED REPRESENTATIVE**  
(PRINT NAME)

**DATE:** .....

.....  
**SIGNATURE OF DEPARTMENTAL REPRESENTATIVE**  
(PRINT NAME)

.....  
**DEPARTMENTAL STAMP :**  
(OPTIONAL)

**DATE:** .....

## SECTION I

### TAX COMPLIANCE STATUS (TCS)

- 1 The State / Province may not award a contract resulting from the invitation of quotations to a bidder who is not properly registered and up to date with tax payments or, has not made satisfactory arrangements with S A Revenue Services concerning due tax payments.
- 2 The South African Revenue Services (SARS) has phased out the issuing of paper Tax Clearance Certificates. From 18 April 2016 SARS introduced an enhanced Tax Compliance system. The new system allows taxpayers to obtain a Tax Compliance Status (TCS) PIN, which can be utilized by authorized third parties to verify taxpayers' compliance status on line via SARS e-filing.
- 3 Bidders are required to apply via e-filing at any SARS branch office nationally. The Tax Compliance Status (TCS) requirements are also available to foreign bidders / individuals who wish to submit bids.
- 4 SARS will then furnish the bidder with a Tax Compliance Status (TCS) **PIN** that will be valid for a period of 1 (one) year from the date of approval.
- 5 In bids where Consortia / Joint Venture / Sub-contractors are involved, each party must submit a separate Tax Compliance Status (TCS) **PIN**.
- 6 Application for Tax Compliance Status (TCS) **PIN** can be done via e-filing at any SARS branch office nationally or on the website [www.sars.gov.za](http://www.sars.gov.za).
- 7 Tax Clearance Certificates may be printed via e-filing. In order to use this provision, taxpayers will need to register with SARS as eFilers through the website [www.sars.gov.za](http://www.sars.gov.za).
- 8 Tax Compliance Status is not required for services below R30 000 ITO Practice Note Number: SCM 13 of 2007.
- 9 Kindly either provide an original tax clearance certificate, your tax number or pin number.

**TAX NUMBER**

--



SECTION 1

**A.**  
**A.COMPANIES**

**AUTHORITY BY BOARD OF DIRECTORS**

(Name of Company) .....

**IN HIS/HER CAPACITY AS:** .....

**SIGNATURE OF SIGNATORY:** ..... **DATE:** .....

**WITNESSES:** 1 \_\_\_\_\_

2 .....

I, the undersigned..... hereby confirm that I am the sole owner of the  
business trading as .....

.....

DATE \_\_\_\_\_

**C. PARTNERSHIP**

The following particulars in respect of every partner must be furnished and signed by every partner:

Full name of partner	Residential address	Signature
.....	.....	.....
.....	.....	.....
.....	.....	.....
.....	.....	.....

We, the undersigned partners in the business trading as.....  
hereby authorized .....to sign this bid as well as any contract resulting  
from the bid and any other documents and correspondence in connection with this bid and /or contract on behalf of

..... <b>SIGNATURE</b> (PRINT NAME)	..... <b>SIGNATURE</b> (PRINT NAME)	..... <b>SIGNATURE</b> (PRINT NAME)
---	---	---

..... <b>DATE</b>	..... <b>DATE</b>	..... <b>DATE</b>
----------------------	----------------------	----------------------

**D. CLOSE CORPORATION**

In the case of a close corporation submitting a bid, a certified copy of the Founding Statement of such corporation shall be included with the bid, together with the resolution by its members authorising a member or other official of the corporation to sign the documents on their behalf.

By resolution of members at a meeting on ..... 20..... at .....

.....Mr/Mrs/Miss....., whose  
signature appears below, has been authorised to sign all documents in connection with this bid on behalf of (Name  
of Close Corporation) .....

.....  
**SIGNED ON BEHALF OF CLOSE CORPORATION:** ..... (PRINT NAME)

**IN HIS/HER CAPACITY AS** ..... **DATE:** .....

**SIGNATURE OF SIGNATORY:** .....

**WITNESSES:** 1 .....

2 .....

**E CO-OPERATIVE**

A certified copy of the Constitution of the co-operative must be included with the bid, together with the resolution by its members authoring a member or other official of the co-operative to sign the bid documents on their behalf.

By resolution of members at a meeting on ..... 20..... at .....  
Mr/Mrs/Miss....., whose signature appears below, has been  
authorised to sign all documents in connection with this bid on behalf of (Name of co-  
operative).....

**SIGNATURE OF AUTHORISED REPRESENTATIVE/SIGNATORY:**  
(PRINT NAME)

.....

**IN HIS/HER CAPACITY AS:**.....

**DATE:** .....

**SIGNED ON BEHALF OF CO-OPERATIVE:**.....

**NAME IN BLOCK LETTERS:**.....

**WITNESSES:** 1 .....

2 .....

**F JOINT VENTURE**

If a bidder is a joint venture, a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of the enterprises, authorising the representatives who sign this bid to do so, as well as to sign any contract resulting from this bid and any other documents and correspondence in connection with this bid and/or contract on behalf of the joint venture must be submitted with this bid, before the closing time and date of the bid.

**AUTHORITY TO SIGN ON BEHALF OF THE JOINT VENTURE**

By resolution/agreement passed/reached by the joint venture partners on.....20.....

Mr/Mrs/Miss....., Mr/Mrs/Miss.....,

Mr/Mrs/Miss.....and Mr/Mrs/Miss.....  
(whose signatures appear below) have been duly authorised to sign all documents in connection with this bid on behalf of:

(Name of Joint Venture).....

**IN HIS/HER CAPACITY AS:**.....

**SIGNED ON BEHALF OF (COMPANY NAME):**.....  
(PRINT NAME)

**SIGNATURE :**..... **DATE:**.....

**IN HIS/HER CAPACITY AS:**.....

**SIGNED ON BEHALF OF (COMPANY NAME):**.....  
(PRINT NAME)

**SIGNATURE:**..... **DATE:**.....

**IN HIS/HER CAPACITY AS:**.....

**SIGNED ON BEHALF OF (COMPANY NAME):**.....  
(PRINT NAME)

**SIGNATURE:**..... **DATE:**.....

**IN HIS/HER CAPACITY AS:**.....

**SIGNED ON BEHALF OF (COMPANY NAME):**.....  
(PRINT NAME)

**SIGNATURE:**..... **DATE:**.....

**G. CONSORTIUM**

If a bidder is a consortium, a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of concerned enterprises, authorising the representatives who sign this bid to do so, as well as to sign any contract resulting from this bid and any other documents and correspondence in connection with this bid and/or contract on behalf of the consortium must be submitted with this bid, before the closing time and date of the bid.

