Province of the
EASTERN CAPE
HEALTH

SBD1

PART A
INVITATION TO BID

YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF DEPARTMENT/ PUBLIC ENTITY)					
BID NUMBER:	**SCMU3-26/27-0050-HO**	CLOSING DATE:	**02 December 2026**	CLOSING TIME:	11h00
DESCRIPTION	**THE BID CALLS FOR THE DISTRIBUTION OF MEDICAL WASTE (HEALTH CARE RISK WASTE) CONTAINERS TO THE CLINICS AND COMMUNITY HEALTH CENTERS, THE COLLECTION OF MEDICAL WASTE (HEALTH CARE RISK WASTE) FROM THE PUBLIC CLINICS AND COMMUNITY HEALTH CENTERS TO THE CENTRAL COLLECTION POINTS FOR A PERIOD OF 36 MONTHS**				
BID RESPONSE DOCUMENTS MAY BE SUBMITTED ONLINE VIA ETENDER PORTAL					
www.etenders.gov.za					

BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO		**TECHNICAL ENQUIRIES MAY BE DIRECTED TO:**	
CONTACT PERSON	**Mrs L. Tshangela**	CONTACT PERSON	**Mrs L. Tshangela**
TELEPHONE NUMBER	**N/A**	TELEPHONE NUMBER	**N/A**
FACSIMILE NUMBER	**N/A**	FACSIMILE NUMBER	**N/A**
E-MAIL ADDRESS	**lulama.hlangani@echealth.gov.za**	E-MAIL ADDRESS	**lulama.hlangani@echealth.gov.za**

SUPPLIER INFORMATION					
NAME OF BIDDER					
POSTAL ADDRESS					
STREET ADDRESS					
TELEPHONE NUMBER	CODE		NUMBER		
CELLPHONE NUMBER					
FACSIMILE NUMBER	CODE		NUMBER		
E-MAIL ADDRESS					
VAT REGISTRATION NUMBER					
SUPPLIER COMPLIANCE STATUS	TAX COMPLIANCE SYSTEM PIN:		**OR**	CENTRAL SUPPLIER DATABASE No:	MAAA
ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES OFFERED?	☐Yes ☐No [IF YES ENCLOSE PROOF]		**ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES OFFERED?**		☐Yes ☐No [IF YES, ANSWER THE QUESTIONNAIRE BELOW]

QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS	
IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?	☐YES ☐NO
DOES THE ENTITY HAVE A BRANCH IN THE RSA?	☐YES ☐NO
DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?	☐YES ☐ NO
DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?	☐YES ☐NO
IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?	☐ YES ☐NO

IF THE ANSWER IS "NO" TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 BELOW.

PART B
TERMS AND CONDITIONS FOR BIDDING

1. BID SUBMISSION:
1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.
1.2. **ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED (NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.**
1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.
1.4. **THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).**
2. TAX COMPLIANCE REQUIREMENTS
2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.
2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS.
2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE WWW.SARS.GOV.ZA.
2.4 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.
2.5 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED; EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.
2.6 WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.
2.7 NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE."

NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.

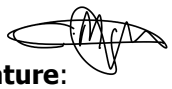
SIGNATURE OF BIDDER: ……

CAPACITY UNDER WHICH THIS BID IS SIGNED: ……
(Proof of authority must be submitted e.g. company resolution)

DATE: ……...

SCMU3-26/27-0050-HO

THE BID CALLS FOR THE DISTRIBUTION OF MEDICAL WASTE (HEALTH CARE RISK WASTE) CONTAINERS TO THE CLINICS AND COMMUNITY HEALTH CENTERS, THE COLLECTION OF MEDICAL WASTE (HEALTH CARE RISK WASTE) FROM THE PUBLIC CLINICS AND COMMUNITY HEALTH CENTERS TO THE CENTRAL COLLECTION POINTS FOR A PERIOD OF 36 MONTHS

Revision			
Drafted By	**Date: 11/08/2026**	**Name: Ms L. Tshangela**	 **Signature**:
Reviewed By	**Date:** 09/09/2026	**Name: Ms T. Notshe**	**Signature** 
By: Approved Specification Committee	**Date:** 9 Sept 2026	**Name: Mr M. Van Zyl**	**Signature** 
Advert Approved By:	28/10/2026 **Date:**	**Name: Ms C. Mgijima**	 **Signature**:

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2. DEFINITIONS

The rules of interpretation and defined terms contained in the General Conditions of Contract (GCC) shall apply to this invitation to bid unless the context requires otherwise.

In addition the following terms used in this invitation to bid shall, unless indicated otherwise, have the meanings assigned to such terms in the table below.

ECDoH	means the Eastern Cape Department of Health acting for and on behalf of the Eastern Cape Provincial Government;
Invitation to bid	means this invitation to bid comprising ○ The cover page and the table of content and definitions ○ Part 1 which details the Conditions of Bid; ○ Part 2 which details the Conditions of Contract and Operational Requirements; ○ Part 3 which details the bid strategy ○ Part 4 which details the Terms of Reference relating to the Technology / Services ○ Part 5 which contains all the requisite bid forms and certificates; As read with GCC–General Conditions of Contract
Goods	means the requirements defined on the cover page of this invitation to bid and described in detail in the Specifications;
Specifications	means the specifications contained in Part 4 of this invitation to bid;

Auto clave	Process method which consists of a pre-vacuum phase, pressurisation phase, heat treatment phase at, at least 148 ⍰C for a time period not less than 35 minutes followed by a decompression phase and post vacuum phase which renders sterile material which must be rendered unrecognisable for final disposal.
Alternative method	A method that will treat Health Care Risk Waste in such a way as to render it non-infectious or sterile products or residue, to be unrecognisable sterile waste which will contribute to waste minimization.
Chemical Waste	Means expired pharmaceuticals from pharmacies at the Facilities, waste from oncological wards, cytotoxic waste, and other chemical waste generated at the Facilities. Chemical Waste includes liquids and solids and can include flammable substances.
Clinic	Means a Facility as listed Clinic in the List of Facilities.
Collection Schedule	Means the Contractor's programme for collecting Waste from the Facilities. The programme shall specify days of the week and approximate times that Waste will be collected from each Facility.
Commencement of Services Date	Means the date occurring 2 months after the Contract Date, on which the Contractor shall take responsibility for removing the Waste from all Facilities in the Region.
Community Health Centre	Means a Facility designated as such in the List of Facilities.
Competent Authority	Means any agency, department, board, committee, governmental body, local authority, court, inspectorate, official regulator, public statutory person or appointee of the Republic or the Province (whether autonomous or not) having jurisdiction (whether by virtue of Legislation, delegated authority, customary law or otherwise) over any of the parties hereto, the subject matter of this Contract and/or the performance of any of the parties' respective obligations under this Contract.
Contract Date	Means the date on which execution of the Contract commences.
Contract Period	Means the period from the Contract Date to the date that the Contract expires.
Contractor or Service Provider	These shall have the same meaning

Controlled Combustion Treatment	Means any method, technique or process for microbial inactivation or for otherwise altering the biological, chemical or physical characteristic of Waste so as to render the material unrecognisable and render all sharps unusable, and ensure that all blades are broken, and in order to reduce the hazards which the health care risk waste presents and to facilitate disposal by means of, typically, a controlled combustion technology.
Disposable Container	Disposable Containers shall include the following: • Sharps Containers, including containers for long sharps; • Speci-bin Containers for Pathological Waste; • Containers for Pharmaceutical Waste; • Red liners for General Infectious Waste, including sealing mechanisms for liners; • Yellow liners for condemned linen • Box sets for infectious waste

Department's Representative	Means such party as the Department may appoint as the Department's Representative for the purposes of this Contract and notify the Contractor in writing.
Environment	Environment is defined as i) the natural environment, consisting of air, water, land and all forms of life, ii) the social, political, cultural, economic and working context and other factors that determine people's place in and influence on the environment, and iii) natural and constructed spatial surroundings.
Exposure	The intake of radiation or pollutant by organisms present in a particular environment (i.e. human, natural), which represents a potential health threat to the living organisms in that environment.
Extraordinary Items	Disposable items not forming part of the normal daily Waste stream, but with characteristics similar to that of Health Care Risk Waste (HCRW).
Facility	Means a provincial hospital, community health centre, clinic, mortuary or any other health care facility included in the List of Facilities.
Facility Rollout Plan	Means a detailed strategy for the systematic implementation of the new Waste Management System at individual Facilities within a particular Region.

General Infectious Waste	Means Infectious Waste, other than Sharps Waste and Pathological Waste, which is suspected to contain pathogens and normally causes, or significantly contributes to the cause of increased morbidity or mortality of human beings. It inter alia includes items such as blood, contaminated dressings, contaminated diapers or any other disposable items suspected of being infectious.
Good Engineering and Operating Practices	Means (in relation to the performance of any activity, duty, responsibility and/or obligation of the Contractor to which this standard is stated in this Contract to apply) the standards, practices, methods and procedures and the degree of skill, care, diligence, prudence and foresight that would reasonably be expected of a skilled and experienced contractor engaged in the same type of undertaking under the same or similar factual, practical and/or physical circumstances at the time when the relevant decision or judgement is made and/or the relevant act or operation is performed and, without prejudice to the foregoing generality, shall include taking all reasonable steps to ensure that:- • adequate materials, resources and supplies, are constantly available to undertake the Services under normal conditions and reasonably anticipated abnormal conditions; • sufficient personnel are available and are adequately experienced and trained to transport and handle the Waste and operate the Treatment Plant properly, efficiently and within the manufacturers' guidelines and specifications and are capable of adequately responding to emergency conditions; • preventive routine and non-routine maintenance and repairs are performed to the Treatment Plant and the Contractor's equipment in general, on a basis that ensures reliable and safe operation, and are performed by knowledgeable, trained and experienced personnel utilising suitable equipment, tools and procedures;
	• appropriate monitoring and testing is done to ensure that all equipment at the Treatment Plant and the Contractors equipment in general, is functioning as designed and to provide assurance that such equipment will function properly under normal conditions; • appropriate planned procedures are carried out to ensure the proper collection, transport, handling, treatment and disposal of the Waste, Residues and effluents under normal conditions and reasonably anticipated abnormal conditions; • the Department's Requirements, all Necessary Consents and all applicable Statutory Requirements are complied with.
Haemorrhagic Fevers	An acute, contagious, formidable diseases which includes Lassa fever, Rift Valley fever, Marburg and Ebola haemorrhagic fevers, Crimean- Congo haemorrhagic fever and yellow fever.
HCRW Vehicles	Means the vehicles used by the Contractor to transport Health Care Risk Waste.

Hospital	Means a Facility named as such in the List of Facilities and also which is otherwise added to the list during the contract period by the Department's representative
Implementation Period	Means for each Facility the period from when a Facility begins to use elements of the new Waste Management System until the new Waste Management System is fully implemented at that Facility.
Integrated Health Care Waste Management	Is a holistic and integrated course of action that specifies the institutional, infra-structural and technological support, as well as human and financial resources required to establish and implement an integrated Health Care Waste Management Strategy.
Landfill	To dispose of waste on land, whether by use of waste to fill in excavations or by creation of a landform above grade, where the term 'fill' is used in the engineering sense.
Large Order	Means a single order for supply of containers for a particular Facility exceeding 6 month's average consumption of the Disposable ordered by that Facility.
Liquid Wastes	Any waste material, whether it being hazardous or non-hazardous and that is identified to contain "free liquids", which readily separate from the solid portion of waste under ambient temperature and pressure.
List of Facilities	See Annexure 5 [List of Facilities] of the Project Specification.
Manifest System	A system for documenting and controlling the fate of HCRW from "cradle-to-grave".
Mobilisation Period	Means an uninterrupted period of 60 days commencing on the Contract Date.
Non-Combustion Treatment	Means any method, technique or process for microbial inactivation or for otherwise altering the biological, chemical or physical characteristic of Waste so as to render the Waste unrecognisable and in order to reduce the hazards it presents, and facilitate disposal by
	any means of technology which does not constitute controlled combustion treatment, including but not limited to autoclave treatment;
Necessary Consents	Means all consents, licenses, certificates, authorisations, permissions, approvals and permits of any Competent Authority and/or Interested Party that are necessary for the lawful performance of the Services and/or any of the Contractor's other obligations under this Contract.

Pathological Waste	Means tissues, organs, body parts, extracted teeth and or broken bones, human foetuses and deceased animals infected with zoonotic diseases, blood, and body fluids, but excludes teeth, hair and nails.
Planned Outage	Means any shutdown or stoppage affecting the operating capacity of the Treatment Plant or any part thereof, which is planned and of which the Department's Representative has been notified in writing, no later than 1 month before its occurrence.
Price Adjustment Factor	The Contractor shall be allowed to adjust the prices of Services and supplies at six monthly intervals, with the Price Adjustment Factor calculated in accordance with the Consumer Price Index (CPI), using the Core Inflation Rate for Metropolitan Areas (CIRMA).
Rollout	Means for each Facility the process of implementing the new Waste Management System.
Rollout Completion Date	Means the date occurring 12 months after the Contract Date.

Rollout Period	Means the period from the Commencement of Services Date to Rollout Completion Date.
Segregation	The systematic separation of solid waste into designated categories of HCGW and HCRW respectively.
Service Failure	Means the Contractor's failure to comply with certain requirements of the Contract. Service.
Services	Means the services, duties and obligations to be fulfilled by the Contractor in accordance with this Project Specification throughout the Services Period.
Services Period	Means the period from the Commencement of Services Date to the Expiry of the Contract.
Sharps Container	Means a disposable puncture resistant container which, when sealed, cannot be opened without great difficulty, and which is spill proof under normal handling conditions, used for the storage and transport of infected sharps items.
Specibin Container	Means a disposable puncture resistant container which, when sealed, cannot be opened without great difficulty, and which is spill proof under normal handling conditions, used for the storage and transport of infected pathological waste or waste generated in isolation wards.
Shredding	The process where Sterile Health Care Risk Waste is cut into an unrecognisable mixture of solid and fibrous matter.

Statutory Requirements	Means the requirements of any present or future Legislation, ordinance, proclamation, by–law, directive, decision, regulation, rule, order, notice or code of practice having the force of law in the Province;
Treatment	Means any method, technique, or process designed to change the biological character or composition of any Health Care Risk Waste so as to eliminate its potential for causing disease, pollution impact on the environment and risk to health.
Treatment Plant	Means the plant or plants used by the Contractor to Treat the Health Care Risk Waste.
Unit Price	Means the volumetric and mass price/ price per kilometre for collecting, transporting waste to the central collection point. treating and disposing of Health Care Risk Waste, as specified in the Schedule of Rates and Quantities.
Waste	Waste shall, for the purpose of this Contract, be relate to Health Care Risk Waste and considered to include: • General Infectious Waste; • Sharps Waste; • Pathological waste; • Chemical Waste/ Pharmaceutical waste; • Extraordinary Items.
Waste Collection Point	Means for each Facility, the location at which the Health Care Risk Waste is delivered to, by the Facilities, Disposable Containers and where the Contractor assumes responsibility of the Health Care Risk Waste. The Contractor shall during its Rollout establish, in consultation with each Facility, the location of each Health Care Risk Waste Collection Point.
Waste Management	All activities, administrative and operational, associated with the handling, transport, storage, treatment and disposal of Health Care Risk Waste. For the purpose of this tender it will also include the supply, distribution and maintenance of all disposable containers.
Waste Management System	Means Collectively the supply of Disposable Containers, the Collection and Transport of waste

PART 1
Conditions of Bid

1. BACKGROUND AND INTRODUCTORY PROVISIONS

Refer to Part 4 of this invitation to bid for background and introductory information relating to the Services and this invitation to bid.

ECDOH embarks on the process for the distribution of containers to the Clinics and Community Health Centres, the collection of waste from Clinics and Community Health Centres to the Central collection points for a period of 36 months.

2. OFFER AND SPECIAL CONDITIONS

2.1 Without detracting from the generality of clause 2.2 below, bidders must submit a completed and signed Invitation to Bid form (SBD 1) and requisite bid forms attached as Part 5) with their bids.

