



health

Department:  
Health  
REPUBLIC OF SOUTH AFRICA

## ADDENDUM 1

### **SUPPLY AND DELIVERY OF POINT OF CARE TESTING DEVICES, SOFTWARE AND RELATED CONSUMABLES TO THE DEPARTMENT OF HEALTH FOR NON-COMMUNICABLE DISEASES AND PRIMARY HEALTH CARE FOR A PERIOD OF THREE (3) YEARS**

**BID NUMBER: NDOH 35-2023/2024**

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1. Attached herewith:

- 1.1 Revised pricing template on page 22 of 67 from firm prices to non-firm prices. The attached forms guide the bidder on how it should be completed and adjustment interval thereof. However, prices must be completed on the spreadsheet attached as POC pricing schedule.
- 1.2 Amendments to the specifications document (**Annexure A**) highlighted in a red font. The affected items are BP Machines inserted paragraph 8.7 and Multiparameter paragraph 4.9 are highlighted in red font.
- 1.3 The extension of the closing date of the bid from 14 February 2024 to 29 February 2024.
- 1.4 Also attached response template for questions and answers.

The completed addendum must be submitted together with the bid document on or before the closing date and time of the bid. The department will not be held responsible for bidder not following the revised pricing schedule and guidelines.

**ACCEPTANCE AND INCORPORATION OF ADDENDUM**

I/We accept that Addendum No 1 forms part of the Tender Documents.

I/We confirm that I/we -

- (a) have noted the contents of this Addendum
- (b) have fully considered this Addendum
- (c) have incorporated the amendments and additions contained in this Addendum in my/our Tender for Tender No. **Bid number: NDOH 35-2023/2024**

SIGNED ON BEHALF OF THE TENDERER..... :

NAME OF SIGNATORY (BLOCK LETTERS)..... :

NAME OF TENDERER (BLOCK LETTERS)..... :

TENDERER'S ADDRESS : .....  
.....

TENDERER'S TEL NO : .....

TENDERER'S FAX NO : .....

SIGNATURES OF WITNESSES : 1. ....  
2. ....

NAMES OF WITNESSES (BLOCK LETTERS) : 1. ....  
2. ....

DATE : .....

Initials .....

Bid's  
Signature.....  
Date:.....