**AUTHORITY TO SIGN ON BEHALF OF THE CONSORTIUM**

By resolution/agreement passed/reached by the consortium on.....20...

Mr/Mrs/Miss.....  
(whose signature appears below) have been duly authorised to sign all documents in connection with this bid on behalf of:

(Name of Consortium).....

**IN HIS/HER CAPACITY AS:**.....

**SIGNATURE:**..... **DATE:**.....  
(PRINT NAME)

**SECTION K**  
**DECLARATION OF BIDDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES**  
 (To be completed by Bidder.)

- 1 This Standard Bidding Document must form part of all bids invited.
- 2 It serves as a declaration to be used by institutions in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
- 3 The bid of any bidder may be disregarded if that bidder, or any of its directors have-
  - a. abused the institution's supply chain management system;
  - b. committed fraud or any other improper conduct in relation to such system; or
  - c. failed to perform on any previous contract.
- 4 In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

Item	Question	Yes	No
4.1	<p>Is the bidder or any of its directors listed on the National Treasury's Database of Restricted Suppliers as companies or persons prohibited from doing business with the public sector?</p> <p>(Companies or persons who are listed on this Database were informed in writing of this restriction by the Accounting Officer/Authority of the institution that imposed the restriction after the <i>audi alteram partem</i> rule was applied).</p> <p><b>The Database of Restricted Suppliers now resides on the National Treasury's website(<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) and can be accessed by clicking on its link at the bottom of the home page.</b></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.1.1	If so, furnish particulars:		
4.2	<p>Is the bidder or any of its directors listed on the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004)?</p> <p><b>The Register for Tender Defaulters can be accessed on the National Treasury's website (<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) by clicking on its link at the bottom of the home page.</b></p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.2.1	If so, furnish particulars:		

4.3	Was the bidder or any of its directors convicted by a court of law (including a court outside of the Republic of South Africa) for fraud or corruption during the past five years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.3.1	If so, furnish particulars:		
4.4	Was any contract between the bidder and any organ of state terminated during the past five years on account of failure to perform on or comply with the contract?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.4.1	If so, furnish particulars:		

### CERTIFICATION

I, THE UNDERSIGNED (FULL NAME).....

CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS TRUE AND CORRECT.

I ACCEPT THAT, IN ADDITION TO CANCELLATION OF A CONTRACT, ACTION MAY BE TAKEN AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

.....  
**Signature**

.....  
**Date**

.....  
**Position**

.....  
**Name of Bidder**

## SECTION L CERTIFICATE OF INDEPENDENT BID DETERMINATION

- 1 This Standard Bidding Document (SBD) must form part of all bids<sup>1</sup> invited.
- 2 Section 4 (1) (b) (iii) of the Competition Act No. 89 of 1998, as amended, prohibits an agreement between, or concerted practice by, firms, or a decision by an association of firms, if it is between parties in a horizontal relationship and if it involves collusive bidding (or bid rigging).<sup>2</sup> Collusive bidding is a *pe se* prohibition meaning that it cannot be justified under any grounds.
- 3 Treasury Regulation 16A9 prescribes that accounting officers and accounting authorities must take all reasonable steps to prevent abuse of the supply chain management system and authorizes accounting officers and accounting authorities to:
  - a. disregard the bid of any bidder if that bidder, or any of its directors have abused the institution's supply chain management system and or committed fraud or any other improper conduct in relation to such system.
  - b. cancel a contract awarded to a supplier of goods and services if the supplier committed any corrupt or fraudulent act during the bidding process or the execution of that contract.
- 4 This SBD serves as a certificate of declaration that would be used by institutions to ensure that, when bids are considered, reasonable steps are taken to prevent any form of bid-rigging.
- 5 In order to give effect to the above, the attached Certificate of Bid Determination (SBD 9) must be completed and submitted with the bid:

<sup>1</sup> Includes price quotations, advertised competitive bids, limited bids and proposals.

<sup>2</sup> Bid rigging (or collusive bidding) occurs when businesses, that would otherwise be expected to compete, secretly conspire to raise prices or lower the quality of goods and / or services for purchasers who wish to acquire goods and / or services through a bidding process. Bid rigging is, therefore, an agreement between competitors not to compete.



I, the undersigned, in submitting the accompanying bid:

---

(Bid Number and Description)

in response to the invitation for the bid made by:

---

(Name of Institution)

do hereby make the following statements that I certify to be true and complete in every respect:

I certify, on behalf of: \_\_\_\_\_ that:

(Name of Bidder)

1. I have read and I understand the contents of this Certificate;
2. I understand that the accompanying bid will be disqualified if this Certificate is found not to be true and complete in every respect;
3. I am authorized by the bidder to sign this Certificate, and to submit the accompanying bid, on behalf of the bidder;
4. Each person whose signature appears on the accompanying bid has been authorized by the bidder to determine the terms of, and to sign the bid, on behalf of the bidder;
5. For the purposes of this Certificate and the accompanying bid, I understand that the word "competitor" shall include any individual or organization, other than the bidder, whether or not affiliated with the bidder, who:
  - (a) has been requested to submit a bid in response to this bid invitation;
  - (b) could potentially submit a bid in response to this bid invitation, based on their qualifications, abilities or experience; and
  - (c) provides the same goods and services as the bidder and/or is in the same line of business as the bidder
6. 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>3</sup> will not be construed as collusive bidding.
7. In particular, without limiting the generality of paragraphs 6 above, there has been no consultation, communication, agreement or arrangement with any competitor regarding:
  - (a) prices;
  - (b) geographical area where product or service will be rendered (market allocation)
  - (c) methods, factors or formulas used to calculate prices;
  - (d) the intention or decision to submit or not to submit, a bid;
  - (e) the submission of a bid which does not meet the specifications and conditions of the bid;  
or
  - (f) bidding with the intention not to win the bid.

8. In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications and conditions or delivery particulars of the products or services to which this bid invitation relates.
9. 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.
10. 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.

.....  
Signature

.....  
Date

.....  
Position

.....  
Name of Bidder

<sup>3</sup> Joint venture or Consortium means an association of persons for the purpose of combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.