2.2 All bids submitted in reply to this invitation to bid should incorporate all the forms, parts, certificates and other documentation forming part of this invitation to bid, duly completed where required.

2.3 In the event that any form or certificate provided in Part 5 of this invitation to bid does not have adequate space for the bidder to provide the requested details, the bidder should attach an annexure to such form or certificate on which the requested details should be provided and the bidder should refer to such annexure in the form or certificate provided.

3. CLOSING TIME OF BIDS AND PROVISIONS RELATING TO SUBMISSION OF BIDS

3.1 The closing time for the receipt of bids in response to this invitation to bid is detailed on the cover page of this invitation to bid.

3.2 **All bids must be submitted via e-tender portal**.

3.3 All bids must be received before the closing time and date stipulated above and must be submitted on e-tender portal (www.etenders.gov.za) No late bid submission will be accepted.

Guide: How to submit a response to the E-tender Portal

1. ***(https://www.etenders.gov.za/)***
2. ***Click "Login"***
3. ***Select "Supplier Login"***
4. ***Type in your Central Supplier Database (CSD) login credentials.***
5. ***Click Browse Opportunities***
6. ***Select Currently Advertised.***
7. ***Click "+" on any tender opportunity you wish to apply for.***
8. ***Click on "Start eSubmission Process"***
9. ***Select Supplier***
10. ***Click "Start response"***
11. ***Check the submission checklist and attached the compulsory documents.***
12. ***Confirm and proceed.***

If you experience difficulties on eSubmission please contact:
012 406 9229 /012 406 9222 or email etenders@treasury.gov.za

4. ENQUIRIES

Should any bidder have any enquiries relating to this invitation to bid, such enquiries may only be addressed to the person/s detailed on the cover page to this invitation to bid at the number/s stipulated.

5. COMPULSORY BID BRIEFING

5.1 To enable a Bidder to attain a more detailed degree of knowledge of ECDOH's requirements, ECDOH intends to hold a **Compulsory Virtual Briefing Session on the 16th of November 2026 at 11h00, MICROSOFT TEAMS**

Meeting ID: 360 381 742 644 697
Passcode: bN34z7Lp
Link:
https://teams.microsoft.com/meet/360381742644697?p=t7qrv9xWFaJrE2NDJt

6. QUESTIONS AND ANSWER PROCESS

6.1 ECDOH will receive questions sent by Bidders by email to be directed to this email address: **lulama.hlangani@echealth.gov.za** ECDOH will in return respond to the questions by email to all registered prospective Bidders. Responses will include a copy of the questions and corresponding responses. The identity of a Bidder who has directed questions to ECDOH will not necessarily be disclosed by ECDOH in such responses.

7. PRICING

7.1 The bidder must submit details regarding the bid price for the Services on the Pricing Schedule form/s attached as Part 5 – Schedule B which completed form/s must be submitted together with the bid documents.

7.2 **Pricing must be stipulated INCLUSIVE OF VALUE ADDED TAX**

7.3 It is an express requirement of this invitation to bid that the bidders provide some transparency in respect to their pricing approach. In this regard, bidders must indicate the basis on which they have calculated their pricing by completing all aspects of the Pricing Schedule form Part 5 – Schedule B.

8. DECLARATION OF INTEREST

The bidder should submit a duly signed declaration of interest (SBD 4) together with the bid. The declaration of interest is attached as Part 5 – Schedule C.

9. QUALIFICATIONS OF BIDDERS

Bidders must submit detailed information **including certified copies of certificates** together with their bid of their experience in the relevant trade together with present contracts (**description of contract, contract period, contact person and telephone numbers**). These details should be submitted together with the bid on the form attached as Part 5 – Schedule D.

10. PARTNERSHIPS AND LEGAL ENTITIES

In the case of the bidder being a partnership, close corporation or a company all certificates (CK documents) reflecting the names, identity numbers and address of the partners, members or directors (as the case may be) must be submitted with the bid. These details should be submitted on the form attached as Part 5 – Schedule E

11. CONSORTIUM/JOINT VENTURE

1.1. It is recognized that bidders may wish to form consortia/Joint Ventures (JV) to provide the Services.

1.2. A bid in response to this invitation to bid by a consortium/JV shall comply with the following requirements: -

1.2.1 A Joint Venture shall be signed as to be legally binding on all consortium/JV members.

1.2.2. One of the members shall be nominated by the others as authorized to be the leading member and this authorization shall be included in the agreement entered between the consortia members.

1.2.3. The lead member shall be the only authorized party to make legal statements, communicate with the ECDOH and receive instructions for and on behalf of all the members of the consortium/JV. Failure to nominate an authorized lead member will invalidate the bid.

1.2.4. A copy of the agreement entered by the consortium/JV members shall be submitted with

1.2.5 Should the bidder be successful, they will be required to have a joint CSD created with the bank details of the JV- this is at contracting/award stage.

1.2.6 The lead party, as per JV agreement, may complete the SBD documents.

12. ORGANISATIONAL PRINCIPLES

The bidder should submit a clear indication of the envisaged authorized organisational principles, procedures and functions for an effective delivery of the required Service at the relevant Institutions with the bid. These details should be submitted on the form attached as Part 5 – Schedule F

13. DETAILS OF THE PROSPECTIVE BIDDERS NEAREST OFFICE TO THE LOCATION OF THE CONTRACT

The bidder should provide full details regarding the bidders nearest office to the Institutions at which the Services are to be provided (see Part 4 of this invitation to bid). These details should be provided on the form attached as Part 5 – Schedule G which completed form, must be submitted together with the bid.

14. FINANCIAL PARTICULARS

- Bidder must provide full details regarding its financial particulars and standing, which particulars should be submitted together with the bid on the form attached as Part 5- Schedule H. If no such details are submitted it would be assumed that the bidder is not in good standing with his/her financial institutions and his/her bid

may be regarded as non-responsive. Bidders must submit latest annual financial statements or Management accounts or Bank rating letter to assess financial viability**.**

15. PREFERENCE POINTS CLAIM FORMS

Part 5 – Schedule I contains the Preference Points Claim Forms in terms of Preferential Procurement Regulations to be completed and signed by the bidder to the extent applicable and returned with this bid.

16. VALIDITY

Bid documentation submitted by the bidder will be valid and open for acceptance for a period of **120 (one hundred and twenty)** calendar days from the closing date and time stipulated on the front cover of this invitation to bid.

17. ACCEPTANCE OF BIDS

The ECDoH does not bind itself to accept either the lowest or any other bid and reserves the right to accept the bid which it deems to be in the best interest of the State even if it implies a waiver by the State, the ECDoH, of certain requirements which the ECDoH, considers to be of minor importance and not complied with by the bidder.

18. NO RIGHTS OR CLAIMS

18.1 Receipt of the invitation to bid does not confer any right on any party in respect of the Services or in respect of or against the State, the ECDoH. The ECDoH reserves the right, in its sole discretion, to withdraw by notice to bidders any Services or combination of Services from the bid process, to terminate any party's participation in the bid process or to accept or reject any response to this invitation to bid on notice to the bidders without liability to any party. Accordingly, parties have no rights, expressed or implied, with respect to any of the Services as a result of their participation in the bid process.

18.2 Neither the State, the ECDoH, nor any of their respective directors, officers, employees, agents, representatives or advisors will assume any obligations for any costs or expenses incurred by any party in or associated with any appraisal and/or investigation relating to this invitation to bid or the subsequent submission of a bid in response to this invitation to bid in respect of the Services or any other costs, expenses or liabilities of whatsoever nature and incurred by bidders in connection with or arising out of the bid process.

19. NON DISCLOSURE, CONFIDENTIALITY AND SECURITY

19.1 The invitation to bid and its contents are made available on condition that they are used in connection with the bid process set out in the invitation to bid and for no other purpose. All information pertaining to this invitation to bid and its contents shall be regarded as restricted and divulged on a "need to know" bases with the approval of the ECDoH.

19.2 In the event that the bidder is appointed pursuant to this invitation to bid such bidder may be subject to security clearance prior to commencement of the Services.

20. ACCURACY OF INFORMATION

20.1 The information contained in the invitation to bid has been prepared in good faith. Neither the State, the Eastern Cape Provincial Government, the ECDoH nor any of their respective directors, advisors, officers, employees, agents, representatives make any representation or warranty or give any undertaking express or implied, or accept any responsibility or liability whatsoever, as to the contents, accuracy or completeness of the

information contained in the invitation to bid, or any other written or oral information made available in connection with the bid and nothing contained herein is, or shall be relied upon as a promise or representation, whether as to the past or the future.

20.2 This invitation to bid may not contain all the information that may be required to evaluate a possible submission of a response to this invitation to bid. The bidder should conduct its own independent analysis of the operations to the extent required to enable it to respond to this bid.

21. COMPETITION

21.1 Bidders and their respective officers, employees and agents are prohibited from engaging in any collusive action with respect to the biding process which serves to limit competition amongst bidders.

21.2 In general, the attention of bidders is drawn to Section 4(1)(iii) of the Competition Act 1998 (Act No. 89 of 1998) (the Competition Act) that prohibits collusive biding.

21.3 If bidders have reason to believe that competition issues may arise from any submission of a response to this bid invitation they may make, they are encouraged to discuss their position with the competition authorities before submitting response.

21.4 Any correspondence or process of any kind between bidders and the competition authorities must be documented in the responses to this invitation to bid.

22. RESERVATION OF RIGHTS

22.1 Without limitation to any other rights of the ECDoH (whether otherwise reserved in this invitation to bid or under law), the ECDoH expressly reserves the right to:-

22.2 Request clarification on any aspect of a response to this invitation to bid received from the bidder, such requests and the responses to be in writing.

22.3 Amend the bidding process, including the timetables, closing date and any other date at its sole discretion.

22.4 Reject all responses submitted by bidders and embark on a new bid process.

22.5 Award the bid to more than one bidder.

23. EVALUATION CRITERIA

The bid will be evaluated as follows:

- **Stage 1: Administrative Compliance**
- **Stage 2: Mandatory/ Non-Negotiable Requirements**
- **Stage 3: Functionality**
- **Stage 4: Price and Specific goals**

23.1 STAGE 1: ADMIN COMPLIANCE/ PRE-QUALIFICATION

23.1.1 ECDOH has defined administrative qualification criteria as per Preferential Procurement Regulations of 2022 that must be met by the Bidder for ECDoH to accept a bid for evaluation. In this regard a pre-qualification verification will be carried out by ECDoH to determine whether a bid complies in this regard.

23.1.2 Where the Bidder's bid fails to comply fully with any of the pre-qualification criteria, or ECDoH is for any reason unable to verify whether the pre-qualification criteria are fully complied with, ECDoH will have the right to reject the Bid in question and not to evaluate it at all;

23.1.2.1 give the Bidder an opportunity to submit and/or supplement the information and/or documentation provided by it under its Bid so as to achieve full compliance with the prequalification criteria, provided that such information and/or documentation can be provided within a period of 7 (seven) days, or such alternative period as ECDoH may determine, of it being requested by ECDoH and is administrative in nature, as opposed to forming a material part of the Bidder's Bid;

23.1.2.2 in any event permit the bid to be evaluated, subject to the outstanding information and/or documentation being submitted prior to the award of the Bid.

23.1.2.3 The bid documentation must be completed comprehensively and correctly.

23.1.2.4 All SBD forms must be completed and signed.

23.1.2.5 Bidder must be registered on the CSD and attach proof.

23.1.2.6 No bids will be considered from persons in the service of the state, companies with directors who are persons in the service of the state, or close corporations with member's persons in the service of the state

23.1.3 Bidders must have provided supporting documentation as per the bid requirements.

23.2 STAGE 2: MANDATORY COMPLIANCE / NON-NEGOTIABLE REQUIREMENTS

The following mandatory compliance requirements shall apply:

23.2.1 Invitation to Bid (SBD1), SBD 3.3 and SBD 4 must be completed and signed

23.2.2 In the case of a Joint Venture/Consortium where applicable, a copy of the valid agreement entered into by the consortium/JV members must be submitted with the bid.

23.2.3 Bidders must have attended the **compulsory** Bid Briefing & Information Meeting and be recorded as such in the register

22.2.4 Availability/accessibility to a purposefully designed and equipped vehicles as per Part 4 bid specifications requirements for vehicles. (attach: Vehicle registration documents/ agreement letter with the hiring company in line with the National Road Traffic Act including colour photo of the vehicle interior and exterior)

22.2.5 Attach Haz Chem certificate for the Driver from an accredited training service provider. (NQF Level 3)

23.3 STAGE 3: FUNCTIONALITY

ITEM	EVALUATION CRITERIA	Available Points	DOCUMENTARY EVIDENCE
1	**Methodology** (understanding) of approach to delivery of service category and compliance with Service Level requirements as per Part 4 of bid specifications a. Contingency plan - 15 • Transportation = 5 • Accidental Spills Management = 5 • Emergency Procedures = 5	**15**	A written contingency plan that addresses how transportation will be done in case of emergency where the vehicle in use is not available. How accidental spills will be managed and what steps will be followed during an accident.
2	**Bidder/s must submit proof of address for the District they are bidding for:** Within the District = 20 points Outside the District = 15 points Outside Eastern Cape Province = 0 points	**20**	Municipal account/ letter from ward councillor reflecting or confirming address accompanied by an affidavit from Commissioner of Oaths /Valid Lease agreement with proof of rental payment for 3 months / letter from SARS or letter from the government authority or a bank statement with address. Either one of the above must be provided for the District that is being bidded for.
	Total	**35**	

NOTE: Bidder must obtain a minimum threshold of 30 points out of 35 to proceed to the next stage

A bidder who scores less than 30 points will not be considered further.

23.4 STAGE 4: PRICE AND SPECIFIC GOALS

Responsive bids which comply to the 2nd stage evaluation will be evaluated on the 80/20preference point system in terms of The Preferential Procurement Policy Framework Act, 2000 (act 5 of 2000) and Preferential Regulations, 2022. In terms of regulation 6 of the preferential procurement regulations pertaining to The Preferential Procurement Policy Act (Act 5 Of 2000), responsive bids will be adjudicated by the department on the 80/20- preference points system in terms of which points are awarded to bidders based on:

- The bid price (maximum 80 points)
- Specific goals (maximum 20 points)

The following formula will be used to calculate the points for price:

Ps=80(1-Pt-P min) _____ P min

Where

Ps = Points scored for comparative price of bid under consideration

Pt = Comparative price of bid under consideration

Pmin = Comparative price of lowest acceptable bid

The following table must be used to calculate the score out of 20 points for Specific Goals.

-BBEE Status Level of Contribution	**Weighting (of 20 POINTS)**	**Number of points (80/20 system)**
Historically Disadvantage Individuals:		
○ Race	20%	4
○ Women	20%	4
○ Disability	20%	4
Youth	20%	6
Military Veterans	5%	2
TOTAL	100%	20

a) A tenderer must submit proof of its Specific Goals.

b) A tenderer failing to submit proof of specific Goals will not be disqualified, but will only score point out of 80 price, and scores 0 points out of 20 for Specific Goals.

c) The Specific Goals supporting documents required to verify claimed points may in line with the specific requirements include:

- CSD report (must be recent within 7 days from closing date):
- CIPC Certificate reflecting percentage ownership or controlling interest OR CSD report reflecting percentage ownership as verified from CIPC and ID copies (must be certified with original stamp within 3 months from closing date of bid/quote):
- Medical Certificate / Doctor's medical report (Impairment should be substantially limiting long term or of recurring nature)
- Municipal accounts or affidavit from commissioner of oaths or letter from ward councilor confirming proof of address or letter from SARS or letter from the government authority or a bank statement with address.
- Letter from Department of Military Veterans confirming the status.

The points scored for the specific goal shall be added to the points scored for price and the total shall be rounded off to the nearest two decimal places.

23.5 STAGE 5: IN LOCO INSPECTION

The Department reserves the right to physically verify contents that are contained in the technical evaluation**.**

In loco inspection will be conducted to the shortlisted bidders by Eastern Cape Department of Health.

