



# correctional services

Department:  
Correctional Services  
REPUBLIC OF SOUTH AFRICA

124 WF Nkomo Street  
(Corner WF Nkomo & Sophie De Bruyn  
Streets), Poyntons Building (West Block)  
PRETORIA,  
0001

## INVITATION TO BID

REQUEST FOR QUOTATION NUMBER: (DCS-B/26-273Z)

ENQUIRIES: NADIA COLLINS  
TELEPHONE: +27 12 516 0026 or Cell: 065 547 1754  
FAX: 086 585 0028  
EMAIL: [Maletsatsi.Jerminah@dcs.gov.za](mailto:Maletsatsi.Jerminah@dcs.gov.za)



### RE: INVITATION TO QUOTE, SUPPLY AND DELIVER 8P MZUUY EZAA WHEELCHAIRS

**Comments:** Please provide us with a quotation for the items / Services specified hereunder where applicable, or in accordance with the attached specifications

ITEM	DESCRIPTION OF GOODS	QUANTITY	PRICE	BID PRICE IN RSA CURRENCY
001	<b>8P MZUUY EZAA WHEELCHAIRS</b> (Net Weight: 27kg, Seat Width 57 cm, Max Speed. 8km, Motor: 28v/270 w, Battery Weight: 2.4 kg)	<b>27 Units</b>	R.....	R.....
<b>TOTAL</b>				R.....
<b>VAT</b>				R.....
<b>TOTAL Including VAT</b>				R.....

**Please Note:**

- This request for Quotation must be completed and accompanied by an official Quotation.
- Quotations** must be emailed to [Maletsatsi.Jerminah@dcs.gov.za](mailto:Maletsatsi.Jerminah@dcs.gov.za) **CLOSING DATE: WITHIN 5 WORKING DAYS**
- Quotations should be valid for at least 7 days.

4. **Please indicate your delivery period:**

- Is delivery period firm? **Yes / No**
- Is the price (s) firm for the duration of the contract? **Yes / No**
- Is the offer strictly to specification? **Yes / No**
- If not to specification, state deviation (s)

### Minimum Requirements

- Copy of Valid Company Registration.
- Copy of BBBEE Certificate
- Copy of Valid Tax Clearance Certificate
- VALID QUOTATION.**

9. All prices must be VAT inclusive, if no indication is given, prices will be evaluated as VAT inclusive.  
I / we agree that the offer herein shall remain binding upon me/us and open for acceptance by the department of Correctional Services during the validity period indicated and calculated from the closing time stated above.

NAME.....POSITION.....

COMPANY NAME: .....

REGISTRATION NUMBER.....VENDOR NUMBER.....

EMAIL ADDRESS: .....

SIGNATURE

PHONE NUMBER

DATE