The Knysna Municipality is inviting quotations from suitable service providers for the services described below.

Category: FUNCTIONAL CAPACITY EVALUATION BY A REGISTERED OCCUPATIONAL THERAPIST

ADVERTISEMENT DATE: 17 February 2017
QUOTATION NUMBER: C178 2016/17
DESCRIPTION OF GOODS/SERVICES: Functional Capacity Evaluation by a Registered Occupational Therapist Required

QUOTATION DOCUMENTS ARE OBTAINABLE FROM:
Company: Knysna Municipality
Contact Person: Nombulelo Mlisana
Email: nmlisana@knysna.gov.za
Tell: 044 302 6438

CLOSING DATE:
Wednesday, 22 February 2017
TIME: 12h00

SUBMISSIONS:
Sealed quotations clearly marked, “Functional Capacity Evaluation by a Registered Occupational Therapist Required”, can be submitted:
By hand to: Scm Dept.-Knysna Municipality
By email to: nmlisana@knysna.gov.za

Contact person: Nombulelo Mlisana
Electronic bid documents must reach SCM office before the closing time

COMPULSORY REQUIREMENTS: None

TECHNICAL ENQUIRIES:
Company: Knysna Municipality
Contact Person: Heidi Cronje
Email: hcronje@knysna.gov.za
Tell: 044 302 6513

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 when applicable.
- Price must include all related expenses, i.e. transport, accommodation etc.
- Bidders must insist on an official order number.
- Only an official order will bind the Council.

JB DOUGLAS
ACTING MUNICIPAL MANAGER

“WHERE PEOPLE AND NATURE PROSPER”
SPECIFICATIONS: C178/2016/17

FUNCTIONAL CAPACITY EVALUATION BY A REGISTERED OCCUPATIONAL THERAPIST REQUIRED AT KNYSNA MUNICIPALITY UNTIL 30 JUNE 2017

BACKGROUND

From time to time Knysna Municipality receive letters from Medical Practitioners indicating that the patient is no longer able to perform his/her duties in his/her current position and recommends transferring him/her to another department.

In order for Human Resources to assist the affected employees, the services of a qualified registered Occupational Therapist is needed to perform a Functional Capacity Evaluation; the evaluation is to include a consultation with the direct supervisor as well as a site visit. The purpose of the evaluation is to provide information on what physical activities the person can still perform and to make recommendations on how the municipality can assist in accommodating his medical condition.

CONDITIONS OF TENDER

The following conditions will apply:

Table 1: Documentary proof of relevant qualifications

<table>
<thead>
<tr>
<th>REQUIREMENT</th>
<th>NO</th>
<th>YES</th>
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<tbody>
<tr>
<td>Qualification as an Occupational Therapist:</td>
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<tr>
<td>B. Occupational Therapist or B. Sc (Occupational Therapist)</td>
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<tr>
<td>Registration with the Health Professional Council of South Africa (HPCSA) as an Occupational Therapist (registration date must be up to date for this year)</td>
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</tbody>
</table>

1. The evaluation and submission of the report to be completed within one month from the date the service provider is contacted to conduct a Functional Capacity Evaluation.

2. The following costs are for the service provider’s own expense:
   - Travelling and accommodation
   - Any stationary and equipment required.
   - Waiting time

3. The service provider will be expected to:
a. Liaise with the OHS Officer and the Supervisor of the relevant department to determine the date of the evaluation.
b. Provide suitable facilities and equipment to conduct the evaluation; it would be preferred if the services could be rendered in Knysna.
c. Obtain written consent from employee to undergo the evaluation and disclosing the info to Knysna Municipality, Human Resources Department

4. No payment will be made before services are rendered. Invoices will be paid 30 days after the date of the invoice. An order number will be provided before the services are rendered.

**Table 2: Price schedule**

The table below must be completed by the service provider; this is the only pricing schedule acceptable, no other quotations will be accepted.