## APPENDIX A – RETURNABLE DOCUMENTS

CHECKLIST OF RETURNABLE DOCUMENTS			
Item No.	Required Document	Tick	
		Y	N
1.	Valid SARS Tax Clearance Pin Number, Tax number or original tax Clearance certificate		
2.	Central Supplier Database Registration with National Treasury (Unique Reference Number & Supplier Number)		
3.	Proof of Registration with Council / Professional Body (Attach Letter of Good standing with the relevant council if applicable dated during the year of Quotation)		
4.	Proof of Registration with Companies and Intellectual Property Commission (CIPC) (printout not older than 1 month)		
5.	Declaration of interest by Consultant – SBD 4		
6.	Declaration of bidders Past Supply Chain Management practice – SBD 8		
7.	Certificate of Independent Bid Determination – SBD 9		
8.	Original certified copy of BBBEE Certificate		
9.	Proof of Residential Address (Municipality Rates Bills, Telephone Bill, or current lease agreement or affidavit from Commissioner of oaths, if office is in an area where rates are not paid)		
10.	Proof of the relevant professional Indemnity Insurance		
11.	Company Profile, and Detailed CV and Experience on <b>Department of Health</b> related projects		

### **TENDERERS TO NOTE**

**Submission of the above returnable documents is mandatory. Failure to submit all the requested documents will result in the tender not being considered**

**All returnable documents (with the exception of the quotation letter) must be certified by the commissioner of oath and must not be older than 3 (three) months old from the date of request for quotation**

## APPENDIX B – CONTRACT DATA

### C1.2 Contract Data

#### C1.2.1 Standard Professional Services Contract

The conditions applicable to this Contract are the **Standard Professional Services Contract (August 2005)** Second Edition of CIDB document 1015, published by the Construction Industry Development Board.

#### C1.2.2 Data provided by the Employer

Clause	
	<p>The General Conditions of Contract in the Standard Professional Services Contract (August 2005) make several references to the Contract Data for details that apply specifically to this tender. The Contract Data shall have precedence in the interpretation of any ambiguity or inconsistency between it and the General Conditions of Contract.</p> <p>Each item of data given below is cross-referenced to the clause in the General Conditions of Contract to which it mainly applies.</p>
1	The Employer is the <b>Department of Public Works.</b>
1	The Period of Performance is from inception of this Contract for period on <b>24</b> months / completion of SIPDM Stage 9, which ever come first.
1	The Scope is: <b>THE APPOINTMENT OF PROFESSIONAL SERVICE PROVIDER, CIVIL ENGINEER, FOR WIMS 074365 – BENEDICTINE HOSPITAL AT NONGOMA, UPGRADE WATER RETICULATION</b>
3.4 and 4.3.2	The authorised and designated representative of the Employer is the departmental project manager, details of whom are as indicated in T1.1 Notice and Invitation to Tender under item T1.1.4.
3.4.1	Communication by e-mail is not permitted.
3.5	<p>The Services shall be executed in the Department of Public Works, North Coast Regional Office, in Ulundi.</p> <p>No portion of the work may be performed by a person employed by the State. No portion of the work may be sublet to any other person or persons without the prior written approval of the Employer.</p>
3.6	Omit the following: “... within two (2) years of completion of the Service ...”.
3.14	Programme of Works, No applicable
4.1.1	Briefing meeting: <b><u>None</u></b>
4.4	Others providing Services: Survey and Geotechnical Investigation.
5.4.1	Minimum professional insurance cover of R2 million, with the first amount payable not exceeding 5% of the value of indemnity, and/or personal liability – all as more comprehensively described in C1.2.3 Data provided by the Service Provider and in respect of which the Service Provider must provide data as required.

5.5	<p>The Service Provider is required to obtain the Employer's prior approval in writing before taking any of the following actions:</p> <ol style="list-style-type: none"> <li>1. Travelling for which payment will be claimed, as defined in C2.1.7 Travelling and subsistence arrangements and tariffs of charges;</li> <li>2. Deviate from the scope of works in 2.1 and 2.2</li> <li>3. Change Key Personnel on the Service.</li> </ol>
8.1	The Service Provider is to commence the performance of the Services immediately after the Contract becomes effective and execution to be as per the programme in clause 3.14 above (see C3 Scope of Services, C3.6 Brief).
9.1	Copyright of documents prepared for the Project shall be vested with the Employer.
12.1.2	Interim settlement of disputes is to be by mediation.
12.2.1	In the event that the Parties fail to agree on a mediator, the mediator is to be nominated by the president of the Association of Arbitrators (Southern Africa).
12.2.4 / 12.3.4	Final settlement is by litigation.
13.1.3	All partners in a joint venture or consortium shall carry the same professional indemnity insurance as per clause 5.4.1 of the General Conditions of Contract.
13.4	Neither the Employer nor the Service Provider is liable for any loss or damage resulting from any occurrence unless a claim is formally made within 5 years from the date of termination or completion of the Contract.
13.5	The amount of compensation is unlimited.
13.6	The provisions of 13.6 do not apply to the Contract.
14.4	In the first sentence, change "... period of twenty four months after ..." to "... period of thirty six months after ...".
15	In respect of any amount owed by the Service Provider to the Employer, the Service Provider shall pay the Employer interest at the rate as determined by the Minister of Finance, from time to time, in terms of section 80(1)(b) of the Public Finance Management Act, 1999 (Act no1 of 1999).