PART 2
Conditions of Contract and Operational Requirements

1. CONTRACT

The service provider for the supply of the required Service in terms of this invitation to bid shall come into being on the date of issue of the letter of acceptance of the bidders bid by the Eastern Cape Department of Health (ECDoH). The successful bidder must be prepared to sign service level agreement with the department for a minimum period of 36 months.

2. FEES AND CHARGES

2.1 Kilometres (km) travelled will be paid in accordance with and within the prevailing AA (Automobile Association) rates for that specific engine capacity.

2.2 Payment of any consideration in terms of the contract shall not constitute acceptance of any defective or non-conforming Services or otherwise relieve contractor of any of its obligations under the contract.

2.3 To the extent that the ECDoH disputes the correctness, nature, extent or calculation of any fees or expenses payable to contractor in terms of the contract, ECDoH shall be entitled to withhold payment of such disputed amounts until such time as such dispute is resolved.

3. SERVICE MANAGER

The Contractor shall provide the Services in accordance with the service specifications and service levels detailed in the Specification and any service level agreement implemented.

4. GENERAL RESPONSIBILITIES OF THE CONTRACTOR

4.1 The ECDoH's operational requirements.

The contractor shall, in the provision of the required service, have due regard to the operational requirements of the ECDoH and other parties occupying or operating from the relevant institution, and shall not do, or permit to be done, anything which may negatively impact on such parties' operational requirements.

4.2 Problem identification and reporting.

The contractor shall be proactive in reporting any matters which it may become aware of which may impact on the business continuity or operations of the ECDoH at the relevant institution, clinic and office. Without detracting from the generality of this statement, contractor shall:-

4.3 Other Service Providers The contractor acknowledges that it may be required to provide the Services in conjunction with third party service providers and shall, where requested by the ECDoH, cooperate fully with such persons.

4.4 Regulations and statutes The contractor shall, in the provision of the Services observe and comply with all relevant provisions of all applicable legislation and regulations.

4.5 Compliance with procedures.

It is recorded that during the currency of the contract the ECDoH may implement procedures and policies at the relevant Institution. The contractor shall comply fully with any such reasonable procedures and policies, including the permit to work procedures and health and safety procedures.

4.6 Health and Safety procedures

The contractor shall ensure that it and its personnel shall at all times comply fully with any safety, fire, emergency and security procedures and policies applicable at the relevant Institution.

4.7 Compliance procedures

Should the ECDoH at any time believe that any member of contractor's personnel is failing to comply with any such procedures or policies, the ECDoH shall be entitled to deny such personnel member access to the relevant premises and require contractor to replace such person without delay.

4.8 Contractor's procedures

The contractor shall, upon receipt of written request from the ECDoH or its appointed Technical Support Manager at **the relevant Institution**

Provide the ECDoH with copies of all contractor's operating procedures and processes relating to the Services;

4.9 Provision of Services in clean and tidy manner.

The contractor shall ensure that the Services are provided in a clean and tidy manner.

4.10 Operational report

- A record of the Disposable Containers delivered with information on type and numbers for each Facility;
- A record of the Waste collected with information about volume for each Waste category collected from the various Facilities in the Province, as well as details on the destination of the Waste;
- Operational failures by the Department
- Operational failures by Facilities, e.g. overloading of containers, segregation challenges.
- Any emergencies conducted/implemented.

4.11 Financial Report:

- Price Adjustment Factors during the previous year;
- Advice on actual and anticipated cash flow for each district.

4.12 BI-Annual Report

The bi-annual report shall be submitted to the Department's Representative in final draft no later than 1 month after the six calender months. The first bi-annual Report shall cover the period from Commencement of Services Date to the end of the six months in which the Commencement of Services Date occurs.

4.13 Incident Report

- The contents of incident reports cannot be foreseen at this stage but the purpose of each incident report shall be to keep the Department's Representative fully updated and informed of all activities and actions concerning the emergency. Incidents reports will further be used for immediate and detailed reporting on any accidents that impacted on the health and safety of people, as well as environmental situations that created a risk of pollution.
- A signed Incident reports shall be forwarded in electronic form to the Department's Representative by no later than noon the following day.

5. HAZARDOUS MATERIALS

The contractor will be held liable for any expenses that may be incurred by the ECDOH as a result of damage to property and injury to personnel as a result of poor quality products or services.

6. FIRE RISKS

The contractor shall ensure that its personnel shall, if at any time they believe that any matter constitutes a fire risk, report this immediately to the ECDoH/Institution and take such remedial action as may be necessary.

7. ENERGY MANAGEMENT

The contractor shall comply fully with the energy management strategy implemented at the relevant Institution from time to time and shall provide the Services in an energy efficient manner.

8. OCCUPATIONAL HEALTH AND SAFETY

In this clause the term "Act" shall mean the Occupational Health & Safety Act, No. 85 of 1993, as amended from time to time, (including any act which may take its place should it be repealed during the currency of the agreement between the parties) as read with all regulations and standards promulgated in terms of the former Machinery and Occupational Act, No 6 of 1983, as amended, and all regulations & standards promulgated in terms of the Occupational Health & Safety Act from time to time;

The contractor:-

- acknowledges that he is fully aware of the terms and conditions of the Act;
- acknowledges that he is an employer in its own right with duties and responsibilities as prescribed in the Act;
- agrees to comply with all rules and regulations implemented by or on behalf of the ECDoH at the relevant Institution in covering letter relating to health and safety and will inform the ECDoH immediately should contractor for any reason be unable to comply with the provisions of the Act and such rules and regulations.
- The Contractor is to familiarise itself and comply with all safety regulations and statutes governing HCW management activities. The safety of all of the Contractor's personnel, its subcontractor's personnel, as well as that of any Facility staff members or members of the public affected by the execution of the Services, shall be the sole responsibility of the Contractor.
- The Contractor is to submit copies of its operational health and safety plan that shall be designed to ensure the health and safety of any persons involved in or affected by the management of HCRW.
- This health and safety plan should fully conform to the requirements of the South African Occupational Health and Safety (OHS) Act, and the Contractor shall ensure that all of it's employees adhere to the requirements stipulated in the plan. A description is to be provided of amongst others all equipment, procedures, training, and other measures that will be taken to ensure the health and safety of all personnel working on the project, or being affected by the project.
- The Contractor shall in its Health and Safety Plan describe the vaccination programme that is implemented for all workers, as well as the antiretroviral treatment that will be available to workers in the event of needle stick injuries. Daily records of the Contractor's, as well as subcontractor's, employees Waste handling operations should be kept and all occupational health and safety incidents that may have been experienced during the day is to be reported, particularly with respect to any needle stick injuries or other abrasions of the skin.
- All the Contractor's and subcontractor's employees (whether permanent or temporary) shall be adequately insured and no untrained persons shall be allowed to carry out any work under this Contract.

Health and Safety: - Reports

- Summarised outcome of medical examinations undertaken on staff;
- Vaccination programme;
- Antiretroviral treatment programme;
- Accident report and measures taken to prevent a reoccurrence thereof;
- Supply and usage of Personal Protective Equipment (PPE)
- Compliance with OHS Act.

9. SERVICE LEVEL AGREEMENT

It is recorded that the ECDoH and the service provider may from time to time agree in writing to additional quality requirements (whether engaged in a service contract or when repair is required out of guarantee without the maintenance contract option) and standards relating to the maintenance together with performance measurement provisions, which quality requirements, performance

measurement provisions shall be reduced to writing in a service level agreement if required and signed by both parties.

10. PERFORMANCE MEASUREMENT PROVISIONS

10.1 Introduction

Contractor shall provide the Services during the term of the contract in compliance with the quality and related standards stipulated in the Specifications, Bid Conditions and the service level agreement contemplated in clause 9 above.

The provisions of Clause 10 of the document contains the manner in which contractor's performance will be measured throughout the term of the contract.

10.2 Compliance

For purposes of the contract the compliance by contractor with the stipulated responsibilities and service standards will be determined:

- with reference to reports provided by contractor;
- with reference to reports or complaints received from third parties;
- by means of service reviews, inspections or any audit carried out by or on behalf of the ECDoH.

10.3 Records

Contractor shall at all times keep full and accurate records of all Services provided in terms of the contract and shall retain such records for the currency of the contract. Upon termination of the contract such records must be provided to the ECDoH upon request.

10.4 Measurement of performance

- Periodic checks: ECDoH and/or its appointed Technical Support Manager shall carry out periodic checks (the intervals to be determined by ECDoH) the purpose of which shall be to determine whether contractor is providing the Services in accordance with the terms and conditions of the contract if accepted by ECDoH.
- Service complaints: All service complaints, deviations, nonconforming services and suggestions that are reported to contractor by ECDoH, its appointed facilities manager, or any other party shall be given proper and speedy consideration by contractor. The Contractor shall investigate complaints, deviations and nonconforming services in accordance with procedures approved by the ECDoH.
- User satisfaction survey: A user satisfaction survey may be conducted by ECDoH at such intervals as ECDoH may determine to assess service user satisfaction. The user satisfaction survey shall be conducted in such form and in accordance with such procedures as the parties may agree to in writing from time to time.

10.5 Results of checks, audits and surveys

ECDoH shall be entitled to utilise the findings of the surveys, checks, audits and reports contemplated above to determine compliance by contractor with the service standards and responsibilities stipulated in the contract. It is recorded that the results of the above checks shall, save to the extent that contractor can prove otherwise be binding on contractor and ECDoH shall be entitled to exercise its remedies stipulated in the contract based on such findings.

10.6 Communication

10.6.1 Meetings

- Annual Project Meetings shall be held between the Department's Representative and the Contractor. The purpose of the Annual Project Meeting shall be to review the Health Care Waste Management in the district, followed by a strategic discussion around any special actions to be taken during the following year.
- Should either party require any meetings in addition to the Annual Project Meetings, such meeting shall be convened by giving, unless otherwise agreed, at least 1 weeks' prior written notice to the other party. The Contractor shall at all meetings be represented by a person suitable qualified and authorised to make commitments and enter into agreements on behalf of the Contractor. Establish waste management forum per region.

10.6.2 Reporting

The requirements for reporting to be fulfilled by the Contractor shall comprise preparing and delivering to the Department's Representative:

- Copies of all reports required by the Necessary Statutory Requirements;
- Bi-Annual Reports;
- Incident Reports;

10.6.2.1 Bi-Annual Report

The Bi-annual Report shall describe in detail the previous semester events and activities including all events that have affected the Contractor's fulfilment of its obligations under this Contract. Furthermore, this report shall include a detailed plan for the next calendar year describing planned events and activities, including a plan for handling all of the expected waste streams. Copies of the Bi-annual report are to be delivered to all stakeholders at least two weeks prior to the Annual Project Meeting.

The Contractor shall ensure that each bi-annual report shall, at minimum, contain the following information:

- Special events (events that have influence on the Contractor's obligations), i.e.
- Failures by the Department or other parties, e.g. late payments;

- The Contractor's Services Failures including the summary of deductions if any imposed during the relevant year.

11. BREACH AND TERMINATION

Bidders are referred to Paragraph 23 of General Conditions of Contract (GCC) relating to failure to comply with conditions of this contract.

12. LOSS AND DAMAGE

Contractor hereby indemnifies the State, and will hold the State harmless, against any loss or damages which the State may suffer, or any claims lodged against the State by any third party arising out of or relating to any loss that the State or such third party may suffer as a result of, or arising out of any act or omission of any personnel of contractor or the failure of contractor to provide the Services in accordance with the provisions of the contract.

PART 3
BID STRATEGY

The Eastern Cape Department of Health seeks to appoint the service provider for the distribution of containers to the public Clinics and Community Health Centres, the collection of medical (health care risk) waste from Clinics and Community Health Centres to the Central collection points for a period of 36 months.

This bid is divided into six (6) Health Districts. The Health District or Metro is made up of all community health centres and clinics and are listed below:

1. Alfred Nzo Health District
2. OR Tambo Health District
3. Joe Gqabi Health District
4. Amathole Health District and Buffalo City Metro Health District (regarded as one (1) District)
5. Chris Hani Health District
6. Sarah Baartman Health District and Nelson Mandela Metro Health District (regarded as one (1) District)

It is a standard requirement that the ECDOH is compelled to utilise the prescribed containers and accessories as explained in this specification and supplied by the contractor for HCRW (Class A and Class B Waste, excluding Domestic Waste).

The Department will appoint one service provider per District. The service provider/s will be responsible for distribution of containers and collection of waste from the community health centers and clinics to the central collection point/nearest hospital/CHC per district. Where there are insufficient or responsive bidders in any District, the department reserves the right to negotiate and appoint bidders for other districts.

The Department reserves the right to negotiate the rates with shortlisted bidders to match the market rate.

NB: The provision of containers to Sub-District offices will be the responsibility of another service provider

BIDDERS MUST INDICATE BY TICKING BELOW THE DISTRICT/S THEY ARE BIDDING FOR:

DISTRICT	**TICK**
Alfred Nzo Health District	
OR Tambo Health District	
Joe Gqabi Health District	
Amathole Health District and Buffalo City Metro Health District	
Chris Hani Health District	
Sarah Baartman Health District and Nelson Mandela Metro Health District	

PART 4
BID SPECIFICATIONS

1. Background

Health care risk waste is considered to be waste arising from medical, nursing, dental, pharmaceutical, forensic pathology [mortuaries] emergency medical services [ambulances], investigation, treatment, care, teaching or research which by the nature of its toxic, infectious (pathological or anatomical waste and sharps) or chemical content (pharmaceutical, cytotoxic, genotoxic and heavy metal wastes) may prove a hazard or give offence unless previously rendered safe and inoffensive. Such waste includes human and animal tissue or excretions, drugs and medical products, swabs and dressing, instruments or similar substances and materials.

2. Scope and period of the service

The bid specification calls for the following:

a. Distribute health care waste containers to the public clinics and Community Health Centers (CHCs) excluding private clinics for a period of 36 months.
b. Collect health care risk waste from the clinics and CHC's to the central collection points being a public hospital or CHC within that District as identified by the Health District
c. Provide safe, effective and efficient handling and removal of medical waste on site from the temporary storage to central collection point, transportation and safe off loading and safe storage at the identified hospitals or CHCs.
d. The service provider must at all times adhere to the statutory requirements of HCRW management
e. The service provider must put in place precautionary measures for the health and safety of workers and the public.
f. Provide monitoring systems and reports to the department of health, capturing quantities, challenges and steps taken to overcome challenges.

3. The Facilities

- The Facilities to be serviced by the Contractor under this Contract are community health centers (CHCs) and clinics excluding private clinics.
- The Contractor shall service all Facilities which are included in the List. The List of Facilities is presented in Annexure B [List of Health Facilities].
- This list can be amended by the Department during the Contract Period. The Department shall give the Contractor written notice of any amendments to the List of Facilities. The Contractor shall upon receiving such notice, liaise with Facilities added

to the list and arrange with the Department and the Facility for the commencement of Services at that Facility. Likewise, the Contractor shall in consultation with the Department and the Facility terminate its Services to Facilities that may be removed from the list.

4. The Waste

- Health Care Risk Waste (HCRW) is considered to be the hazardous component of Health Care Waste (HCW) generated in both large and small health care facilities. HCRW has the potential to create a number of environmental, health and safety risks, depending on the particular HCRW category, the way in which it is handled, as well as the way in which exposure takes place.

- Waste shall, for the purpose of this Contract, be considered to include:
    - General Infectious Waste;
    - Sharps Waste;
    - Pathological waste.
    - Pharmaceutical waste
    - Extraordinary waste

4.1 General Infectious Waste

General Infectious Waste includes HCRW, other than Sharps Waste and Pathological Waste, which is suspected to contain pathogens and normally causes, or significantly contributes to the cause of increased morbidity or mortality of human beings. It inter alia includes items such as blood, contaminated dressings, contaminated diapers or any other disposable items suspected of being infectious.

