

**RE-ADVERTISEMENT: REQUEST FOR QUOTATION – IT 20/2022**

**PABX SUPPORT AND MAINTENANCE FOR A PERIOD OF 12 MONTHS**

**1. Background**

The Durban ICC is one of the most advanced conference facilities in the world, having been voted “Africa’s Leading Meetings and Conference Centre” at the World Travel Awards 17 times.

**2. Purpose**

The Durban ICC requires the services of a suitably qualified and accredited service provider to provide PABX telephony support and maintenance for a period of 12 months.

**3. List of Equipment to be maintained at the Durban ICC**

| Equipment Description                               | Quantity |
|---|----------|
| <b>System</b>                                       |          |
| OpenScape 4000 V8 PABX                              | 624 port |
| Analogue extensions                                 | 360      |
| Digital extensions                                  | 120      |
| PRI trunks  | 120      |
| BRI trunks  | 8        |
| Analogue trunks                                     | 16       |
| IP Card   | 3        |
| OpenScape 4000 Eco Server Simplex                   | 1        |
| <b>Switchboard</b>                                  |          |
| AC-WIN IP V2  | 4        |
| USB Handset Plathosys CT220                         | 4        |
| ESPRIMO E520 E85+ PC Hardware                       | 4        |
| Screen E22T-7 LED, EU cable                         | 4        |
| <b>Telephone Management System</b>                  |          |
| Proteus Enterprise (901-100 Port) Software & Buffer | 1        |
| Call Budgeting Software                             | 1        |
| SS80 LAN/Serial Converter                           | 1        |

| Equipment Description   | Quantity |
|---|----------|
| <b>ASC voice recorder</b>   |          |
| POWERplay Pro software license (package)  | 1        |
| POWERplay Web software license (package)  | 10       |
| EVOIPneo Base license - active  | 1        |
| Recording License "EVOIPneo active for Unify OpenScape 4000"  | 16       |
| Archive Manager software license  | 1        |
| Fault Management Support software via SNMP or E-Mail  | 1        |
| <b>XPHONE UC server 2011 application</b>  |          |
| Perquisite for using XPhone UC Office or Mobile, Fax, Voicemail, Auto Attendant. Open Interfaces for PBX-Systems, Groupware- and Mail server Management connectors to import user information | 1        |
| XPhone UC Voicemail 2011 User   | 50       |
| XPhone UC 1 x IP-Channel  | 4        |
| Server Hardware   | 1        |

#### 4. Conditions of contract

- 4.1 Four hour on-site response time to faults dependent on priority determined by the Durban ICC.
- 4.2 Time to restore telephony services: Between 0 to 4 hours dependent on priority determined by Durban ICC according to a pre-agreed schedule.
- 4.3 To conduct a monthly onsite backup of the configuration to an external drive
- 4.4 The service provider must carry shelf stock of all components necessary in order to provide the turnaround times stipulated in points 4.1 and 4.2 above. This must be at no additional cost to the Durban ICC.
- 4.5 The Durban ICC is not liable to make any payments upfront
- 4.6 There will be no obligation to the appointed service provider after the 12 month contract period
- 4.7 The pricing submitted will remain firm for the duration of the 12 month contract

## 5. Mandatory Requirements

- 5.1 The service provider must have minimum 5 years requisite experience relating to PABX management and specific to the product range as specified in point 3. Please attach three (3) positive references from clients serviced.
- 5.2 The service provider must be an authorised and certified maintenance service provider of Unify Communications products (attach proof of certifications).

**Please note:** Failure to comply with all of the stipulated mandatory requirements will result in the service provider being deemed non-responsive and will not be considered for evaluation.

## 6. Preconditions

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

- 6.1 Full name
- 6.2 Identification or company or other registration number
- 6.3 Tax reference number and VAT number, if any
- 6.4 Valid original Tax clearance from South African Revenue Services which proves that the providers tax matters are in order
- 6.5 Valid BBBEE Certificate
- 6.6 MBD 4 Declaration of Interest form must be completed
- 6.7 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](mailto:Fatima.milazi@durban.gov.za) / [phumla.mdabe@durban.gov.za](mailto:phumla.mdabe@durban.gov.za)

**7. Compulsory Pricing Schedule (form of offer)**

| Description  | Monthly cost (VAT excl.) | VAT @ 15% | Monthly Cost (VAT Incl.) |
|--|--------------------------|-----------|--------------------------|
| Cost to execute the required scope of works for the provision of PABX services | R                        | R         | R                        |
| Please state any additional monthly costs:                                     | R                        | R         | R                        |
| <b>Total monthly cost (VAT Incl.)</b>  |                          |           | R                        |
| <b>Annual cost (total monthly cost VAT incl. x 12 months)</b>                  |                          |           | 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:**

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

**8. Contact Person**

Preshan Haripershadh  
 Tel: +27 31 360 1344  
 IT Manager

**9. Closing Date**





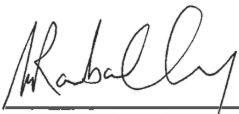
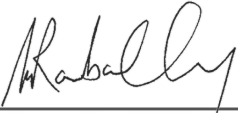
Quotations, together with this document and supplier registration forms are to be placed in a sealed envelope marked for the attention of the Procurement Department and are to be placed in the Tender Box at the Durban ICC security entrance on the ground floor, 45 Bram Fischer Road Durban before **12h00 on 9<sup>th</sup> December 2022.**



**DURBAN ICC**

INVESTMENT PROMOTION BOARD  
DURBAN INTERNATIONAL CENTRE FOR CONVENTIONS  
AND EXHIBITIONS

10. Request approved by:

|  |            |
|--|------------|
|       | 01/12/2022 |
| <hr/>  |            |
| <b>Preshan Harpershadh</b><br>IT Manager   |            |
|       | 01/12/2022 |
| <hr/>  |            |
| <b>Sphiwe Khuzwayo</b><br>Facilities Director  |            |
|       | 01/12/2022 |
| <hr/>  |            |
| <b>SCM Compliance Officer</b><br>Adwoa Milumba   |            |
|     | 01/12/2022 |
| <hr/>  |            |
| <b>Finance Executive</b><br>Thenashree Naidoo  |            |
|     | 02/12/2022 |
| <hr/>  |            |
| <b>Chief Financial Officer</b><br>Melanie Rambally                                     |            |
| pp  | 02/12/2022 |
| <hr/>  |            |
| <b>Chief Executive Officer</b><br>Lindiwe Rakharebe                                    |            |



11. Past experience in similar assignments

| Assignment Description | Key Elements | Duration | 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: \_\_\_\_\_

**12. 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"/> |
| 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"/>                      |
| 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"/>                      |
| 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"/>                      |
| 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"/>                      |
| 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"/>                      |
| 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"/>                      |

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 Contractor 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)

**13. MBD 4 Declaration of Interest**

13.1 No bid will be accepted from persons in the service of the state<sup>1</sup>.

13.2 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.

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

13.3.1 Full name of bidder or his/her representative .....

13.3.2 Identity number: .....

13.3.3 Position occupied in the Company (director, trustee, shareholder<sup>2</sup>):  
 .....

13.3.4 Company Registration Number: .....

13.3.5 Tax Reference Number: .....

13.3.6 VAT Registration Number: .....

13.3.7 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.**



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

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

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

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

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13.3.10 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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13.3.11 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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13.3.12 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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13.3.13 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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13.3.14 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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14. **Full details of directors / trustees / members / shareholders**

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

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Capacity**

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