C1.2.3 Data provided by the Service Provider

Clause	
	Each item of data given below is cross-referenced to the clause in the General Conditions of Contract to which it mainly applies.
1	The Service Provider is the company, close corporation, natural person or partnership named in C1.1 Form of Offer and Acceptance by the tendering Service Provider.
5.3	The authorised and designated representative of the Service Provider is the person named in the resolution PA-15.1 by the tendering Service Provider.
5.4.1	<p><u>Indemnification of the Employer</u></p> <p>I, the undersigned, being duly authorized by the Service Provider, in terms of the completed resolution</p> <p>.....(Name of authorized person)</p> <p>hereby confirm that the Service Provider known as:</p> <p>.....(Legal name of entity tendering herein)</p> <p>tendering on the project:</p> <p>.....</p> <p>.....(Name of project as per C1.1 Form of offer and acceptance)</p> <p>holds professional indemnity insurance cover, from an approved insurer, duly registered with the Finance Services Board, of not less than the amount required as cover relative to the size of project, with the first amount payable not exceeding 5% of the value of indemnity. I further confirm that the Service Provider will keep such professional indemnity fully subscribed. I further confirm that should the professional indemnity insurance, with no knowledge of the Employer, be allowed to lapse at any time or in the event of the Service Provider cancelling such professional indemnity insurance, with no knowledge of the Employer, at any time or if such professional indemnity cover is not sufficient, then the Service Provider, (i) accepts herewith full liability for the due fulfilment of all obligations in respect of this Service; and (ii) hereby indemnifies, and undertakes to keep indemnified, the Employer in respect of all actions, proceedings, liability, claims, damages, costs and expenses in relation to and arising out of the agreement and/or from the aforesaid Service Provider's intentional and/or negligent wrongful acts, errors and/or omissions in its performance on this Contract.</p> <p>I confirm that the Service Provider undertakes to keep the Employer indemnified, as indicated above, beyond the Final Completion Certificate/Final Certificate by the Employer (whichever is applicable) for a period of five (5) years after the issue of such applicable certificate.</p> <p>I confirm that the Service Provider renounces the benefit of the <i>exceptionis non causa debiti, non numeratae pecuniae</i> and <i>excussionis</i> or any other exceptions which may be legally raised against the enforceability of this indemnification.</p> <p>Notwithstanding the indemnification required above, the Employer reserves the right to claim damages from the Service Provider for this Project where the Service Provider neglects to discharge its obligations in terms of this agreement.</p> <p>NAME: .....</p> <p>CAPACITY: .....</p> <p>SIGNATURE: .....</p>

7.1.2	<p>As an extension of the definitions contained in clause 1 hereof, Key Persons must, for the purposes of this Contract, include one or more of the professionally registered principal(s) of the Service Provider, <b>and/or</b>, one or more professional(s) employed to render professional services, for whom certified copies of certificates or other documentation clearly proving current professional registration with the relevant council, including registration numbers, must be included with the tender as part of the returnable documentation.</p>		
	<p>The Key Persons and their jobs / functions in relation to the Services are:</p>		
	Name	Principal and/or employed professional(s)	Specific duties
	1.		
	2.		
	3.		
	4.		
	5.		
	6.		
	7.		
	8.		
	9.		
	10.		
7.2	<p>A Personnel Schedule is not required.</p>		

If the space provided in the table above is not sufficient to describe the **specific duties**, this space may be utilized for such purpose:



**C2: PRICING DATA**

**C2.1 Pricing Instructions**

C2.1.1 Basis of remuneration, method of tendering and estimated fees

C2.1.1.1 Professional fees will be paid on % based fees

C2.1.1.2 **Tenderers are to tender:**

**On % based price to perform duties as per section G, 2.2**

C2.1.2 Remuneration for professional **Services**

C2.1.2.1 **Professional fees shall be calculated as follows for Services rendered by the Service Provider:**

**On % based price to perform duties as per section G, 2.2**

C2.1.2.2 The amount tendered herein (C1.1) is for 24 months / completion of SIPDM stage 9 which ever come 1st

C2.1.2.3 **Disbursements in respect of all travelling and related expenses** should be all inclusive in the price

C2.1.2.4 All fee accounts must be accompanied with Portfolio of Evidence of duties performed and approved by the Project Leader

C2.1.2.5 Payments to the Service Provider will be made electronically according to the banking details furnished by the Service Provider. Any change in such banking details must be communicated to the departmental project manager timeously. Fee accounts, correct in all respects, will be deemed submitted when received by the Employer and settled when electronically processed by the Employer. The Employer reserves the right to dispute the whole account, any item or part of an item at any time and will deal with such case in terms of clause 14.3 of the General Conditions of Contract.

C2.1.2.6 Accounts for Services rendered may be submitted monthly on the successful completion of each month of work, on the 1<sup>st</sup> week of the month.

## **APPENDIX C – PROJECT DETAILS**



**health**

Department:  
Health  
PROVINCE OF KWAZULU-NATAL

**DIRECTORATE**

Physical Address: Townhill Offices, 35 Hyslop Road, Pietermaritzburg, 3201  
Postal Address: Private Bag X9051 Pietermaritzburg, 3200  
Tel: 033 940 2400  
www.kznhealth.gov.za

**INFRASTRUCTURE PLANNING**

## MINOR WORKS BRIEF

### BENEDICTINE HOSPITAL UPGRADE WATER RETICULATION

Drafted by: MR AK BUTHELEZI  
Project Leader

Signed:

Date:

2020/09/14

Recommended by: MRS G MASONDO  
Director: Programme Delivery and Real Estate

Signed:

Date:

14/09/2020

Approved by: MR B G GCABA  
Chief Director: Infrastructure Development

Signed:

Date:

16/9/20

#### Document Control

Revision Number	Date	Initials

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## **1. Project Details**

### **1.1. The Facility**

- Facility Name: Benedictine Hospital
- Facility Number: F001695
- Facility Type: District Hospital
- Facility Owner: Republic of South Africa (RSA)

### **1.2. Location**

- Province: KwaZulu-Natal
- District Municipality: Zululand
- Local Municipality: Nongoma (KZN265)
- Ward: 16
- Cadastral description:
  - Latitude: -27.8910013,
  - Longitude: 31.639325
- Street address (or directions): Main Road, Nongoma
- Postal address: P/Bag X5007 Nongoma 3950
- Telephone number: +27 (0) 35 831 7000

### **1.3. The Project / Programme details**

- Project Name: Benedictine hospital – upgrade water reticulation
- KZN-DOH Project Number: NKON001
- Project Code: w6792228
- Project Details / Scope: Replace all corroded underground-galvanised pipes for domestic and fire line including connections to all facilities buildings. Link to existing 72-hour water storage.
- Project Type: Infrastructure Development - Projects
- Budget Programme Number: Programme 8
- Budget Programme Name: Health Facilities Management
- Sub-programme: District Hospital Services
- Infrastructure Programme Name: Not part of a Programme
- Nature of Investment: Upgrades
- Nature of Investment Sub- status: Upgrading & Additions
- IRM Infrastructure Category: DoH - Upgrading
- IRM Infrastructure Type: Secondary

