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**Quotation Advert**

**Opening Date:** 31 October 2024  
**Closing Date:** 14 November 2024  
**Closing time:** 16h00

**Public Entity Details:** KwaZulu Natal Museum

| SUPPLIER INFORMATION   |                            |  |                               |      |
|--|----------------------------|--|-------------------------------|------|
| NAME OF SUPPLIER   |                            |  |                               |      |
| PHYSICAL ADDRESS   |                            |  |                               |      |
| CONTACT NUMBERS  |                            |  |                               |      |
| E-MAIL ADDRESS   |                            |  |                               |      |
| VAT REGISTRATION NUMBER  |                            |  |                               |      |
| SUPPLIER COMPLIANCE STATUS   | TAX COMPLIANCE SYSTEM PIN: |  | CENTRAL SUPPLIER DATABASE No: | MAAA |
| <b>In terms of Regulation 4(2); 5(2); 6(2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for the specific goals specified of tender in accordance with the table below:</b> |                            |  |                               |      |

| The specific goals allocated points in terms of this RFQ | Number of points allocated (80/20 system) (To be completed by the organ of state) | Number of points claimed (80/20 system) (To be completed by the Supplier) |
|--|---|---|
| Black Ownership  | 12  |   |
| Women Owned  | 4   |   |
| Youth Owned  | 2   |   |
| Disability Owned   | 2   |   |

| SPECIFICATION and QUOTATION |  |          |            |                  |
|-----------------------------|--|----------|------------|------------------|
| DESCRIPTION OF SERVICE      | ITEM REQUIRED                                      | QUANTITY | UNIT PRICE | TOTAL UNIT PRICE |
| <b>Laboratory suppliers</b> | Extraction Kit, E.Z.N.A. Tissue DNA Kit, 200 preps | 6        |            |                  |

|                                     |              |   |
|-------------------------------------|--------------|---|
| <b>SUB TOTAL</b>                    |              | R |
| <b>VAT @ 15% (where applicable)</b> |              | R |
| <b>TOTAL PRICE</b>                  |              | R |
| <b>SUPPLIER SIGNATURE:</b>          | <b>DATE:</b> |   |

**Compulsory Briefing/ Site Visit:**                   None

**Suppliers to provide the CSD Supplier Number (MAAA----) and be tax compliant**

Quotations must be sent to [scm@nmsa.org.za](mailto:scm@nmsa.org.za)

Enquiries regarding the advert to be directed to [scm@nmsa.org.za](mailto:scm@nmsa.org.za)