*Provide a quotation for one person; the quote must be valid until 30 June 2017, i.e. no increase in tariffs will be accepted for services rendered prior to 30 June 2017 (only the price quoted below will be accepted.)*

<table>
<thead>
<tr>
<th>Description (per person)</th>
<th>Price (per person)</th>
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<tbody>
<tr>
<td>Functional Capacity Evaluation (maximum three hours)</td>
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<tr>
<td>Site visit in Knysna (maximum one hour)</td>
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<tr>
<td>Consultation with supervisor in Knysna (maximum one hour)</td>
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<tr>
<td>Compiling of report (maximum one hour)</td>
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<td><strong>Subtotal</strong></td>
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<td><strong>VAT</strong></td>
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<td><strong>Total</strong></td>
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The Municipality reserves the right to withdraw any invitation to bid and/or re-advertise or to reject any bid or to accept a part of it
<table>
<thead>
<tr>
<th><strong>The name of the Tenderer:</strong></th>
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<tr>
<td><strong>The name of the Contact person:</strong></td>
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<tr>
<td><strong>Physical address of the Tenderer:</strong></td>
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<td><strong>Postal Code:</strong></td>
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<td><strong>Postal address of the Tenderer:</strong></td>
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<td><strong>Postal Code:</strong></td>
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<td><strong>Facsimile:</strong></td>
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<td><strong>E-mail address:</strong></td>
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KMBD 4
DECLARATION OF INTEREST

1. No bid will be accepted from persons in the service of the state¹.

2. Any person, having a kinship with persons in the service of the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid. In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons connected with or related to persons in service of the state, it is required that the bidder or their authorised representative declare their position in relation to the evaluating/adjudicating authority.

3. In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

3.1 Full Name of bidder or his or her representative: ...........................................................................................................

3.2 Identity Number: ...........................................................................................................................................................

3.3 Position occupied in the Company (director, trustee, shareholder²): .................................................................

3.4 Company Registration Number: ...........................................................................................................................

3.5 Tax Reference Number: ...........................................................................................................................................

3.6 VAT Registration Number: ........................................................................................................................................

3.7 The names of all directors / trustees / shareholders members, their individual identity numbers and state employee numbers must be indicated in paragraph 4 below.

3.8 Are you presently in the service of the state? YES / NO

3.8.1 If yes, furnish particulars. ........................................................................................................................................

¹MSCM Regulations: “in the service of the state” means to be –
(a) a member of –
   (i) any municipal council;
   (ii) any provincial legislature; or
   (iii) the national Assembly or the national Council of provinces;
(b) a member of the board of directors of any municipal entity;
(c) an official of any municipality or municipal entity;
(d) an employee of any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No.1 of 1999);
(e) a member of the accounting authority of any national or provincial public entity; or
3.9 Have you been in the service of the state for the past twelve months?  
   YES / NO

   3.9.1 If yes, furnish particulars

3.10 Do you have any relationship (family, friend, other) with persons
   in the service of the state and who may be involved with
   the evaluation and or adjudication of this bid?  
   YES / NO

   3.10.1 If yes, furnish particulars.

3.11 Are you, aware of any relationship (family, friend, other) between
   any other bidder and any persons in the service of the state who
   may be involved with the evaluation and or adjudication of this bid?  
   YES / NO

   3.11.1 If yes, furnish particulars

3.12 Are any of the company’s directors, trustees, managers,
   principle shareholders or stakeholders in service of the state?  
   YES / NO

   3.12.1 If yes, furnish particulars

3.13 Are any spouse, child or parent of the company’s directors
   trustees, managers, principle shareholders or stakeholders
   in service of the state?  
   YES / NO

   3.13.1 If yes, furnish particulars

3.14 Do you or any of the directors, trustees, managers,
   principle shareholders, or stakeholders of this company
   have any interest in any other related companies or
   business whether or not they are bidding for this contract.  
   YES / NO

   3.14.1 If yes, furnish particulars

2 Shareholder” means a person who owns shares in the company and is actively involved in the management of the company or business and exercises control over the company.

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<tr>
<th>Full Name</th>
<th>Identity Number</th>
<th>State Employee Number</th>
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Signature                        Date

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Capacity                        Name of Bidder

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