### **1.4. Project Team**

#### **1.4.1. KZN Department of Health**

##### **1.4.1.1. Infrastructure Development**

- Project Leader: Mr. AK Buthelezi
- Quantity Surveyor: Mr. P. Potsane
- Mechanical Engineer: Mr. S. Dlamini
- Civil/Structural Engineer: Mr. E. Chiro
- Occupational Health & Safety: Ms. S. Ngcobo

#### **1.4.1.2. Department of Health – General**

- Benedictine hospital CEO: Mr BR Khumalo
- Benedictine hospital, Systems Manager: Mrs P Gumede
- Benedictine hospital, Finance Manager: Mr GMN Mdladla
- Zululand District Manager: Mr. V Vilakazi
- Zululand District Engineer: Mr. M Buthelezi

#### **1.5. The Site:**

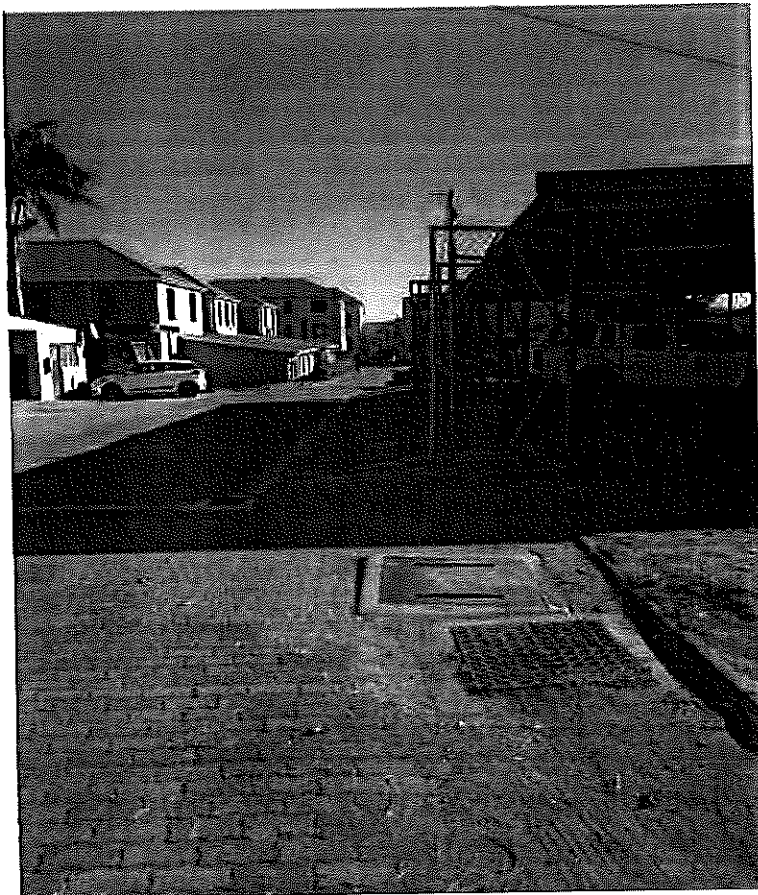
##### **1.5.1.1. Location of site:**

The proposed site is located within Benedictine Hospital and extended to various buildings.

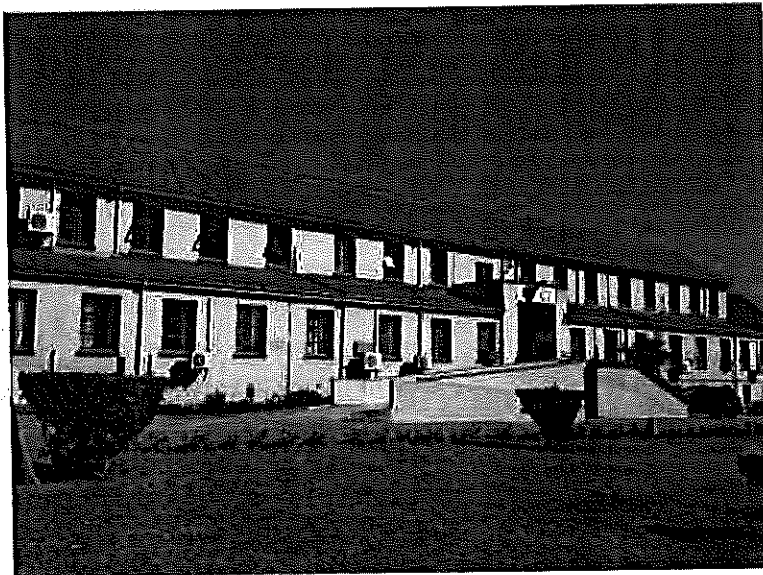


**Photo 1: Site location on Aerial View**

**SOURCE:** <https://www.google.com/maps/@-29.6140788,30.3665444,730m/data=!3m1!1e3>



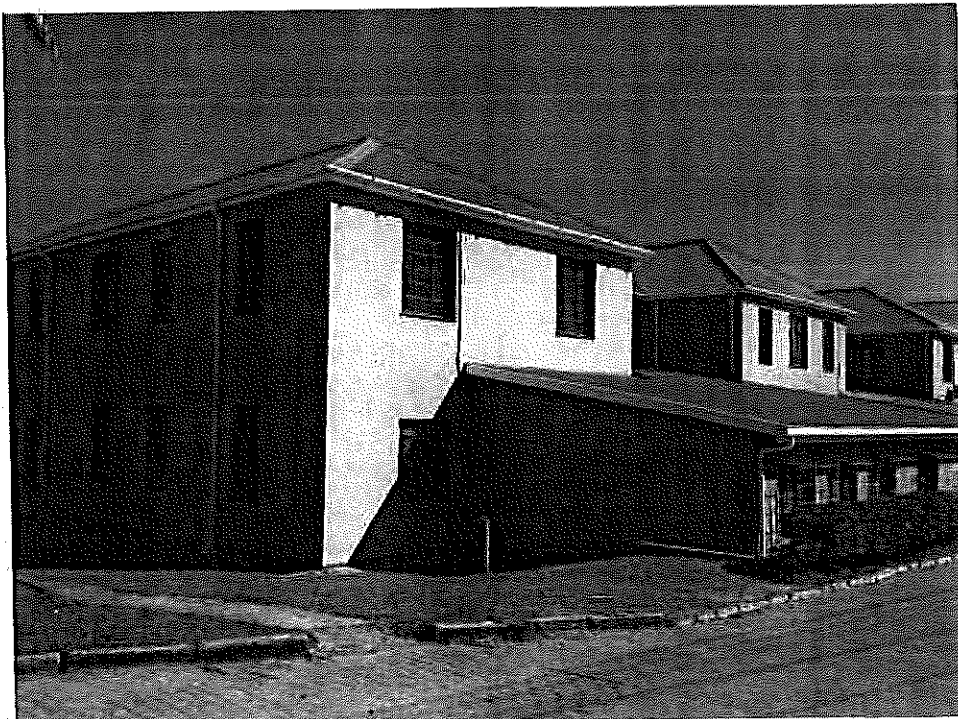
Manhole shows where fire and domestic lines end