4.2 Sharps Waste

Sharps Waste includes any device having acute rigid corners, edges, or protuberances capable of cutting or piercing, including, but not limited to, all of the following:

- Hypodermic needles, syringes and blades with or without attached tubing; and
- Broken glass items, such as Pasteur pipettes and blood vials contaminated with infectious materials.

Sharps Waste will be containerized in Sharps Containers by the respective Facilities, prior to it being removed from the Facilities by the Contractor.

4.3 Pathological Waste

Pathological waste includes tissues, organs, body parts, human foetuses, blood and body fluids.

5. Distribution of Disposable Containers

The Contractor shall as part of its obligations, throughout the Services Period, distribute Disposable Containers to all Facilities. Disposable Containers shall include the following:

- Sharps Containers,
- Specibin Containers for Pathological Waste;
- Red liners for General Infectious Waste, including sealing mechanisms for liner i.e cable tiers. Yellow liners for condemned linen Pharmaceutical waste containers.
- Box sets

Disposable Containers shall be delivered to the Facilities by the Contractor as communicated by the facility.

6. Disposable Containers delivery point

- The District Office in liaising with the CHC or Clinics shall determine the acceptable delivery times and locations to which Disposable Containers shall be delivered.
- The disposable containers must be delivered during scheduled Waste collection rounds, **the contractor will** be responsible to ensure that new containers are not contaminated during the transportation and delivery thereof.

7. Waste Storage Responsibility of Health Facility

- The Head of institution should designate a half way storage site (for temporary storage of HCRW/medical waste) within the clinic where waste will be placed for collection/removal by the contractor's staff.
- The temporary storage should be secured under lock and key at all times, avoiding spills or any other secondary nuisance.
- Waste containers should be labelled with the name of the clinic, consulting room, opening and closing dates.
- PHC facility staff will segregate and place all HCRW/Medical waste into the designated and prescribed HCRW containers and be responsible for the in-house movement thereof, from the waste storage points in the consulting rooms to the temporary storage site.

- Each waste storage point will be identified with a biohazardous signage stating the purpose of the site.
- Storage and transportation of filled and sealed containers and any other hazardous waste shall comply with the requirements of the relevant legislation.

8. Collection of the Waste

The Facility is responsible for the collection and the internal transportation of the containerized Waste, from the consulting rooms to the Waste Collection Point.

Responsibility of the Contractor

- The Contractor shall ensure that no Waste is left unattended between the time when it is removed from the Waste Collection Point and the time when it was delivered to the central collection point.

- The Contractor shall collect Waste from the Facilities in accordance with the Collection Programme.

- The Contractor shall notify the affected Facilities and the Department's Representative of changes to the Collection Programme, 1 week prior to such changes taking effect. The Contractor shall at all times ensure that the Department's Representative as well as the respective Facilities are provided with the latest version of the Collection Programme.

Waste collection rounds shall be undertaken between 8:00 and 15:30 on agreed days of the week. Waste collection outside of the aforesaid hours shall only be permitted if the Contractor agrees with the Facility in writing, provided also that the Department's Representative has been informed in writing of this agreement.

9. Frequency of Waste Collection

Type of Facility	**Collection Frequency**
CHCs and Clinics	Once a month / subject to the change in legislation during the course of the contract

10. Recording of Waste collected

1. The bidder must be able to provide his/her own manifest register which would have to be filled for each consignment of Waste collected, the bidder shall record the following information:

   a) Name of the clinic
   b) Type (volume) and number of Containers;
   c) Waste categories, i.e. general infectious waste, pathological waste.

d) Time and date of collection;

e) Driver details;

f) Details of facility representative witnessing Waste collection;

g) Details of facility or central collection point representative witnessing delivery of waste

h) The bidder is required to sign the manifest register in the facility.

i) Employees must at all times wear protective clothing (Overalls, heavy duty gloves, masks, safety boots and these **must be available on the day of the inspection**).

11. Transport

11.1 Requirements for transportation

The Contractor shall transport all Waste from the facilities to central collection points.

The Contractor shall at all times observe the required health and safety measures and shall avoid spillage of Waste. In the event of spillage occurring, it shall immediately be removed by the Contractor.

11.2 Requirements for the HCRW Vehicles

- HCRW Vehicles used by the Contractor to transport Waste shall be for the sole purpose of transporting HCRW and may not be used for any other purposes.
- All HCRW Vehicles shall comply to meet the standards laid down by the National Road Traffic Act (Act 93 of 1996), as well as any relevant legislation.
- Access to the HCRW Vehicle's loading compartment shall be safe and unobstructed, thus ensuring easy access for the Contractor's staff.
- Storage compartments on HCRW Vehicles shall not have any holes or openings that could result in leaking of liquids that may have spilt from containers.
- The inner surface of the HCRW Vehicle's storage compartment shall be smooth and rust free by being galvanised or manufactured from stainless steel or other materials approved by the Competent Authorities.
- The internal finish of the storage compartment shall further allow for easy cleaning, e.g. angles shall be rounded and surfaces shall be smooth, without any material joints creating the opportunity for dirt collection.
- There shall be a bulkhead between the drivers cabin and load compartment, designed to retain the load, in order to protect the driver, should the vehicle be involved in an accident.
- Vehicle should be designed to have two compartments: clean compartment and dirty area
- All HCRW Vehicles shall be equipped with emergency equipment required by the Necessary Consents. This Equipment shall as a minimum include spill kits

containing all personal protective equipment like masks, gloves and overalls, as well as folded HCRW containers, brooms, scoops and disinfectants, red tape and fire extinguishers.

- The contractors shall be familiar with the emergency procedures whilst also trained in the effective use of such emergency equipment. Each vehicle must be manned by trained teams
- and marked with the international logo for bio-hazardous waste (including contractor information and emergency contact telephone number) and equipped with radio contact or mobile phone.
- Vehicle operators or any other person who comes into contact with HCRW during collection, transportation and disposal should be immunised against Hepatitis B (this to be verified before the commencement date).
- Strict security regarding access to vehicles is required (these to be verified during in loco inspection) and safe loading procedure will be made possible with the vehicle.
- In the event of an accident the successful bidder should take responsibility for any event or indemnity outside/inside the clinic premises.
- The bidder should submit drivers Hazchem certificates.
- Provide the list of vehicles to be used and if during the contract a new vehicle is provided it must meet the same specification requirements.
- The contractor to provide details of such vehicle/s for inspection purposes before use.

Organisation:

- Key Personnel;
- Other staff;
- Subcontractors;
- Suppliers;
- Changes in organisation.

12. Backup arrangements

The Contractor shall further prevent a backlog in the delivery of disposable containers, as well as prevent a build-up of Waste at any of the Facilities, due to unforeseen breakage of Waste collection vehicles, by:

- Ensuring access to and securing the use of additional Waste collection vehicles that are in compliance with these Specifications;
- Increasing the container delivery and Waste collection shifts to the extent that all deliveries and collection is in accordance with the approved schedule, provided that this arrangement is conveyed to and agreed by the Facilities to ensure the

availability of staff at the Facilities for the verification of containers delivered and Waste collected.

The availability of backup Waste vehicles during routine maintenance of the Waste Collection fleet would not be considered justification by the Contractor for requesting increased Waste collection shifts from the Facilities.
Labour unrest or strikes shall not be considered to be reason for any shortage in the delivery of disposable containers, or any build-up of waste at the facilities.

13. Contingency Plan

A contingency plan for dealing with any disruption of service will be in place and includes:

13.1 Transportation

A back-up vehicle to ensure the smooth running of the service in case of vehicle maintenance or traffic accidents or breakdown.

13.2 Management of accidental spills

A detailed procedure on how the spills will be managed using the spill kit

13.3 Emergency Procedures

A detailed procedure on how to manage all types of accidents or emergencies by trained and equipped team that is on standby for 24-hours.

14. Statutes Relating To Waste Management

The handling, transportation, treatment, disposal and storage of all health care risk waste /medical waste must be in compliance with the following legislation, guidelines and Codes of practice listed below but not limited to

14.1 National Legislation

a) The Constitution of South Africa Act, Act 108 of 1996
b) National Health Act, Act 61 of 2003
c) Hazardous Substances Act, Act 15 of 1973
d) National Environmental Management Act, Act 107 of 1998
e) National Water Act, Act 36 of 1998
f) White Paper on Integrated Pollution and Waste Management (2000)
g) Human Tissue Act No 65 of 1983
h) The Medicine and Related Substances Control Act, Act No. 101 of 1965
i) Occupational Health and Safety Act, Act 85 of 1993
j) National Environmental Management: Air Quality Act, 39 of 2004
k) National Road Traffic Act, Act 93 of 1996
l) Nuclear Energy Act, Act 46 of 1999

m) National Nuclear Energy Regulation Act, Act 47 of 1999
n) The Dumping at Sea Control Act, Act 73 of 1980
o) Municipal and other regulatory authority laws and regulations controlling the transport of hazardous substances.
p) Waste Act, 59 of 2008,

14.2 International Legislation

a) Basel Convention (1992): Technical Guidelines on the Environmentally Sound Management of Biomedical and Healthcare Waste (2001).
b) Agenda 21 (1992): Chapters 6, 9, 18, 19, 20, 21, 22 - Application to HCRW management.
c) Stockholm Convention (2002): United Nations Convention on Persistent Organic Pollutants.

14.3 Government Guidelines and Requirements

a) Department of Water Affairs and Forestry: Minimum requirements for Waste Disposal by Landfill, Second edition, 1998.
b) Department of Water Affairs and Forestry: Minimum requirements for the Handling, Classification and Disposal of Hazardous Waste, Second edition, 1998.
c) Department of Environmental Affairs and Tourism: Framework Document on the Management of Health Care Waste, 2000.
d) Department of Environmental Affairs and Tourism: National Waste Management Strategy Action Plan for Waste Treatment and Disposal, Version C (1999).

14.4 Codes of Practice

Several S.A.B.S. Codes of practice (which should be observed) relate to waste management:

a) SANS Code 10248-1 2008. Handling and disposal of waste materials within health care facilities.
b) SANS Code 10228: 1995.The identification and classification of dangerous substances and goods.
c) SANS Code 10229: 1996. Packaging of dangerous goods for road and rail transportation in South Africa.
d) SABS Code 0230: 1997. Transportation of dangerous goods: Inspection requirements for road vehicles.
e) SABS Code 0231: 1997. Transportation of dangerous goods: Operational requirements for road vehicles.

f) SABS Code 0232-1: 1995. Transportation of dangerous goods, Part 1: Emergency information systems for road transportation.

g) SABS Code 0232-2: 1995. Transportation of dangerous goods, Part 2: Emergency information systems for rail transportation.

h) SABS Code 0232-3:1995. Transportation of dangerous goods, Part 3: Emergency action codes.]

i) SABS Code 0232-3: 1995. Annexure A Emergency response handbook.

PART 5:
Schedule A

Schedule A
Government Procurement
General Conditions of Contract

Annexure A

NOTES

The purpose of this document is to:

(i) Draw special attention to certain general conditions applicable to government bids, contracts and orders; and
(ii) To ensure that clients be familiar with regard to the rights and obligations of all parties involved in doing business with government.

In this document words in the singular also mean in the plural and vice versa and words in the masculine also mean in the feminine and neuter.

- The General Conditions of Contract (GCC) will form part of all bid documents and may not be amended.

- Special Conditions of Contract (SCC) relevant to a specific bid, should be compiled separately for every bid (if applicable) and will supplement the General Conditions of Contract. Whenever there is a conflict, the provisions in the SCC shall prevail.

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General Conditions of Contract

1. Definition 1. The following terms shall be interpreted as indicated:

1.1 "Closing time" means the date and hour specified in the bidding documents for the receipt of bids.

1.2 "Contract" means the written agreement entered into between the purchaser and the supplier, as recorded in the contract form signed byparties, including all attachments and appendices thereto and all documents incorporated by reference therein.

1.3 "Contract price" means the price payable to the supplier under the contract for the full and proper performance of his contractual obligations.

1.4 "Corrupt practice" means the offering, giving, receiving, or soliciting of any thing of value to influence the action of a public official in the procurement process or in contract execution.

1.5 "Countervailing duties" are imposed in cases where an enterprise abroad is subsidized by its government and encouraged to market its products internationally.

1.6 "Country of origin" means the place where the goods were mined, grown or produced or from which the services are supplied. Goods are produced when, through manufacturing, processing or substantial and major assembly of components, a commercially recognized new product results that is substantially different in basic characteristics or in purpose or utility from its components.

1.7 "Day" means calendar day.

1.8 "Delivery" means delivery in compliance of the conditions of the contract or order.

1.9 "Delivery ex stock" means immediate delivery directly from stock actually on hand.

1.10 "Delivery into consignees store or to his site" means delivered and unloaded in the specified store or depot or on the specified site in compliance with the conditions of the contract or order, the supplier bearing all risks and charges involved until the supplies are so delivered and a valid receipt is obtained.

1.11 "Dumping" occurs when a private enterprise abroad market its goods on own initiative in the RSA at lower prices than that of the country of origin and which have the potential to harm the local industries in the RSA.

1.12 ” Force majeure” means an event beyond the control of the supplier and not involving the supplier’s fault or negligence and not foreseeable.

Such events may include, but is not restricted to, acts of the purchaser in its sovereign capacity, wars or revolutions, fires, floods, epidemics, quarantine restrictions and freight embargoes.

1.13 “Fraudulent practice” means a misrepresentation of facts in order to influence a procurement process or the execution of a contract to the detriment of any bidder, and includes collusive practice among bidders (prior to or after bid submission) designed to establish bid prices at artificial non-competitive levels and to deprive the bidder of the benefits of free and open competition.

1.14 “GCC” means the General Conditions of Contract.

1.15 “Goods” means all of the equipment, machinery, and/or other materials that the supplier is required to supply to the purchaser under the contract.

1.16 “Imported content” means that portion of the bidding price represented by the cost of components, parts or materials which have been or are still to be imported (whether by the supplier or his subcontractors) and which costs are inclusive of the costs abroad, plus freight and other direct importation costs such as landing costs, dock dues, import duty, sales duty or other similar tax or duty at the South African place of entry as well as transportation and handling charges to the factory in the Republic where the supplies covered by the bid will be manufactured.

1.17 “Local content” means that portion of the bidding price which is not included in the imported content provided that local manufacture does take place.

1.18 “Manufacture” means the production of products in a factory using labour, materials, components and machinery and includes other related value-adding activities.

1.19 “Order” means an official written order issued for the supply of goods or works or the rendering of a service.

1.20 “Project site,” where applicable, means the place indicated in bidding documents.

1.21 “Purchaser” means the organization purchasing the goods.

1.22 “Republic” means the Republic of South Africa.

1.23 “SCC” means the Special Conditions of Contract.

1.24 “Services” means that functional services ancillary to the supply of the goods, such as transportation and any other incidental services, such as installation, commissioning, provision of technical assistance, training, catering, gardening, security, maintenance and other such obligations of the supplier covered under the contract.

1.25 "Written" or "in writing" means handwritten in ink or any form of electronic or mechanical writing.

2. Application 2.1 These general conditions are applicable to all bids, contracts and orders including bids for functional and professional services, sales, hiring,letting and the granting or acquiring of rights, but excluding immovable property, unless otherwise indicated in the bidding documents.

2.2 Where applicable, special conditions of contract are also laid down to cover specific supplies, services or works.

2.3 Where such special conditions of contract are in conflict with these general conditions, the special conditions shall apply.

3. General 3.1 Unless otherwise indicated in the bidding documents, the purchaser shall not be liable for any expense incurred in the preparation and submission of a bid. Where applicable a non-refundable fee for documents may be charged.

3.2 With certain exceptions, invitations to bid are only published in the Government Tender Bulletin. The Government Tender Bulletin may be obtained directly from the Government Printer, Private Bag X85, Pretoria 0001, or accessed electronically from www.treasury.gov.za

4. Standards 4.1 The goods supplied shall conform to the standards mentioned in the bidding documents and Terms of Reference.

