	<h1 style="text-align: center;">EMALAHLENI</h1> <h2 style="text-align: center;">Local Municipality</h2>	P.O. BOX 3
		EMALAHLENI
		MPUMALANGA
		1035
		TEL.: (013) 690 6911
		FAX: (013) 690 6207
		E-mail: admin@emalahleni.gov.za
	eMalahleni, Mandela Avenue Tel.: (013) 690 6911	Kriel, Quintin Street Tel.: (017) 648 2241
		Ogies, Hoofweg Tel.: (013) 643 1027

26 January 2021

Dear Sir / Madam

REQUEST FOR FORMAL WRITTEN QUOTATION

Kindly furnish me with a written quotation for the supply of the goods/services as detailed


Enquiries: J Bouwer (079 395 3670)

ITEM DESCRIPTION	QUANTITY
Alcohol wipes Medi – wipes containing 80% Ethanol- 150 wipes in a canister. Medical grade SABS490 and SABS1853 approved Ready to use on hands, gloves and surfaces as an instant medical sanitizing wipe Wipe and rub – do not wash off Active ingredients: Ethanol 80% Benzalkonium Chlorine 0.2% Ph 6-8 NCRS Registration Number: Act5GNR529/288592/090/0782 TYPE 1	200

The quotation must be submitted on the letterhead of your business, signed and delivered by hand on the box by supply chain entrance not later **than 01/02/2021**.

The following conditions will apply:

- Price(s) quoted must be valid for at least thirty (30) days from date of your offer.
- Price (s) quoted must be firm and must be inclusive of VAT.
- A firm delivery period must be indicated.
- For all transactions the following must be attached:
- Proof of the paid up Municipal Rates and Taxes account of the company or its directors.
- MBD forms
- CSD report (Must be registered on the Central Supplier Database (CSD)).
- Scoring points-Certified copy of BBBEE certificate should be attached
- Evaluation criteria-The 80/20 PPPFA system for requirements with a Rand from R30 000 to R200 000 (all applicable taxes included)

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Failure to comply with these conditions and filling of the declaration form may invalidate your offer.

Approved.....