Administration building to be connected to the new water line



Theatre building to be connected to the new water line



College building to be connected to the new water line

## Project Overview



## **1.6. Project Background**

Benedictine hospital is a district hospital with 363 beds, located in Nongoma, which falls in the Zululand health district

Water reticulation project started in 2011 as part of construction of new student nurses' accommodation project. The project was structured into two (2) phases whereby phase one (1) was completed in 2017.

### **Phase one (1) project consisted of-**

- Construction of new 40-unit student nurses accommodation.
- Erect new 72 hours water storage to supply the new building including hospital.
- Upgrade domestic and fire lines up to new student nurses accommodation.
- Replace existing perimeter fence.

### **Phase two (2) project consists of-**

- Replace galvanised underground domestic line pipes with 110 UPVC pipes (750m), connect to new line, and tap in to all existing buildings within the hospital.
- Extend new 110 UPVC fire line pipes (300m) to cover the hospital ground and must be connected to fire line pump.
- Number of main holes required are ten (10)
- The water reticulation should be in line with the hospital master plan to minimise disturbance on future development of the facility.

## **1.7. Project Outcome**

The replacement of old galvanised pipes will minimise water burst pipes and leakages currently experienced by the facility.

There will be reliable fire lines dedicated to the facility in case of emergency.

## **1.8. Project Objective**

To replace all rusted old domestic water pipes and provides a reliable uninterrupted water supply in all buildings within the Benedictine hospital. To provide adequate fire line system in order to comply with fire bylaws.

## **1.9. Project Success Criteria**

Success will be measured by the successful replacement of all-old galvanized water pipes and provide reliable fire line system.

## **1.10. Statutory Requirements**

### **1.10.1. Legislation**

- Legislation: Minimum applicable legislation (latest version) include:
  - The Occupational Health and Safety Act (Act 85, 1993) as amended
  - All other applicable legislations

- Policies:
  - Policy Document for the Design of Structural Installations
- Statutory Permissions Required
  - None identified

## **2. Technical Brief**

### **2.1. Detail Scope of Work**

- Replace galvanized underground domestic water line pipes with 110 UPVC pipes.
- Connect to new existing water line and tap into all existing buildings.
- Extend new existing 110mm UPVC fire line pipes to cover the hospital grounds and connect to fire line pump.

#### **2.1.1. Standard specifications to be used in the project**

The domestic water line pipes must be connected to the following buildings:

- Admin building.
- Theatre building
- Wards
- Residential buildings
- Workshops

## **3. Project / Programme Management and Cost control**

### **3.1. Project Management**

#### **3.1.1. IDMS guidelines**

##### **Stage 1B PREFEASIBILITY**

Strategic brief

##### **Stage 2 FEASIBILITY**

Concept and viability report

##### **Stage 3 DESIGN DEVELOPMENT**

Design development report

##### **Stage 4 DESIGN DOCUMENTATION**

- 4A Production information complete
- 4B Manufacture, fabrication and construction information  
Tender / consultant/construction

## Stage 5 CONSTRUCTION

Works in progress

## Stage 6 RETENTION

Works complete

## Stage 7 HANDOVER

Handover

## Stage 8 CLOSE OUT

Closeout report complete and accepted

### 3.1.2. Project Management Plan / Resource Management

The following Project Management plan is a guideline.

Table 1: Proposed Project Plan

ITEM	ELEMENTS
Needs Assessment/Analysis:	This project will be done through DoPW as Implementing Agent
Project Team Brief:	<p>The Project team:-</p> <p>Are to manage the project to successful completion within time, cost and quality to the required specification and to manage project associated risks for minimum impact.</p> <ul style="list-style-type: none"><li>• Must develop, design, document, manage and close the project</li><li>• May not proceed with any stage (IDMS) of the work until the KZN-DOH is satisfied with the stage of the project.</li><li>• Must clarify any uncertainties, discrepancies, etc to the satisfaction of KZN-DOH</li><li>• Is expected to deliver a well-designed, cost effective, low maintenance design that will suit the needs of the end-user and KZN-DOH</li><li>• Must adhere to the timeframes for the work to be completed as presented.</li></ul>
Evaluation and Engagement:	<ul style="list-style-type: none"><li>• The project may not proceed to any stage until KZN-DOH is satisfied with the current stage (wherever that is) of the project;</li><li>• KZN-DOH will follow the IDMS principles for approval and evaluation</li></ul>

### 3.1.3. Project Risk Plan

Informed decision-making is critical to the success of any project. Crucial to this success is the identification of risks and how they will be managed. The following risks have been identified prior to the projects start. These risks are not all inclusive and will be reviewed as the project progresses.

The following is some of the risk identified. However it is required that the Implementer develops a full risk plan. This is not an inclusive list and must be reviewed at each stage.

Table 2: Risk Log

Risk	Owner	Probability (low/med/ High)	Consequence (L/M/H)	Actions
Damaging of existing services like underground	Contractor	Med	High	Intensive labour must be considered during excavation

## **1. PROJECT / PROGRAMME MANAGEMENT AND COST CONTROL**

### **1.1 Project Management**

FIDPM GUIDELINES AND STAGE GATES APPLY. PROJECT CANNOT MOVE TO THE NEXT STAGE UNTIL THE FIDPM STAGE HAS BEEN SIGNED OFF BY APPROPRIATE PERSONNEL [(kindly refer to Departmental Infrastructure: Standard Operating Procedure (SOPs)].