5. Use of Contract documents and information. inspection. 5.1 The supplier shall not, without the purchaser's prior written consent, disclose the contract, or any provision thereof, or any Terms of Reference, plan, drawing, pattern, sample, or information furnished by or on behalf of the purchaser in connection therewith, to any person other than a person employed by the supplier in the performance of the contract. Disclosure to any such employed person shall be made in confidence and shall extend only so far as may be necessary for purposes of such performance.

5.2 The supplier shall not, without the purchaser's prior written consent, make use of any document or information mentioned in GCC clause 5.1 except for purposes of performing the contract.

5.3 Any document, other than the contract itself mentioned in GCC clause. 5.1 the property of the purchaser shall remain and shall be returned (all copies) to the purchaser on completion of the supplier's performance under the contract if so required by the purchaser.

5.4 The supplier shall permit the purchaser to inspect the supplier's records relating to the performance of the supplier and to have them audited by auditors appointed by the purchaser, if so required by the purchaser.

6. Patent rights 6.1 The supplier shall indemnify the purchaser against all third-party claims of infringement of patents, trademark, or industrial design rights arising from use of the goods or any part thereof by the purchaser.

7. Performance

Security

7.1 Within thirty (30) days of receipt of the notification of contract award, the successful bidder shall furnish the purchaser the performance security of the amount specified in SCC.

7.2 The proceeds of the performance security shall be payable to the purchaser as compensation for any loss resulting from the supplier's failure to complete his obligations under the contract.

7.3 The performance security shall be denominated in the currency of the contract, or in a freely convertible currency acceptable to the purchaser and shall be in one of the following forms:

(a) a bank guarantee or an irrevocable letter of credit issued by a reputable bank located in the purchaser's country or abroad, acceptable to the purchaser, in the form provided in the bidding documents or another form acceptable to the purchaser; or

(b) a cashier's or certified cheque

7.4 The performance security will be discharged by the purchaser and returned to the supplier not later than thirty (30) days following the date of completion of the supplier's performance obligations under the contract, including any warranty obligations, unless otherwise specified in SCC.

8. Inspections, tests and analyses

8.1 All pre-bidding testing will be for the account of the bidder.

8.2 If it is a bid condition that supplies to be produced or services to be rendered should at any stage during production or execution or on completion be subject to inspection, the premises of the bidder or contractor shall be open, at all reasonable hours, for inspection by a representative of the Department or an organization acting on behalf of the Department.

8.3 If there are no inspection requirements indicated in the bidding documents and no mention is made in the contract, but during the contract period it is decided that inspections shall be carried out, the purchaser shall itself make the necessary arrangements, including payment arrangements with the testing authority concerned.

8.4 If the inspections, tests and analyses referred to in clauses 8.2 and 8.3 show the supplies to be in accordance with the contract requirements, the cost of the inspections, tests and analyses shall be defrayed by the purchaser.

8.5 Where the supplies or services referred to in clauses 8.2 and 8.3 do not comply with the contract requirements, irrespective of whether such supplies or services are accepted or not, the cost in connection with these inspections, tests or analyses shall be defrayed by the supplier.

8.6 Supplies and services which are referred to in clauses 8.2 and 8.3 and which do not comply with the contract requirements may be rejected.

8.7 Any contract supplies may on or after delivery be inspected, tested or analyzed and may be rejected if found not to comply with the requirements of the contract. Such rejected supplies shall be held at the cost and risk of the supplier who shall, when called upon, remove them immediately at his own cost and forthwith substitute them with supplies which do comply with the requirements of the contract. Failing such removal the rejected supplies shall be returned at the suppliers' cost and risk. Should the supplier fail to provide the substitute supplies forthwith, the purchaser may, without giving the supplier further opportunity to substitute the rejected supplies, purchase such supplies as may be necessary at the expense of the supplier.

8.8 The provisions of clauses 8.4 to 8.7 shall not prejudice the right of the purchaser to cancel the contract on account of a breach of the conditions thereof, or to act in terms of Clause 23 of GCC.

9. Packing 9.1 The supplier shall provide such packing of the goods as is required to prevent their damage or deterioration during transit to their final destination, as indicated in the contract. The packing shall be sufficient to withstand, without limitation, rough handling during transit and exposure to extreme temperatures, salt and precipitation during transit, and open storage. Packing, case size and weights shall take into consideration, where appropriate, the remoteness of the goods' final destination and the absence of heavy handling facilities at all points in transit.

9.2 The packing, marking, and documentation within and outside the packages shall comply strictly with such special requirements as shall be expressly provided for in the contract, including additional requirements, if any, specified in SCC, and in any subsequent instructions ordered by the purchaser.

10. Delivery and documents

10.1 Delivery of the goods shall be made by the supplier in accordance with the terms specified in the contract. The details of shipping and/or other documents to be furnished by the supplier are specified in SCC.

10.2 Documents to be submitted by the supplier are specified in SCC.

11. Insurance 11.1 The goods supplied under the contract shall be fully insured in a freely convertible currency against loss or damage incidental to manufacture or acquisition, transportation, storage and delivery in the manner specified in the SCC.

12. Transportation

12.1 Should a price other than an all-inclusive delivered price be required, this shall be specified in the SCC.

13. Incidental

Services 13.1 The supplier may be required to provide any or all of the following services, including additional services, if any, specified in SCC:

(a) performance or supervision of on-site assembly and/or commissioning of the supplied goods.

(b) furnishing of tools required for assembly and/or maintenance of the supplied goods.
(c) furnishing of a detailed operations and maintenance manual for each appropriate unit of the supplied goods.
(d) performance or supervision or maintenance and/or repair of the supplied goods, for a period of time agreed by the parties, provided that this service shall not relieve the supplier of any warranty obligations under this contract; and
(e) training of the purchaser's personnel, at the supplier's plant and/or on-site, in assembly, start-up, operation, maintenance, and/or repair of the supplied goods.

13.2 Prices charged by the supplier for incidental services, if not included in the contract price for the goods, shall be agreed upon in advance by the parties and shall not exceed the prevailing rates charged to other parties by the supplier for similar services.

14. Spare parts 14.1 As specified in SCC, the supplier may be required to provide any or all of the following materials, notifications, and information pertaining to spare parts manufactured or distributed by the supplier:

(a) such spare parts as the purchaser may elect to purchase from the supplier, provided that this election shall not relieve the supplier of
any warranty obligations under the contract; and
(b) in the event of termination of production of the spare parts:
(i)Advance notification to the purchaser of the pending termination, in sufficient time to permit the purchaser to procure needed requirements; and
(ii) following such termination, furnishing at no cost to the purchaser, the blueprints, drawings, and Terms of Reference of the spare parts, if requested.

15. Warranty 15.1 The supplier warrants that the goods supplied under the contract are new, unused, of the most recent or current models, and that they incorporate all recent improvements in design and materials unless provided otherwise in the contract. The supplier further warrants that all goods supplied under this contract shall have no defect, arising from design, materials, or workmanship (except when the design and/or material is required by the purchaser's Terms of Reference) or from any act or omission of the supplier, that may develop under normal use of the supplied goods in the conditions prevailing in the country of final destination.

15.2 This warranty shall remain valid for twelve (12) months after the goods, or any portion thereof as the case may be, have been delivered to and accepted at the final destination indicated in the contract, or for eighteen (18) months after the date of shipment from the port or place of loading in the source country, whichever period concludes earlier, unless specified otherwise in SCC.

15.3 The purchaser shall promptly notify the supplier in writing of and claims arising under this warranty.

15.4 Upon receipt of such notice, the supplier shall, within the period specified in SCC and with all reasonable speed, repair or replace the defective goods or parts thereof, without costs to the purchaser.

15.5 If the supplier, having been notified, fails to remedy the defect(s) within the period specified in SCC, the purchaser may proceed to take such remedial action as may be necessary, at the supplier's risk and expense and without prejudice to any other rights which the purchaser may have against the supplier under the contract.

16. Payment 16.1 The method and conditions of payment to be made to the supplier under this contract shall be specified in SCC.

16.2 The supplier shall furnish the purchaser with an invoice accompanied by a copy of the delivery note and upon fulfillment of other obligations stipulated in the contract.

16.3 Payments shall be made promptly by the purchaser, but in no case later than thirty (30) days after submission of an invoice or claim by the supplier.

16.4 Payment will be made in Rand unless otherwise stipulated in SCC.

17. Prices 17.1 Prices charged by the supplier for goods delivered and services performed under the contract shall not vary from the prices quoted by the supplier in his bid, with the exception of any price adjustments authorized in SCC or in the purchaser's request for bid validity extension, as the case may be.

18. Contract Amendments 18.1 No variation in or modification of the terms of the contract shall be made except by written amendment signed by the parties concerned.

19. Assignment 19.1 The supplier shall not assign, in whole or in part, its obligations to perform under the contract, except with the purchaser's prior written consent.

20. Subcontracts 20.1 The supplier shall notify the purchaser in writing of all subcontracts awarded under these contracts if not already specified in the bid. Such notification, in the original bid or later, shall not relieve the supplier from any liability or obligation under the contract.

21. Delays in the suppliers performance 21.1 Delivery of the goods and performance of services shall be made by the supplier in accordance with the time schedule prescribed by the purchaser in the contract.

21.2 If at any time during performance of the contract, the supplier or its subcontractor(s) should encounter conditions impeding timely delivery of the goods and performance of services, the supplier shall promptly notify the purchaser in writing of the fact of the delay, its likely duration and its cause(s). As soon as practicable after receipt of the supplier's notice, the purchaser shall evaluate the situation and may at his discretion extend the supplier's time for performance, with or without the imposition of penalties, in which case the extension shall be ratified by the parties by amendment of contract.

21.3 No provision in a contract shall be deemed to prohibit the obtaining of supplies or services from a national department, provincial department, or a local authority.

21.4 The right is reserved to procure outside of the contract small quantities or to have minor essential services executed if an emergency arises, the supplier's point of supply is not situated at or near the place where the supplies are required, or the supplier's services are not readily available.

21.5 Except as provided under GCC Clause 25, a delay by the supplier in the performance of its delivery obligations shall render the supplier liable to the imposition of penalties, pursuant to GCC Clause 22, unless an extension of time is agreed upon pursuant to GCC Clause

21.2 without the application of penalties.

21.6 Upon any delay beyond the delivery period in the case of a supplies contract, the purchaser shall, without canceling the contract, be entitled to purchase supplies of a similar quality and up to the same quantity in substitution of the goods not supplied in conformity with the contract and to return any goods delivered later at the supplier's expense and risk, or to cancel the contract and buy such goods as may be required to complete the contract and without prejudice to his other rights, be entitled to claim damages from the supplier.

22. Penalties 22.1 Subject to GCC Clause 25, if the supplier fails to deliver any or all of the goods or to perform the services within the period(s) specified in the contract, the purchaser shall, without prejudice to its other remedies under the contract, deduct from the contract price, as a penalty, a sum calculated on the delivered price of the delayed goods or unperformed services using the current prime interest rate calculated for each day of the delay until actual delivery or performance. The purchaser may also consider termination of the contract pursuant to GCC Clause 23.

23. Termination for default 23.1 The purchaser, without prejudice to any other remedy for breach of contract, by written notice of default sent to the supplier, may terminate this contract in whole or in part:

(a) if the supplier fails to deliver any or all of the goods within the period(s) specified in the contract, or within any extension thereof granted by the purchaser pursuant to GCC Clause 21.2;
(b) if the Supplier fails to perform any other obligation(s) under the contract; or
(c) if the supplier, in the judgment of the purchaser, has engaged in corrupt or fraudulent practices in competing for or in executing the contract.

23.2 In the event the purchaser terminates the contract in whole or in part, the purchaser may procure, upon such terms and in such manner as it deems appropriate, goods, works or services similar to those undelivered, and the supplier shall be liable to the purchaser for any excess costs for such similar goods, works or services. However, the supplier shall continue performance of the contract to the extent not terminated.

24. Anti-dumping and countervailing duties and rights

24.1 When, after the date of bid, provisional payments are required, or antidumping or countervailing duties are imposed, or the amount of a provisional payment or anti-dumping or countervailing right is increased in respect of any dumped or subsidized import, the State is not liable for any amount so required or imposed, or for the amount of any such increase. When, after the said date, such a provisional payment is no longer required or any such anti-dumping or countervailing right is abolished, or where the amount of such provisional payment or any such right is reduced, any such favourable difference shall on demand be paid forthwith by the contractor to the State or the State may deduct such amounts from moneys (if any) which may otherwise be due to the contractor in regard to supplies or services which he delivered or rendered, or is to deliver or render in terms of the contract or any other contract or any other amount which may be due to him

25. Force Majeure

25.1 Notwithstanding the provisions of GCC Clauses 22 and 23, the supplier shall not be liable for forfeiture of its performance security, damages, or termination for default if and to the extent that his delay in performance or other failure to perform his obligations under the contract is the result of an event of force majeure.

25.2 If a force majeure situation arises, the supplier shall promptly notify the purchaser in writing of such condition and the cause thereof. Unless otherwise directed by the purchaser in writing, the supplier shall continue to perform its obligations under the contract as far as is reasonably practical, and shall seek all reasonable alternative means for performance not prevented by the force majeure event.

26. Termination for insolvency

26.1 The purchaser may at any time terminate the contract by giving written notice to the supplier if the supplier becomes bankrupt or otherwise insolvent. In this event, termination will be without compensation to the supplier, provided that such termination will not prejudice or affect any right of action or remedy which has accrued or will accrue thereafter to the purchaser.

27. Settlement of Disputes

27.1 If any dispute or difference of any kind whatsoever arises between the purchaser and the supplier in connection with or arising out of the contract, the parties shall make every effort to resolve amicably such dispute or difference by mutual consultation.

27.2 If, after thirty (30) days, the parties have failed to resolve their dispute or difference by such mutual consultation, then either the purchaser or the supplier may give notice to the other party of his intention to commence with mediation. No mediation in respect of this matter may be commenced unless such notice is given to the other party.

27.3 Should it not be possible to settle a dispute by means of mediation, it may be settled in a South African court of law.

27.4 Mediation proceedings shall be conducted in accordance with the rules of procedure specified in the SCC.

27.5 Notwithstanding any reference to mediation and/or court proceedings herein,

(a) the parties shall continue to perform their respective obligations under the contract unless they otherwise agree; and
(b) the purchaser shall pay the supplier any monies due the supplier.

28.1 Except in cases of criminal negligence or willful misconduct, and in the case of infringement pursuant to Clause 6;

(a) the supplier shall not be liable to the purchaser, whether in contract, tort, or otherwise, for any indirect or consequential loss or damage, loss of use, loss of production, or loss of profits or interest costs, provided that this exclusion shall not apply to any obligation of the supplier to pay penalties and/or damages to the purchaser; and
(b) the aggregate liability of the supplier to the purchaser, whether under the contract, in tort or otherwise, shall not exceed the total contract price, provided that this limitation shall not apply to the cost of repairing or replacing defective equipment.

29. Governing Language 29.1 The contract shall be written in English. All correspondence and other documents pertaining to the contract that is exchanged by the parties shall also be written in English.

30. Applicable Law 30.1 The contract shall be interpreted in accordance with South African laws, unless otherwise specified in SCC.

31. Notices 31.1 Every written acceptance of a bid shall be posted to the supplier concerned by registered or certified mail and any other notice to him shall be posted by ordinary mail to the address furnished in his bid or to the address notified later by him in writing and such posting shall be deemed to be proper service of such notice

31.2 The time mentioned in the contract documents for performing any act after such aforesaid notice has been given, shall be reckoned from the date of posting of such notice.

32. Taxes and Duties 32.1 A foreign supplier shall be entirely responsible for all taxes, stamp duties, license fees, and other such levies imposed outside the purchaser's country.

32.2 A local supplier shall be entirely responsible for all taxes, duties, license fees, etc., incurred until delivery of the contracted goods to the purchaser.

32.3 No contract shall be concluded with any bidder whose tax matters are not in order. Prior to the award of a bid the Department must be in possession of a tax clearance certificate, submitted by the bidder.
This certificate must be an original issued by the South African Revenue Services.

