

REQUEST FOR QUOTATION – GUL 11/2019

PREVENTATIVE MAINTENANCE AND SERVICE OF TWENTY FOUR (24) SALVIS COMBI STEAM OVENS FOR A PERIOD OF FIVE (5) 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 17 years.

2. Purpose

The Durban ICC requires a service provider for the provision of preventative maintenance services for twenty four (24) Salvis Combi Steam Ovens currently in operation at the Centre, for a period of five (5) 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 trolleys 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 EThekwini 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>

EThekwini Vendor Portal registration: <https://ethekwinvendor.durban.gov.za>

Or contact 031 322 7011 / 7154

Fatima.milazi@durban.gov.za / phumla.mdabe@durban.gov.za

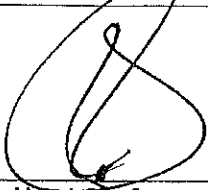
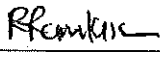
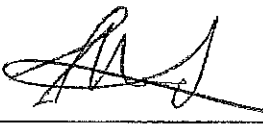


6. Contact Person

Patrick Musubao: back of house manager
Email: Patrickm@icc.co.za
Land Line: 031 360 1018

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 **5th April 2019**.

9. Request approved by:

| | |
|---|------------|
|  | 28/03/2019 |
| <hr/> | |
| Executive Head Chef John Moatshe | |
|  | 28/03/2019 |
| <hr/> | |
| SCM Compliance Officer Ritesh Ramkissoon | |
|  | 28/03/2019 |
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| SCM Manager Thenashree Naidoo | |
|  | 1/4/19 |
| <hr/> | |
| Finance Director Melanie Rambally | |
|  | 1/4/19 |
| <hr/> | |
| Chief Executive Officer Lindiwe Rakharebe | |



10. Past experience in similar assignments

| Assignment Description | Key Elements | Date Completed | Contact Person and Telephone Number | Assignment Value |
|------------------------|--------------|----------------|-------------------------------------|------------------|
| | | | | |
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I.....being duly authorized thereto bydo 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: _____

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

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

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

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

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 |
|-----|----|

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 |
|-----|----|

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 |
|-----|----|

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 |
|-----|----|

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 |
|-----|----|

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

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

Signature

Date

Capacity

Name of Bidder