#### **4.1.1 FIDPM guidelines**

**Stage 1A PROJECT INITIATIONS:** Project was identified and appears on the 2020/2021 AIP

**Stage 1B (Inclusive of Stage 2 and 3) PREFEASIBILITY:** The brief is deemed to satisfy stage 3

#### **Stage 4 DESIGN DOCUMENTATION:**

Deliverable: Design documents complete

- Sub-deliverable 1 Complete working drawing
- Sub-deliverable 2 Specifications/Bills of Quantities complete

#### **Stage 5 WORKS**

Deliverable: Works completion certified

- Sub-deliverable 1 Signed contractual document received
- Sub-deliverable 2 Site hand over certified
- Sub-deliverable 3 Construction technical certifications
- Sub-deliverable 4 Practical completion certified
- Sub-deliverable 5 Retention
- Sub-deliverable 6 Works completion certified

#### **Stage 6 HANDOVER**

Deliverable: Liability acceptance by End-User

- Sub-deliverable 1 Defects liability
- Sub-deliverable 2 Training concluded
- Sub-deliverable 3 As-built/Manuals received
- Sub-deliverable 4 Commissioning completed
- Sub-deliverable 5 Facility opened

#### **Stage 7 CLOSE OUT**

Deliverable: Defects certificates or certificates of final completion issued, Final amount due to the contractor in terms of the contract is certified, Close out report is accepted.

- Sub-deliverable 1 Final completion certificate issued
- Sub-deliverable 2 final accounts signed
- Sub-deliverable 3 Final payments certified
- Sub-deliverable 4 Report complete and submitted for signature
- Sub-deliverable 5 Report approved and signed
- Sub-deliverable 6 Asset verified and captured



## Annexure A

Physical Address: Townhill Office Park, Townhill Hospital, 35 Hyslop road, Pietermaritzburg, 3201  
Postal Address: Private Bag X9051, Pietermaritzburg, 3200  
Tel: 033 341 7000 Fax: 033 345 4370  
www.kznhealth.gov.za

**REQUEST FOR PRESENTATION TO THE HEALTH INFRASTRUCTURE APPROVAL COMMITTEE**  
(including Checklist for Stages 1 - 7)

DISTRICT:	MUNICIPALITY:
CITY/TOWN/PLACE:	INSTITUTION:
PROJECT	
KZN-DOH PROJECT NUMBER	
ESTIMATE PROJECT COST AS PER THIS SUBMISSION	R

**TO:** THE CHAIRPERSON: HEALTH INFRASTRUCTURE APPROVAL COMMITTEE  
c/o Secretary (HIAC)

e-Mail:

Please book the following project for the next available HIAC meeting

Date of meeting: \_\_\_\_\_ (preferred date)

Head Office Programme / Service: \_\_\_\_\_  
Implementing Agent: \_\_\_\_\_  
Implementing Agent Project Leader: \_\_\_\_\_  
Principal Agent / Project Manager: \_\_\_\_\_  
Submitted by Departmental Project Leader: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Contact details: Cell phone: \_\_\_\_\_  
E-mail address: \_\_\_\_\_

Signature \_\_\_\_\_

I, being the KZN-DOH Project Leader, confirm that the following has been checked and verified prior to this request being submitted:

(Check applicable boxes)

(Stages not applicable to this request can be removed)

**STAGE 1A: Initiation report****Documents:**

IPAT report, or  
Initiation report

**Has the document been signed off (as applicable) by:**

Deputy Director General  
Head Office programme / Service  
District Manager  
CEO / Manager of the Facility  
Implementing Agent Project Leader  
Professional Service Providers  
National Department of Health

**Did you invite the following:**

Head Office programme /Service  
District Manager  
CEO/ Manager of the Facility  
National Department of Health  
Provincial Treasury

<b>STAGE 1B: Brief</b>		<input type="checkbox"/>
Documents:		
Project brief, or		<input type="checkbox"/>
Minor works brief, or		<input type="checkbox"/>
Maintenance brief		<input type="checkbox"/>
<b>Has the document been signed off (as applicable) by:</b>		
Deputy Director General		<input type="checkbox"/>
Head Office programme / Service		<input type="checkbox"/>
District Manager		<input type="checkbox"/>
CEO / Manager of the Facility		<input type="checkbox"/>
Implementing Agent Project Leader		<input type="checkbox"/>
Professional Service Providers		<input type="checkbox"/>
National Department of Health		<input type="checkbox"/>
<b>Did you invite the following:</b>		
Head Office programme /Service		<input type="checkbox"/>
District Manager		<input type="checkbox"/>
CEO/ Manager of the Facility		<input type="checkbox"/>
National Department of Health		<input type="checkbox"/>
Provincial Treasury		<input type="checkbox"/>

## STAGE 2: Concept Development or Feasibility

Stage 2 submission to include the following documents:

- 1 Department of Health Project Leader's Report
- 2 Brief Development Report
- 3 Copy of Approved Project Brief
- 4 Copy of Stage 1B approval
- 5 Line drawings
- 6 OOM Estimate
- 7 Baseline Risk plans
- 8 Baseline Health and Safety report
- 9 Minutes of planning Meetings including those with applicable external stakeholders such as Local Governments, AMAFA, Eskom, Water affairs, and any other relevant stakeholder.
- 10 Specific requirements from relevant Head Office Programmes/Services, such as Tuberculosis Services, Primary Health Care services, etc.
- 11 ANNEXURE B: MILESTONES AND TASKS
- 12 EIA approval (if required)
- 13 PDA approval (if required)
- 14 AMAFA approval (if required)
- 15 Confirmation of property ownership
- 16 A basic condition assessment is required that include the following (as applicable)

Existing structures (include types, sizes, materials, etc)

Type of construction

Status of foundations

Status of structural elements

Status of walls

Status of roofs and ceilings

Status of windows and doors

Status of external finishes

Status of internal finishes

Status of all fittings ( please breakdown per discipline/type)

Is there any asbestos in/on the facility?

State of maintenance

Underground structures

Type of structure (including size, depth, access, etc)

State of repair

All services (overhead, above and underground, external and internal - include availability, type, size, depths, current state, connection points, etc)

Water

Storm water

Sewer

Waste (all types)

Ventilations systems

Electrical

Lifts, hoists, chairlift, etc

Medical gasses

Fire

Steam

All communication systems

## STAGE 2 (Cont):

- 17 Design proposal which must include the following:



Options (incl design, procurement and construction) considered (preferably 3 options)

Which Option is being recommended and why?

What "Green initiatives" are considered and why?

Any deviation from the scope/brief and why?

Does the facility comply with:

NBR (National Building Regulations) and SANS 10400?