Part 5 - Schedule B
Pricing Schedule

SBD 3.2

PRICING SCHEDULE – NON-FIRM PRICES (PURCHASES)

NOTE: PRICE ADJUSTMENTS WILL BE ALLOWED AT THE PERIODS AND TIMES SPECIFIED IN THE BIDDING DOCUMENTS.

IN CASES WHERE DIFFERENT DELIVERY POINTS INFLUENCE THE PRICING, A SEPARATE PRICING SCHEDULE MUST BE SUBMITTED FOR EACH DELIVERY POINT

NAME OF BIDDER: ..... BID NO.:
CLOSING TIME 11:00 CLOSING DATE:

OFFER TO BE VALID FOR 120 DAYS FROM THE CLOSING DATE OF BID.

CHRIS HANI HEALTH DISTRICT

Section 1: Delivery of containers and accessories, collection and transportation of HCRW					
Item No	**Item Description**	**Unit**	**Indicative kilometres p/month**	**Bid Price Incl Vat per km(Rand)**	**Total Bid price incl Vat for the year (Rand)**
1.1	Disposable containers: Cost to distribute waste container to PHC facilities, collect and transport waste from PHC facilities in Chris Hani Health District				
1.2	Chris Hani Health District AA rate of Engine Capacity for vehicle used to transport	p/km	6876		
	Rate of driver per transport frequency				
	Rate of PPE used during said transport frequency				
	Rate of spill kit available during said transport frequency				
Section 2 - Total Bid Price for the 1st year (Rand)					
Section 3- Total bid price for 2nd year (Rand)					
Section 4 - Total Bid Price for the 3rd year (Rand)					

AMATHOLE HEALTH DISTRICT AND BUFFALO CITY METRO HEALTH DISTRICT

Section 1: Delivery of containers and accessories, collection and transportation of HCRW				
Item Description	**Unit**	**Indicative kilometres p/month**	**Bid Price Incl Vat per km(Rand)**	**Total Bid price incl Vat for the year (Rand)**
Disposable containers: Cost to distribute waste container to PHC facilities, collect and transport waste from PHC facilities in Amathole Health District and Buffalo City Metro Health District				
Amathole Health District and Buffalo City Metro Health District AA rate of Engine Capacity for vehicle used to transport	p/km	6470		
Rate of driver per transport frequency				
Rate of PPE used during said transport frequency				
Rate of spill kit available during said transport frequency				
Section 2 - Total Bid Price for the 1st year (Rand)				
Section 3- Total bid price for 2nd year (Rand)				
Section 4 - Total Bid Price for the 3rd year (Rand)				

SARAH BAARTMAN HEALTH DISTRICT AND NELSON MANDELA METRO HEALTH DISTRICT

Section 1: Delivery of containers and accessories, collection and transportation of HCRW				
Item Description	**Unit**	**Indicative kilometres p/month**	**Bid Price Incl Vat per km(Rand)**	**Total Bid price incl Vat for the year (Rand)**
Disposable containers: Cost to distribute waste container to PHC facilities, collect and transport waste from PHC facilities in Sarah Baartman and Nelson Mandela Health Districts				
Sarah Baartman Health District and Nelson Mandela Metro Health District AA rate of Engine Capacity for vehicle used to transport	p/km	4898		
Rate of driver per transport frequency				
Rate of PPE used during said transport frequency				
Rate of spill kit available during said transport frequency				
Section 2 - Total Bid Price for the 1st year (Rand)				
Section 3- Total bid price for 2nd year (Rand)				
Section 4 - Total Bid Price for the 3rd year (Rand)				

OR TAMBO HEALTH DISTRICT

Section 1: Delivery of containers and accessories, collection and transportation of HCRW				
Item Description	**Unit**	**Indicative kilometres p/month**	**Bid Price Incl Vat per km(Rand)**	**Total Bid incl Vat price for the year (Rand)**
Disposable containers: Cost to distribute waste container to PHC facilities, collect and transport waste from PHC facilities in OR Tambo Health District				
OR Tambo Health District AA rate of Engine Capacity for vehicle used to transport	p/km	6109		
Rate of driver per transport frequency				
Rate of PPE used during said transport frequency				
Rate of spill kit available during said transport frequency				
Section 2 - Total Bid Price for the 1st year (Rand)				
Section 3- Total bid price for 2nd year (Rand)				
Section 4 - Total Bid Price for the 3rd year (Rand)				

JOE GQABI HEALTH DISTRICT

Section 1: Delivery of containers and accessories, collection and transportation of HCRW				
Item Description	**Unit**	**Indicative kilometres p/month**	**Bid Price incl Vat per km(Rand)**	**Total Bid price incl Vat for the year (Rand)**
Disposable containers: Cost to distribute waste containers to PHC facilities, collect and transport waste from PHC facilities in Joe Gqabi Health District				
Joe Gqabi Health District AA rate of Engine Capacity for vehicle used to transport	p/km	3300		
Rate of driver per transport frequency				
Rate of PPE used during said transport frequency				
Rate of spill kit available during said transport frequency				
Section 2 - Total Bid Price for the 1st year (Rand)				
Section 3- Total bid price for 2nd year (Rand)				
Section 4 - Total Bid Price for the 3rd year (Rand)				

ALFRED NZO HEALTH DISTRICT

Section 1: Delivery of containers and accessories, collection and transportation of HCRW				
Item Description	**Unit**	**Indicative kilometres p/month**	**Bid Price Incl Vat per km(Rand)**	**Total Bid price incl Vat for the year (Rand)**
Disposable containers: Cost to distribute waste container to PHC facilities, collect and transport waste from PHC facilities in Alfred Nzo Health District				
Alfred Nzo Health District AA rate of Engine Capacity for vehicle used to transport	p/km	2910		
Rate of driver per transport frequency				
Rate of PPE used during said transport frequency				
Rate of spill kit available during said transport frequency				
Section 2 - Total Bid Price for the 1st year (Rand)				
Section 3- Total bid price for 2nd year (Rand)				
Section 4 - Total Bid Price for the 3rd year (Rand)				

BID PRICE IN RSA CURRENCY ** (ALL APPLICABLE TAXES INCLUDED)

_____

- **Brand and model……N/A……**

- **Does the offer comply with the specification(s)?**
  ***YES/NO** - **If not to specification, indicate deviation(s)**
  …….

- **Period required for delivery (7 working days from receipt of a purchase order)**
  ……. YES/NO

-
***Delivery: Firm**

- **Delivery basis (Part- delivery) ……. YES/NO**

Note: All delivery costs and/ overheads must be included in the bid price, for delivery at the prescribed destination.

**** "all applicable taxes" includes value- added tax, pay as you earn, income tax, unemployment insurance fund contributions and skills development levies.**

***Delete if not applicable**

Signature

……..

……..
Capacity / Position

SBD 3.2

PRICE ADJUSTMENTS

A NON-FIRM PRICES SUBJECT TO ESCALATION

1. IN CASES OF PERIOD CONTRACTS, NON FIRM PRICES WILL BE ADJUSTED (LOADED) WITH THE ASSESSED CONTRACT PRICE ADJUSTMENTS IMPLICIT IN NON FIRM PRICES WHEN CALCULATING THE COMPARATIVE PRICES

2. IN THIS CATEGORY PRICE ESCALATIONS WILL ONLY BE CONSIDERED IN TERMS OF THE FOLLOWING FORMULA:

Where:

Pa = The new escalated price to be calculated.
(1-V)Pt = 85% of the original bid price. **Note that Pt must always be the original bid price and not an escalated price.**
D1, D2.. = Each factor of the bid price eg. labour, transport, clothing, footwear, etc. The total of the various factors D1, D2…etc. must add up to 100%.
R1t, R2t…… = Index figure obtained from new index (depends on the number of factors used).
R1o, R2o = Index figure at time of bidding.
VPt = 15% of the original bid price. This portion of the bid price remains firm i.e. it is not subject to any price escalations.

3. The following index/indices must be used to calculate your bid price:

Index……. Dated……. Index……. Dated……. Index……. Dated…….

Index……. Dated……. Index……. Dated……. Index……. Dated…….

4. FURNISH A BREAKDOWN OF YOUR PRICE IN TERMS OF ABOVE-MENTIONED FORMULA. THE TOTAL OF THE VARIOUS FACTORS MUST ADD UP TO 100%.

FACTOR (D1, D2 etc. eg. Labour, transport etc.)	**PERCENTAGE OF BID PRICE**

B PRICES SUBJECT TO RATE OF EXCHANGE VARIATIONS

1. Please furnish full particulars of your financial institution, state the currencies used in the conversion of the prices of the items to South African currency, which portion of the price is subject to rate of exchange variations and the amounts remitted abroad.

PARTICULARS OF FINANCIAL INSTITUTION	ITEM NO	PRICE	CURRENCY	RATE	PORTION OF PRICE SUBJECT TO ROE	AMOUNT IN FOREIGN CURRENCY REMITTED ABROAD
				ZAR=		
				ZAR=		
				ZAR=		
				ZAR=		
				ZAR=		
				ZAR=		

2. Adjustments for rate of exchange variations during the contract period will be calculated by using the average monthly exchange rates as issued by your commercial bank for the periods indicated hereunder: (Proof from bank required)

AVERAGE MONTHLY EXCHANGE RATES FOR THE PERIOD:	DATE DOCUMENTATION MUST BE SUBMITTED TO THIS OFFICE	DATE FROM WHICH NEW CALCULATED PRICES WILL BECOME EFFECTIVE	DATE UNTIL WHICH NEW CALCULATED PRICE WILL BE EFFECTIVE

Prices should be inclusive of VAT.

Any enquiries regarding bidding procedures may be directed to:

Mrs L. Tshangela
Department of Health
Global Life Office Centre
Phalo Avenue
Bisho

Part 5 – Schedule C
Declaration of Interest

SBD4

BIDDER'S DISCLOSURE

1. PURPOSE OF THE FORM

1.1 Any person (natural or juristic) may make an offer or offers in terms of this invitation to bid. In line with the principles of transparency, accountability, impartiality, and ethics as enshrined in the Constitution of the Republic of South Africa, 1996 (Constitution), and further expressed in the various applicable legislation, it is required for the bidder to make this declaration in respect of the details required hereunder.

1.2 If a person is listed in the Register for Tender Defaulters and/or the List of Restricted Suppliers, that person will automatically be disqualified from the bid process.

2. DECLARATION ON EMPLOYMENT BY ORGAN OF STATE

2.1 Is the bidder, or any of the directors / trustees / shareholders / members / partners of the bidder employed by an organ of state, as defined in section 239 of the Constitution?
YES/NO

2.2 If YES, furnish particulars of the names, individual identity numbers, in the table below:

Full Name	**Identity Number**	**Name of organ of state**

1 the power, by one person or a group of persons holding the majority of the equity of an enterprise, alternatively, the person/s having the deciding vote or power to influence or to direct the course and decisions of the enterprise.

2.3 Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution? **YES/NO**

2.3.1 If so, furnish particulars:
……
……

2.4 Does the bidder or any of its directors/trustees/shareholders members/partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise, whether or not they are bidding for this contract? **YES/NO**

2.4.1 If so, indicate all companies registered in the CSD in the table below:

Supplier registration number (MAAA)	**Status (active/inactive/deleted)**

Failure to disclose all CSD-registered active companies linked to all Directors will lead to disqualification**.**

3 GENERAL DECLARATION

I, ……....., the undersigned, in submitting the accompanying bid, do hereby make the following statements that I certify to be true and complete in every respect:

3.1 I have read and I understand the contents of this disclosure.

3.2 I understand that the accompanying bid will be disqualified if this disclosure is found to be false.

3.3 The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor.

3.4 In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications, prices, including methods, factors or formulas used to calculate prices, market allocation, the intention or decision to submit or not to submit the bid, bidding with the intention not to win the bid and conditions or delivery particulars of the products or services to which this bid invitation relates.

3.5 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.

3.6 There have been no consultations, communications, agreements or arrangements made by the bidder with any official of the procuring institution in relation to this procurement process prior to and during the bidding process except to provide clarification on the bid submitted where so required by the institution; and the bidder was not involved in the drafting of the specifications or terms of reference for this bid.

3.7 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, 1998 (Act No. 89 of 1998) and or may be referred to law enforcement agencies for criminal investigation and or may be restricted from conducting business with the state for a period not exceeding 10 years in terms of the Prevention and Combating of Corrupt Activities Act, 2004 (Act No. 12 of 2004) or any other applicable legislation.

I CERTIFY THAT THE ABOVE IS CORRECT.

I ACCEPT THAT THE PROCURING INSTITUTION MAY REJECT THE BID OR TAKE APPROPRIATE ACTION AGAINST ME IF THIS DECLARATION IS FALSE.

……	……
Signature	Date
……	……...
Designation	Name of bidder

Part 5 – Schedule D
Qualifications and Experience

1. Details of the extent of the bidders' activities and business, e.g., branches etc.:

2. A list of existing /previous contracts relating to services which are similar to the Services:

Description of Contract	Period	Contact Person & Tel No.

   (Please provide contactable references)

3. The number of years that the bidder has been in the business of providing services which are materially the same as the Services:

4. The name of the person who shall manage the Services:

5. Detail such person's qualifications and experience below:

.....

SIGNATURE OF (ON BEHALF OF) BIDDER

.....

NAME IN CAPITALS

In the presence of:

1. _____

2. _____

Part 5 – Schedule D
Qualifications and Experience

6. Details of the extent of the bidders' activities and business, e.g., branches etc.:

_____
_____
_____

7. A list of existing /previous contracts relating to services which are similar to the Services:

Description of Contract	Period	Contact Person & Tel No.

(Please provide contactable references)

8. The number of years that the bidder has been in the business of providing services which are materially the same as the Services:

_____

9. The name of the person who shall manage the Services:

_____

10. Detail such person's qualifications and experience below :

_____
_____
_____
_____

.....

SIGNATURE OF (ON BEHALF OF) BIDDER

.....

NAME IN CAPITALS

In the presence of:

1. _____

2. _____

Part 5 – Schedule E
Organisation Type

PARTNERSHIP/CLOSED CORPORATION/COMPANY
(Delete which is not applicable)

The bidder comprises of the following partners/members/directors:

1. NAME _____

   ADDRESS: _____

   ID NUMBER: _____

2. NAME : _____

   ADDRESS : _____

   ID NUMBER: _____

3. NAME : _____

   ADDRESS : _____

   ID NUMBER: _____

4. NAME : _____

   ADDRESS : _____

   ID NUMBER: _____

5. NAME : _____

   ADDRESS : _____

   ID NUMBER: _____

.....

SIGNATURE OF (ON BEHALF OF) BIDDER

.....

NAME IN CAPITALS

In the presence of :

1. _____ .....

2. _____ _____

Part 5 Schedule F
Organisational Structure

1. Provide full details of the organizational structure which will be utilized in the provision of the Services (including where appropriate an organogram)

.....

SIGNATURE OF (ON BEHALF OF) BIDDER

.....

NAME IN CAPITALS

In the presence of :

1. _____

2. _____

Schedule G
Details of Supplier's Nearest Office

1. Physical address of supplier's office

_____

_____

_____

_____

2. Telephone No of office: _____

3 . Time period for which such office has been used by supplier: _____

SIGNATURE OF (ON BEHALF OF) BIDDER

.....

NAME IN CAPITALS

In the presence of:

1. _____

2. _____

Schedule H

Financial Particulars

This schedule must be completed by the bidder and submitted together with the bid. **Documentary proof confirming availability of financial resources to execute the contract from the bidder's financial institution in the form of a rating letter or financial statements.** If this requirement is not complied with in full the bid may be considered invalid.

Nature of Service:

Name of bidder:

Bid Number: _____

	FINANCIAL POSITION OF BIDDER I/we hereby certify that I/we have the necessary financial capacity and resources to execute the above contract successfully for the bid amount. I / we hereby attach letter confirming availability of financial resources from the financial institution. I / we give the ECDOH permission to contact the financial institution below to confirm the information provided. In the absence of the above, a letter confirming that the bidder has applied for financial assistance from any financial institution and that the institution is willing to favorably consider such application in the event that the bidder is successful, will also satisfy the Department.
NAME OF FINANCIAL INSTITUTION	
ADDRESS	
TEL.NO	
FAX NO	
CONTACT PERSON	

.....

