



**REQUEST FOR QUOTATION – BS 06/2023**

**REPAIR AND COMMISSIONING OF THE SMOKE VENTILATION SYSTEM AT THE DURBAN ICC**

**1. Background**

The Durban ICC is one of most advanced and leading events and meetings destinations. In order to maintain the extremely high international standards as a facility it is important that we have the correct infrastructure ensuring our operations run optimally.

**2. Purpose**

The Durban ICC requires a competent service provider to repair and commission smoke ventilation system at the Durban ICC.

**3. Mandatory Requirements**

Does the service provider comply with the mandatory requirements? Please acknowledge as illustrated	Yes	No
3.1 The prospective service provider must provide proof of public liability insurance to a minimum value of R5 Million.	✓	X
3.2 Prospective service provider must have minimum 3 years requisite experience working with smoke ventilation systems. Please attach at least two (2) reference letters from clients that were serviced in the last 5 years.		

***Please Note: Failure to meet all of the stipulated mandatory requirements will result in the service provider being deemed non-responsive and will not be considered for evaluation. The bidder must complete the final column above stating whether they can complete the task or not.***

**4. Specifications of equipment**

- 4.1 Linea actuators must be of the following specifications:
  - TGLA 24 40 M1 200N 750 Stroke
  - Similar to Fig. 1 below
  
- 4.2 Power supply must be of the following specifications:
  - 30 Amps.
  - Similar to Fig. 2 below
  
- 4.3 OS2 Control Panel:
  - To be supplied without batteries.
  - Similar to Fig. 3 below.



**Fig 1 – Linear Actuator**



**Fig 2 – OS2 Control Panel**



**Fig 3 – Power Supply Unit**

**5. Compulsory pricing schedule (form of offer)**

Description	Unit	Quantity	Unit Cost	Total Cost
5.1 Remove defective linear actuators for the smoke ventilation at the Convention Unit and set aside for safe disposal,	Ea.	2	R	R
5.2 Supply, fit and commission new linear actuators for the smoke ventilation system at the Convention Unit as indicated in Fig. 1 above.	Ea.	2	R	R
5.3 Remove defective OS2 Control Panel (excluding batteries) for the smoke ventilation system at the Convention Unit and set aside for safe disposal.	Ea.	1	R	R
5.4 Supply, fit and commission new OS2 Shevtec Control Panel (excluding batteries) for the smoke ventilation system at the Convention Unit as indicated in Fig. 2 above.	Ea.	1	R	R
5.5 Remove defective Power Supply units for smoke ventilation system OS2 Control Panels at the Convention Unit and set aside for safe disposal.	Ea.	4	R	R
5.6 Supply, fit and commission four (4) new 30 Amp OS2 Power Supply units for OS2 smoke ventilation system control panels at the Convention Unit as indicated in Fig. 3 below.	Ea.	4	R	R
5.7 Commission the entire Smoke Ventilation system at the Convention Unit.	Ea.	1	R	R
Please state additional costs not mentioned above			R	R
			<b>Total cost ((VAT excl.)</b>	R
			<b>VAT @ 15%</b>	R
			<b>Total cost (VAT incl.)</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: \_\_\_\_\_

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

## 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 service provider's 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://ethekwivendor.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. Contact Person

Name: Sipiwe Khuzwayo: Facilities Director  
Tel: 031 360 1326  
Email: [siphiwek@icc.co.za](mailto:siphiwek@icc.co.za)





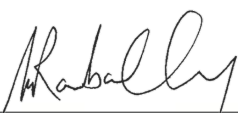
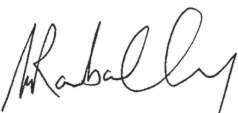
## 8. Compulsory Site Inspection

Please note that a compulsory site inspection will be held on **10<sup>th</sup> March 2023 at 10h00**. Service providers are to meet Sipiwe Khuzwayo at Durban ICC reception, 2<sup>nd</sup> floor, 45 Bram Fischer Road, where they will be briefed and escorted.

## 9. Closing Date

Quotations, together with this document, 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 **12:00 on 14<sup>th</sup> March 2023**.

**10. Request approved by**

 _____ <b>Facilities Director</b> <b>Siphwe Khuzwayo</b>	
 _____ <b>Chief Operations Officer</b> <b>John Artho</b>	
 _____ <b>Adwoa Milumba</b> <b>SCM Compliance Officer</b>	03/03/2023
 _____ <b>Finance Executive</b> <b>Thenashree Naidoo</b>	03/03/2023
 _____ <b>Chief Financial Officer</b> <b>Melanie Rambally</b>	06/03/2023
pp  _____ <b>Chief Executive Officer</b> <b>Lindiwe Rakharebe</b>	06/03/2023



**11. Past experience in similar assignments**

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

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

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

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



**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"/>
Electricity	<input type="text"/>
Water	<input type="text"/>
Rates	<input type="text"/>
Other	<input type="text"/>
Other	<input type="text"/>

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

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

NAME : ..... (Block Capitals)

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

**13. MBD4 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>):

.....

13.4.4 Company Registration Number: .....

13.4.5 Tax Reference Number: .....

13.4.6 VAT Registration Number: .....

13.4.7 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:**

<b>YES</b>	<b>NO</b>
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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:**

<b>YES</b>	<b>NO</b>
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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:**

<b>YES</b>	<b>NO</b>
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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:**

<b>YES</b>	<b>NO</b>
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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:**

<b>YES</b>	<b>NO</b>
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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:**

<b>YES</b>	<b>NO</b>
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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:**

<b>YES</b>	<b>NO</b>
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**14. Full details of directors / trustees / members / shareholders**

<b>Full Name</b>	<b>Identity Number</b>	<b>State Employee No.</b>

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

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

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

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