IUSS

Ideal clinic requirements

National Core Standards

DOH Standards

What are the areas of non-compliance?

**Please confirm that the following has been addressed in the above documents:**

Influencing land issues (eg Informal settlements on site or close by, environmentally sensitive areas, high crime areas, etc)

Full survey of the site including the following:

North point

Prevailing wind direction

All boundaries and corners with co-ordinates

Cadastral survey with 0,5 to 1m contours

Access roads

Building lines, flood lines, servitude, etc

Access points and/or entrances

Fencing and security points - type, height, status

Neighbouring structures

All existing structures surveyed

All underground structures determined

All above ground services with connection points, types, materials, depths, sizes and status

All underground ground services with types, materials, depths, sizes and status

Environmentally sensitive areas

Trees and other special vegetation

Graves

**Did you invite the following:**

Head Office programme /Service

District Manager

CEO/ Manager of the Facility

Implementing Agent Project Leader

Professional Service Providers

National Department of Health

**Has the document been signed off by:**

Head Office programme /Service

District Manager

CEO/ Manager of the Facility

National Department of Health

Implementing Agent Project Leader

Professional Service Providers

### STAGE 3: Design Development

#### Stage 3 submission to include the following documents:

- 1 Department of Health Project Leader's Report
- 2 Design Development Report
- 3 Copy of Approved Project Brief
- 4 Copy of Brief Development report
- 5 Copy of Stage 2 approval
- 6 Sketch Plans which must include the following (as required)
  - Architectural including Room layouts (including furniture, fittings, etc) and dimensions
  - Electrical
  - Mechanical (All systems and Installations)
  - Civil
  - Structural
  - Fire Installation, Protection, Detection, Evacuation, etc (including fire Chief's comments)
  - Data and Telephone
- 7 Cost reports
- 8 Risk plans
- 9 Health and Safety report
- 10 Minutes of planning Meetings including those with applicable external stakeholders such as Local Governments, AMAFA, Eskom, Water affairs, and any other relevant stakeholder.
- 11 Specific requirements from relevant Head Office Programmes/Services, such as Tuberculosis Services, Primary Health Care services, etc.
- 12 Approved decanting plan (if amended)
- 13 ANNEXURE B: MILESTONES AND TASKS
- 14 ANNEXURE C: ESTIMATE
- 15 ANNEXURE D: CASH FLOWS attached
- 16 Deviations
  - Any deviation from Scope / brief and why?
  - Any deviation from Stage 2 and why?
  - Any other deviations?

#### Did you invite the following:

Head Office programme /Service  
District Manager  
CEO/ Manager of the Facility  
Implementing Agent Project Leader  
Professional Service Providers  
National Department of Health  
Provincial Treasury

#### Has the document been signed off by:

Head Office programme /Service  
District Manager  
CEO/ Manager of the Facility  
National Department of Health  
Implementing Agent Project Leader  
Professional Service Providers

## STAGE 4: Design Documentation

Stage 4 submission to include the following documents:

- 1 Department of Health Project Leader's Report
- 2 Final design/specification reports
- 3 Copy of Approved Project Brief
- 4 Copy of Brief Development report
- 5 Copy of Design Development report
- 6 Copy of Stage 4 approval
- 7 Final Working drawings
  - Architectural
  - Electrical
  - Mechanical
  - Civil
  - Structural
  - Fire
  - Data and Telephone
  - Other
- 8 Bills of Quantities, or
- 9 Quotation document
- 10 Elemental Estimate
- 11 Specification (all applicable disciplines)
- 12 Risk plans
- 13 Health and Safety report
- 14 Minutes of stakeholder meetings
- 15 Approved final decanting plan
- 16 ANNEXURE B: MILESTONES AND TASKS attached
- 17 ANNEXURE C: ESTIMATE attached
- 18 ANNEXURE D: CASH FLOWS attached
- 19 ANNEXURE E: DECLARATION BY APPOINTED COMPETENT PERSON attached (Each discipline to complete)
- 20 ANNEXURE F: REGULATION AZ4 attached
- 21 ANNEXURE G: MINIMUM REQUIREMENTS FOR PLANS AND REPORTS
- 22 Deviations
  - Any deviation from Scope / brief and why?
  - Any deviation from Stage 4 and why?
  - Any other deviations?

### Did you Invite the following:

Head Office programme /Service  
District Manager  
CEO/ Manager of the Facility  
Implementing Agent Project Leader  
Professional Service Providers  
National Department of Health  
Provincial Treasury

**STAGE 4 (Cont):****Has the document been signed off by:**

Head Office programme /Service

District Manager

CEO/ Manager of the Facility

National Department of Health

Implementing Agent Project Leader

Professional Service Providers


## STAGE 5: Works

Stage 5 submission to include the following documents:

- 1 Department of Health Project Leader's Report
- 2 Copy of Stage 4 report
- 3 Copy of Stage 4 approval
- 4 Site Hand Over Certificate
- 5 Minutes of Site Hand Over meeting
- 6 Deviations  
Any deviation from Scope / brief and why?  
Any deviation from Stage 4 and why?  
Any other deviations?
- 7 Pre-Practical completion snag list
- 8 Practical Completion Certificate
- 9 Minutes of Practical completion meeting
- 10 Pre-Works completion snag list (where applicable)
- 11 Works Completion Certificate (where applicable)
- 12 Minutes of Works completion meeting (where applicable)

## STAGE 6: Handover

Stage 6 submission to include the following documents:

- 1 Department of Health Project Leader's Report
- 2 Copy of Project Brief
- 3 Copy of Brief Development report
- 4 Copy of Design Development report
- 5 Copy of Final design report
- 6 Copy of Stage 5 approval
- 7 Concluding report

Provide information necessary to understand how the designers intended the works, systems, subsystems, assemblies and components to function; effectively operate, care for and maintain the works, systems, subsystems, assemblies and components to function; check, test or replace systems, subsystems, assemblies or components to ensure the satisfactory performance of works, systems, subsystems, assemblies and components over time

Develop maintenance plans; determine stock levels for components and assemblies that need to be regularly replaced; and budget for the operation and maintenance of the works, systems, subsystems and components over time

- 8 All Training concluded (Attendance registers of Training sessions)
- 9 All As-built/Manuals received
- 10 Keys and Key schedule handed over (signed by Facility manager)
- 11 Commissioning completion report
- 12 Facility opened (Attendance record, minutes, etc)

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