SIGNATURE OF (ON BEHALF OF) BIDDER

.....

NAME IN CAPITALS

In the presence of:

1. _____

2. .....

PART 5 SCHEDULE I

SBD 6.1

PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022

This preference form must form part of all tenders invited. It contains general information and serves as a claim form for preference points for specific goals.

NB: BEFORE COMPLETING THIS FORM, TENDERERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF THE TENDER AND PREFERENTIAL PROCUREMENT REGULATIONS, 2022

---

1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to invitations to tender:

- the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- the 90/10 system for requirements with a Rand value above R50 000 000 (all applicable taxes included).

1.2 To be completed by the organ of state

(*delete whichever is not applicable for this tender*)

a) The applicable preference point system for this tender is the 80/20 preference point system.

b) 80/20 preference point system will be applicable in this tender. The lowest/ highest acceptable tender will be used to determine the accurate system once tenders are received.

1.3 Points for this tender (even in the case of a tender for income-generating contracts) shall be awarded for:

(a) Price; and

(b) Specific Goals.

1.4 To be completed by the organ of state:

The maximum points for this tender are allocated as follows:

	POINTS
PRICE	80
SPECIFIC GOALS	20
Total points for Price and SPECIFIC GOALS	**100**

1.4 Failure on the part of a tenderer to submit proof or documentation required in terms of this tender to claim points for specific goals with the tender, will be interpreted to mean that preference points for specific goals are not claimed.

1.5 The organ of state reserves the right to require of a tenderer, either before a tender is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the organ of state.

2. DEFINITIONS

(a) **"tender"** means a written offer in the form determined by an organ of state in response to an invitation to provide goods or services through price quotations, competitive tendering process or any other method envisaged in legislation;

(b) **"price"** means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;

(c) **"rand value"** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

(d) **"tender for income-generating contracts"** means a written offer in the form determined by an organ of state in response to an invitation for the origination of income-generating contracts through any method envisaged in legislation that will result in a legal agreement between the organ of state and a third party that produces revenue for the organ of state, and includes, but is not limited to, leasing and disposal of assets and concession contracts, excluding direct sales and disposal of assets through public auctions; and

(e) **"the Act"** means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

3.1. POINTS AWARDED FOR PRICE

3.1.1 THE 80/20 PREFERENCE POINT SYSTEMS

A maximum of 80 points is allocated for price on the following basis:

80/20

$$Ps = 80\left(1 - \frac{Pt - Pmin}{Pmin}\right)$$

Type equation here.

Where

Ps = Points scored for price of tender under consideration

Pt = Price of tender under consideration

Pmin = Price of lowest acceptable tender

3.2. FORMULAE FOR DISPOSAL OR LEASING OF STATE ASSETS AND INCOME GENERATING PROCUREMENT

3.2.1. POINTS AWARDED FOR PRICE

A maximum of 80 points is allocated for price on the following basis:

80/20

$$Ps = 80\left(1 + \frac{Pt - Pmax}{Pmax}\right)$$ Type equation here.

Where

Ps = Points scored for price of tender under consideration

Pt = Price of tender under consideration

Pmax = Price of highest acceptable tender

4. POINTS AWARDED FOR SPECIFIC GOALS

4.1. In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential Procurement Regulations, preference points must be awarded for specific goals stated in the tender. For the purposes of this tender the tenderer will be allocated points based on the goals stated in table 1 below as may be supported by proof/ documentation stated in the conditions of this tender:

4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the tender documents, stipulate in the case of—

(a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or

(b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system,

then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

Table 1: Specific goals for the tender and points claimed are indicated per the table below.

(Note to organs of state: Where either the 90/10 or 80/20 preference point system is applicable, corresponding points must also be indicated as such.

***Note to tenderers: The tenderer must indicate how they claim points for each preference point system.*)**

The specific goals allocated points in terms of this tender	Number of points allocated (90/10 system) (To be completed by the organ of state)	Number of points allocated (80/20 system) (To be completed by the organ of state)	Number of points claimed (90/10 system) (To be completed by the tenderer)	Number of points claimed (80/20 system) (To be completed by the tenderer)
Historically Disadvantage Individual - Race		4		
Historically Disadvantage Individual – Women		4		
Historically Disadvantage Individual – Disability		4		
Youth		6		
Military Veterans		2		
Total		20		

DECLARATION WITH REGARD TO COMPANY/FIRM

4.3. Name of company/firm.....

4.4. Company registration number: .....

4.5. TYPE OF COMPANY/ FIRM

- Partnership/Joint Venture / Consortium
- One-person business/sole propriety
- Close corporation
- Public Company
- Personal Liability Company
- (Pty) Limited
- Non-Profit Company
- State Owned Company

[TICK APPLICABLE BOX]

4.6. I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I 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 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;

iv) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may have –

(a) disqualify the person from the tendering 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 tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted 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, if deemed necessary.

……..

SIGNATURE(S) OF TENDERER(S)

SURNAME AND NAME: ……..
DATE: ……
ADDRESS: ……
……

……
……

ANNEXTURE B

LIST OF HEALTH FACILITIES

HOSPITALS

ALFRED NZO		
		Taylor Bequest Hospital (Matatiele)
		Khotsong Hospital
		Madzikane kaZulu Memorial Hospital
		Mount Ayliff Hospital
		Greenville Hospital
		Sipetu Hospital
		St Patricks Hospital
AMATHOLE		Cathcart Hospital
		Stutterheim Hospital
		Komga Hospital
		Tafalofefe Hospital
		Fort Beafort Hospital
		Victoria Hospital
		SS Gida Hospital
		Nompumelelo Hospital
		Madwaleni Hospital
		Tower Hospital
		Bedford Hospital
		Butterworth Hospital
		Adelaide Hospital
		Winterberg Hospital
BUFFALO CITY		Frere Hospital
		Cecilia Makhiwane
		New Haven Hospital
		Bisho Hospital
		Grey Hospital
		Nkqubela Hospital
CHRIS HANI		Indwe Hospital
		Dordrecht Hospital
		Komani Hospital
		Frontier Hospital
		Martjie Venter Hospital
		Cala Hospital
		Glen Grey Hospital
		All Saints Hospital
		Cradock Hospital
		Elliot Hospital
		Wilhelm Stahl Hospital
		Cofimvaba Hospital
		Mjanyana Hospital
		Hewu Hospital

		Molteno Hospital
		Sterkstroom Hospital
JOE GQABI		Aliwal North Hospital
		Lady Grey Hospital
		Maclear Hospital
		Umlamli Hospital
		Burgersdorp Hospital
		Cloete Joubert Hospital
		Taylor Bequest(Mt Fletcher) Hospital
		Empilisweni Hospital
		Jamestown Hospital
		Steynsburg Hospital
NELSON MANDELA		Uitenhage Hospital
		Port Elizabeth Provincial Hospital
		Elizabeth Donkin Hospital
		Jose Pearson TB Hospital
		Dora Nginza Hospital
		Empilweni TB Hospital
		Livingstone Hospital
OR TAMBO		Nelson Mandela Academic Hospital
		Bambisana Hospital
		Canzibe Hospital
		Isilimela Hospital
		St Banarbas Hospital
		Zithulele Hospital
		Bedford Hospital
		Mthatha Regional Hospital
		Dr Malizo Mpehle
		Nessie Knight
		St Lucy's Hospitaol
		Holy Cross Hospital
		St Elizabeth Hospital
SARAH BAARTMAN		PZ Meyer TB Hospital
		Sundays River Valley Hospital
		BJ Foster Hospital
		Humansdorp Hospital
		Aberdeen Hospital
		Andries Vosloo Hospital
		Midlands Hospital
		SAWAS Memorial Hospital
		Willowmore Hospital
		Margery Parkes TB Hospital
		Marjorie Parrish TB Hospital

		Settlers Hospital
		Port Alfred Hospital
		Fort England Hospital
		Joubertina Hospital

COMMUNITY HEALTH CENTERS AND CLINICS

ALFRED NZO	**UMZIMVUBU**	Cancele Clinic
		Dundee Clinic
		Lubaleko Clinic
		Lugangeni Clinic
		Luyengweni Clinic
		Machibini Clinic (Kwabhaca)
		Mangqamzeni Clinic
		Mapheleni Clinic
		Mhlotsheni Clinic
		Mkemane Clinic
		Mntwana Clinic
		Mount Ayliff PHC Clinic
		Mount Frere PHC Clinic
		Mpoza Clinic (Mount Frere)
		Mpindweni Clinic
		Mwaca Clinic
		Ntlabeni Clinic
		Ntsizwa Clinic
		Qwidlana Clinic
		Rode Clinic
		Tela Clinic
		Tshungwana Clinic
		Sebeni Clinic
		Amantshangase Clinic
		Baleni Clinic
		Daliwonga Clinic
		Dungu Clinic
		Greenville Clinic
		Hlamandana Clinic
		Imizizi Clinic
		Isikelo Clinic
		Khanyayo Clinic
		Makhwantini Clinic
	NTABANKULU	Dungu Clinic
		Matubeni Clinic
		Mfundisweni Clinic
		Mnceba Clinic
		Ndawenzima Clinic
		Ntshentshe Clinic
		Qaqa Clinic
		Sebeni Clinic
		Sigidi Clinic

		Sipetu Gateway Clinic
		Tabankulu CHC
		Zulu Clinic
	MBIZANA	Amadiba Clinic
		Amandengane Clinic
		Amantshangase Clinic
		Baleni Clinic
		Daliwonga Clinic
		Greenville Gateway Clinic
		Hlamandana Clinic
		Imizizi Clinic
		Isikelo Clinic
		Kanyayo (Bizana) Clinic
		Makwantini Clinic
		Malongwana Clinic
		Meje CHC
		Mfundambini Clinic
		Mngungu Clinic
		Mpetsheni Clinic
		Ndela Clinic
		Ntlenzi Clinic
		Qasa Clinic
		Qobo Clinic
		St Patrick's Gateway Clinic
		Tsawana Clinic
	MATATIELE	Afsondering Clinic
		Elukholweni Clinic
		Isilindini Clinic
		Likhetlane Clinic
		Madlangala Clinic
		Magadla Clinic
		Matatiele Municipality Clinic
		Mount Hargreaves Clinic
		Mpharane Clin
		Mvenyane Clinic
		Mzongwana Clinic
		Ntlola Clinic
		Nyaniso Clinic
		Paballong Clinic
		Queen's Mercy Clinic
		Rolweni Clinic
		Shepherds Hope Clinic
		Thabachicha Clinic
		Umtumase Clinic
		Maluti CHC
AMATHOLE	**AMAHLATHI**	Amabele Clinic
		Bolo Clinic

		Burnshill Clinic
		Cata Clinic
		Cathcart Clinic
		Cumakala 1 Clinic
		Cumakala 2 Clinic
		Daliwe Clinic
		Dohne Clinic
		Donnington Clinic
		Ethembeni Clinic
		Frankfort Clinic
		Gxulu Clinic
		Kati-Kati Clinic
		Kubusi Clinic
		Lenye Clinic
		Lower Zingcuka Clinic
		Masincedane Clinic
		Mgwali Clinic
		Mxalanga Clinic
		Ntaba ka Ndoda Clinic
		Philani Clinic (KWT)
		Rabula Clinic
		SS Gida Gateway Clinic
		St Matthew's Clinic
		Stutterheim Clinic
		Qeto clinic
		Tyutyu Village Clinic
		Wartburg Clinic
		Komnga Clinic
		Gxulu Clinic
		Tyata Clinic
		Wesley Clinic
		Mbelekana Clinic
		Punzana Clinic
		Pikoli Clinic
		Peddie Extention Clinic
		Nora Clinic
		Nompumelelo Gateway
		Nier Clinic
		Ndwanya Clinic
		Mthyolo Clinic
		Mthombe Clinic
		Matomela Clinic
		Jama Clinic
		Jaji Clinic
		Horton Clinic
		Humburg Clinic
		Mooiplass Clinic
		Amabele Clinic
		Hillside Clinic
		Zahara Clinic
		Cwili Clinic
		Glenmore Clinic
		Gwabeni Clinic
		Mgwali Clinic
		Gqwele Clinic

	MBHASHE	Badi Clinic
		Bolotwa Clinic (Idutywa)
		Bomvana Clinic
		Fort Malan Clinic
		Gwadana Clinic
		Gwadu Clinic
		Idutywa Nqabara Clinic
		Idutywa Village Clinic
		Jingqi Clinic
		Kwa-Mkholoza Clinic
		Lota Clinic
		Mahasana Clinic
		Melitafa Clinic
		Mpozolo Clinic
		Mqhele Clinic
		Msendo Clinic
		Nkanya Clinic
		Nqabara Clinic
		Nqabeni Clinic
		Nqadu Clinic (Mbhashe)
		Nyhwara Clinic
		Soga Clinic
		Sundwana Clinic
		Taleni Clinic
		Vukukhanye Gateway Clinic
		Mpame Clinic
		Kotyana Clinic
		Qwaninga Clinic
		Ganyana Clinic
		Keti Clinic
	MNQUMA	Butterworth Gateway Clinic
		Dr CL Bikitsha Clinic
		Gcaleka Clinic
		Gqunqe Clinic
		Grainvalley Clinic
		Hebe-Hebe Clinic
		Highview Clinic
		Ibika Clinic
		Kotana Clinic
		Macibe Clinic
		Mnyibashe Clinic
		Mqambeli Clinic
		Ncizele Clinic
		Ndabakazi Clinic
		Ngqusi Clinic
		Nozuko Clinic
		Nqancule Clinic
		Ntseshe Clinic
		Qina Clinic
		Qolora-By-Sea Clinic
		Springs Clinic
		Tafalofefe Gateway Clinic

		Tanga Clinic
		Tutura Clinic
		Tyali Clinic
		Zazulwana Clinic
		Mpukane Clinic
		Mgcwe Clinic
	RAYMOND MHLABA	Adelaide Gateway Clinic
		Amathole Basin Clinic
		Assina Mandla Clinic
		Balfour Clinic
		Bedford Clinic
		Bezuidenhoutville Clinic
		CC Lloyd Clinic
		Debe Nek Clinic
		Fort Beaufort Gateway Clinic
		Gilton Clinic
		Gxwederha Clinic
		Healdtown Clinic
		Hillside Clinic (Nkonkobe)
		Kolomana Clinic
		Lower Regu Clinic
		Lulama Kama Clinic
		Melani Clinic
		Mgwalana Clinic
		Msobomvu Clinic
		Mzamomhle Clinic (Bedford)
		Newtown Clinic
		Njwaxa Clinic
		Nomakhwezi Makhenyane Clinic
		Perksdale Clinic
		Qibira Clinic
		Rwarwa Clinic
		Seymour Clinic
		Sheshegu Clinic
		Thozamile Madakana Clinic
		Upper Ncera Clinic
		Victoria Gateway Clinic
		War Memorial Clinic
		Washington Clinic
		Zigodlo Clinic
		Zihlahleni Clinic
BUFFALO CITY		Alphendale Clinic
		Amahleke Clinic
		Aspiranza Clinic
		Beacon Bay Clinic
		Berlin Clinic
		Bhele Clinic
		Bisho Gateway Clinic
		Bhisho Parliament Clinic
		Braelyn Clinic
		Braelyn Extension Clinic

		Breidbach Clinic
		Bulembu Clinic
		Cambridge Clinic
		Central Clinic (East London)
		Central Clinic (King William's Town)
		Chris Hani Clinic
		Drake Road Clinic
		Fezeka NU 3 Clinic
		Fort Grey Clinic
		Frere Gateway Clinic
		Ginsberg Clinic
		Gompo A Ndende Clinic
		Gompo B Jwayi Clinic
		Gompo C Jabavu Clinic
		Gonubie Clinic
		Greenfields Clinic
		Grey Gateway
		Ilita Clinic
		Imidange Clinic
		Jafta Clinic
		Jaji Clinic
		John Dube Clinic
		Kwelera Clinic
		Luyolo NU 9 Clinic
		Masakhane (Zwelitsha)
		Masele Clinic
		Masiphile Clinic
		Mdingi Clinic
		Mncotsho Clinic
		Moore Street Clinic
		Mount Coke Clinic
		Mpongo Clinic
		Mxalanga Clinic
		Ncera Clinic
		Ndevana Clinic
		Needs Camp Clinic
		Newlands Clinic
		Nobuhle NU 8 Clinic
		Nonkcampa Clinic
		Eluxolweni NU 12 Clinic
		Siaphilisa NU 13 Clinic
		Siyabulela NU 16 Clinic
		Sizimisele NU 17 Clinic
		Tyutyu Village Clinic
		Openshaw Clinic
		Pakamisa Clinic
		Peelton Clinic
		Pefferville Clinic
		Petros Jobane Clinic
		Philani NU 1 Clinic
		Pirie Clinic
		Potsdam Clinic
		Qurhu Clinic
		Shornville Clinic

		St Thomas Clinic
		Sweetwaters Clinic
		Sinebhongo Clinic
		Tamara Clinic
		Tembisa NU 7 Clinic
		Thembalethu Clinic
		Tshabo Clinic
		Tshatshu Clinic
		Twecu Clinic
		Tyamzashe FP Clinic
		Tyutyu Clinic
		Welcomewood Clinic
		Zanempilo Clinic (East London)
		Zanempilo Clinic (Zwelitsha)
		Zikhova Clinic
		Zingisa NU 5 Clinic
		Zwelitsha Zone 5 Clinic
CHRIS HANI	**ENOCH MGIJIMA**	Gwatyu Clinic
		Hackney Clinic
		Haytor Clinic
		Hukuwa Clinic
		Ilinge Clinic
		Kamastone Clinic
		KB Siswana Clinic
		Lahlangubo Clinic (Queenstown)
		Lizo Ngcana Clinic
		Lesseyton Clinic
		Machibini Clinic (Queenstown)
		Masakhe Clinic
		Molteno Clinic
		Nceduluntu Clinic
		New Rest Clinic
		Nomonde Clinic
		Nomzamo Clinic
		Oxton Clinic
		Parkvale Clinic
		Philani Clinic (Queenstown)
		Pricesdale Clinic
		Shiloh Clinic
		Sterkstroom Clinic
		Tsitsikamma Clinic
		Whittlesea Clinic
		Yonda Clinic
		Zingquthu Clinic
		Zweledinga Clinic
	EMALAHLENI	Boomplaas Clinic
		Bengu Clinic

		Dordrecht Clinic
		Guba Clinic
		Hlala Uphilile Clinic
		Lanti Clinic
		Maqashu Clinic
		Mhlanga Clinic
		Mkapusi Clinic
		Mount Arthur Clinic
		Ndonga Clinic
		Nompumelelo Clinic
		Philani Gateway Clinic
		Qoqodala Clinic
		Queen Nonesi Clinic
		Rodana Clinic
		Rwantsana Clinic
		Swartwater Clinic
		Tsembeyi Clinic
		Vaalbank Clinic
		Xonxa Clinic
	INTSIKA YETHU	Banzi Clinic
		Bilatye Clinic
		Bele Clinic
		Bengu Clinic
		Bolotwa Clinic (Confimvaba)
		Cwecweni Clinic
		Gqogqora Clinic
		Isikhoba Clinic
		Keti Clinic
		Khuze Clinic
		Kuyasa Clinic
		Lower Mncuncuzo Clinic
		Lower Seplan Clinic
		Lubisi Clinic
		Luthuli Clinic
		Magwala Clinic
		Mahlubini Clinic
		Mawusheni Clinic
		Mbulukweza Clinic
		Mcambalala Clinic
		Mtingwevu Clinic
		Ncora Clinic
		Ngceza Clinic
		Ngxabangu Clinic
		Nququ Clinic
		Ntshingeni Clinic Nthsitho Cinic
		Plumstead Clinic
		Qamata Clinic
		Qitsi Clinic
		Qombolo Clinic
		Qumanco J Tribal Clinic
		Qwiliqwili Clinic
		Sabalele Clinic
		St Mark's Clinic

		Tsakana Clinic
		Tsomo Village Clinic
		Upper Mncuncuzo Clinic
	INXUBA YETHEMBA	Bacclesfarm Clinic
		Baroda Clinic
		Eluxolweni Clinic
		Fishriver Clinic
		High Street Clinic
		Hofmeyr Clinic
		Kleinbulhoek Clinic
		Kwanonzame New Clinic
		Kwanonzame Old Clinic
		Lingelihle Clinic
		Michausdal Clinic
		Middelburg Clinic
		Midros Clinic
		Mitford Clinic
		Philani Clinic (Cradock)
		Rocklands Clinic
		Springrove Clinic
		Tarkastad Clinic
		Tentergate Clinic
		Zola Clinic
		Thornhill Clinic
	ENGCOBO	All Saints Gateway Clinic
		Boklein Clinic
		Clarkebury Clinic
		Elucwecwe Clinic
		Eluhewini Clinic
		Gubenxa Clinic
		Gqaga Clinic
		Lahlangubo Clinic
		Manzana Clinic
		Mdanjelwa Clinic
		Mjanyana Cclinic
		Mgudu Clinic
		Mhlopekazi Clinic
		Mnyolo Clinic
		Ntsimba Clinic
		Qumanco Clinic
		Sinqumeni Clinic
		Tora Clinic
		Zadungeni Clinic
		Zwelakhe Clinic
	SAKHISIZWE	Askeaton Clinic
		Manzimahle linic
		Mcewula Clinic
		Mhlwazi Clinic

		Ncedolwethu Clinic
		Nyalasa Clinic
		Tsengiwe Clinic
		Qhiba Clinic
		U-lafutha Clinic
		Sifonondile Clinic
		Beestekraal Clinic
		Elliotmain Clinic
		Themablethu Clinic
		Thembelihle Clinic
JOE GQABI	**ELUNDINI**	Sqhobong Clinic
		Gqaqhala Clinic
		Mangoloaneng Clinic
		Bethania Clinic
		Ulundi Clinic
		Taylor Bequest Clinic
		Khungisizwe Clinic
		Katkop Clinic
		Hlangalane Clinic
		Tsitsana Clinic
		Hlankomo Clinic
		Maclear Town Clinic
		Sonwabile Clinic
		Queen Noti Clinic
		Mqokolweni Clini
		St. Augustines Clinic
		Ugie Town Clinic
		Empilisweni Clinic
		Ncembu Clinic
		Umnga Flats Clinic
	SENQU	Bensonvale Clinic
		Bluegums Clinic
		Wittebergen Clinic
		Umlamli Gateway Clinic
		Sunduza Clinic
		St Michael's Clinic

		Sterkspruit Town Clinic
		Sonwabo Zandile Clinic
		Robert Mjobo Clinic
		Pelandaba Clinic
		Palmietfontein Clinic
		Macacuma Clinic
		Ndofela Clinic
		Musong Clinic
		Masibulele Clinic
		Hlomendlini Clinic
		Hillside Clinic (Senqu)
		Herschel Clinic
		Esilindini Clinic
		Zenethemba Clinic
	WALTER SISULU	Jamestown Clinic
		Poly Clinic
		Aliwal North
		Block H Clinic
		Burgersdorp Clinic
		Eureka Clinic
		Hilton Clinic
		Jamestown Clinic
		Khayamnandi Clinic
		Maletswai Clinic
		Mzamomhle Clinic (Albert)
NELSON MANDELA		KwaMagxaki Clinic
		Soweto Clinic
		Veeplaas
		Zwide Clinic
		Kwazakhele Clinic
		Lunga Kobese
		Max Madlingozi
		Kwazakhele CHC
		Kwazakhele clinic
		Tshangana Clinic
		New Brighton Clinic
		Motherwell CHC
		NU 2 Clinic
		NU 8 Clinic
		NU 11 Clinic
		Ikamvelihle Clinic

		Wellz Estate Clinic
		Thanduxolo Clinic
		Joe Slovo Clinic
		Du Preez Street Clinic
		Lukhanyo Clinic
		Gustav Lamour Clinic
		Middlestreet Clinic
		Rosedale Clinic
		Park Centre Clinic
		Laetitia Bam CHC
		Nomangesi Jayiya
		Mabandla Clinic
		Isolomzi Clinic
		Edameni Clinic
		Silvertown Clinic
		Masakhane Clinic
		KruisRivier Clinic
		KwaDwesi Clinic
		Govan Mbeki Clinic
		Missionvale Clinic
		Algoa Park Clinic
		New Brighton CHC
		Korsten Clinic
		Schauder Clinic
		Central CHC PE
		Central Clinic
		Gqebera clinic
		Walmer 14th Avenue
		Linton Grange Clinic
		Gelvandale clinic
		Helenvale Clinic
		West End CHC
		West End clinic
OR TAMBO	**KING SABATA DALINDYEBO**	Civic Centre Clinic (Mthatha)
		Efata Clinic
		Baziya CHC
		Hlabatshane Clinic
		Jalamba Clinic
		Kambi Clinic
		Lutubeni Clinic
		Mahlungulu Clinic (KSD)
		Zwelebhunga clinic
		Maxwele Clinic
		Mbekweni CHC
		Mpeko Clinic
		Mpindweni Clinic
		Mpunzana Clinic
		Mqanduli CHC
		Mqhekezweni Clinic
		Mthatha Gateway Clinic

		Ncambele Clinic
		Ndibela Clinic
		Ngangelizwe CHC
		Ngcengane Clinic
		Ngcwanguba CHC
		Ngqungqu Clinic
		Ngwenya Clinic
		Nqwathi Clinic
		Ntlangaza Clinic
		Mapuzi Clinic
		Gengqe Clinic
		Ngqwarha Clinic
		Ncentuli Clinic
		Sakhiele Clinic
		Bumbane clinic
		Nosekeni clinic
		Ntshele Clinic
		Nzulwini Clinic
		Phakamile Clinic
		Qokolweni Clinic
		Qunu Clinic
		Sangoni Clinic
		Sitebe Clinic
		Bityi Cliniic Ntshabeni Clinic
		Stanford Terrace Clinic
		Tabase Clinic
		Tshezi Clinic
		Tyelebana Clinic
		Upper Xongora Clinic
		Wilo Clinic
		Xhwili Clinic
		Zidindi Clinic
		Zitatele Clinic
		Zitulele Gateway Clinic
		Zwelichumile Clinic
	MHLONTLO	Caba Clinic
		Ezingcuka Clinic
		Gura Clinic
		Kalankomo Clinic
		Langeni Clinic
		Lotana Clinic
		Lower Gungululu Clinic
		Mahlungulu Clinic (Mhlontlo)
		Mbokotwana Clinic
		Mdyobe Clinic
		Mhlahlane Clinic
		Mhlakulo CHC
		Mjika Clinic
		Nessie Knight gateway Clinic
		Ngwemnyama Clinic
		Qolombane Clinic
		Nxotwe Clinic (Qumbu)

		Qanqu Clinic
		Shawbury Clini
		Nothembile Clinic
		Mbalisweni Clinicv
		Malepe-lepe Clinic
		Sidwadweni Clinic
		St Lucy's gateway Clinic
		Tina Falls Clinic
		Tsilitwa Clinic
		Tsolo Clinic
		Mdeni Clinic
		Qumbu CHC
	NYANDENI	Bambisana PHC Clinic
		Bomvini Clinic
		Buchele Clinic
		Buntingville Clinic
		Caguba Clinic
		Canzibe gateway Clinic
		Mtakatye clinic
		Maqanyeni Clinic
		Isilimela Gateway
		Double Falls Clinic
		Phahlakazi Clinic
		Kohlo Clinic
		Libode Clinic
		Ludalasi Clinic
		Lujizweni Clinic
		Lutshaya Clinic
		Lwandile Clinic
		Majo la Clinic
		Ngqeleni Clinic
		Malusi Clinic
		Mampondomiseni Clinic
		Mangcwanguleni Clinic
		Mantusini Clinic
		Mankosi Clinic
		Mevana Clinic
		Mgwenyane Clinic
		Mtambalala Clinic
		Mzintlava Clinic
		Ndanya Clinic
		Ngcolora Clinic
		Ngcoya Clinic
		Nkanga Clinic
		Nkanunu Clinic
		Nkumandeni Clinic
		Nolita Clinic
		Nontsikelelo Biko Clinic
		Nqanda A Clinic
		Ntafufu Clinic
		Ntapane Clinic
		Ntibane Clinic
		Nyandeni Clinic
		Old Bunting Clinic

		Pilani Clinic
		Qandu Clinic
		St Barnabas Gateway Clinic
		Port St Johns CHC
		Tombo CHC
	INGQUZA	Bala Clinic
		Bodweni Clinic
		Flagstaff Clinic
		Goso Forest Clinic
		Mbotyi Clinic
		Palmerton Clinic
		Good Hope Clinic
		Nkozo Clinic
		Qaukeni Clinic
		Xurana Clinic
		St Elizabeth gateway Cliinic
		Holy Cross gateway Clinic
		Mpoza Clinic
		Mbhadango clinic
		Xopozo Clinic
		Ktc Clinic
		Khanyayo (Holy Cross) Clinic
		Lusikisiki Village Clinic (Qaukeni)
		Magwa Clinic
		Malangeni Clinic
		Mantlaneni Clinic
		Flagstaff CHC
SARAH BAARTMAN	**CAMDEBOO**	Aeroville Clinic
		Baviaans Clinic
		Beatrice Ngwentle Clinic
		Bhongweni Clinic
		Brug Straat Clinic (Jansenville)
		Graaff-Reinet Day Hospital
		Gracey Clinic
		Horseshoe Clinic
		Kroonvale Clinic
		Kwazamukucinga Clinic
		Masakhane Clinic (Aberdeen)
		Nieu-Bethesda Clinic
		Rietbron Clinic
		Umasizakhe Clinic
		Union Street Clinic
		Vera Barford Clinic
		Willowmore Clinic
		Wongalethu Clinic
		Clarkson Satellite Clinic
		Humansdorp Clinic
		Imizamo Yetho Clinic
		Kareedouw Clinic

		Kirkwood Clinic
		Krakeel Clinic
		Kruisfontein Clinic
		Kwazenzele Clinic
		Loerie Clinic
		Louterwater Clinic
		Lukhanyiso Clinic
		Masakhane Clinic (Hankey)
		Misgund Clinic
		Moses Mabida Clinic
		Pellsrus Clinic
	KOUGA	Sanddrif Clinic
		St Francis Bay Clinic
		Thornhill Clinic
		Twee Riviere Clinic
		Bergsig Clinic
		Clarkson Satellite Clinic
		Humansdorp Clinic
		Imizamo Yetho Clinic
		Kareedouw Clinic
		Kirkwood Clinic
		Krakeel Clinic
		Kruisfontein Clinic
		Kwazenzele Clinic
		Louterwater Clinic
		Lukhanyiso Clinic
		Masakhane Clinic (Hankey)
		Misgund Clinic
		Moses Mabida Clinic
		Pellsrus Clinic
		Sanddrif Clinic
		St Francis Bay Clinic
		Thornhill Clinic
		Twee Riviere Clinic
		Loerie Clinic
	MAKANA	Alexandria Clinic
		Anglo African Street Clinic
		Joza Clinic
		Kenton-On-Sea Clinic
		Kwa-Nonqubela Clinic
		Kwa-Nonzwakazi Clinic
		Middle Terrace Clinic
		Marselle Clinic
		NG Dlukulu Clinic
		Nkwenkwezi Clinic
		Nolukhanyo Clinic
		Port Alfred Clinic
		Pal 1 Clinic
		Pal 2 Clinic
		Raglan Road Clinic
		Riebeeck East Clinic
		Station Hill Clinic

		Tantyi Clinic
		Settlers Day Hospital