

**STEVE TSHWETE LOCAL MUNICIPALITY**

QUOTATION NO. Q01.07.18

**CALLING FOR QUOTATIONS FOR SERVICES  
( R 30 000 TO R 200 000.00 )****PROFESSIONAL OR REGISTERED NURSES TO ASSIST WITH THE DRAWING  
OF BLOOD FROM THE DRUNKEN DRIVING SUSPECTS ARRESTED WITHIN  
THE STEVE TSHWETE LOCAL MUNICIPALITY, MP313 AREA**

<b>CLOSING DATE:</b>	<b>2018/07/13</b>	<b>TIME</b>	<b>12H00</b>
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<b>NAME OF COMPANY</b>	
<b>TOTAL AMOUNT (MBD 3.1)</b>	
<b>CENTRAL SUPPLIER DATABASE NUMBER</b>	MAAA
<b>CONTACT PERSON</b>	
<b>TELEPHONE NUMBER</b>	
<b>FAX NUMBER</b>	

<b>ENQUIRIES REGARDING QUOTATION PROCEDURES</b>		<b>TECHNICAL ENQUIRIES</b>	
DIRECTORATE FINANCIAL SERVICES SUPPLY CHAIN MANAGEMENT UNIT		DIRECTORATE: TRAFFIC DEPARTMENT	
<b>KENNETH MAHLANGU</b>		<b>SAMUEL MAHLANGU</b>	
<b>DEMAND AND ACQUISITION MANAGER</b>		<b>SUPERINTENDENT</b>	
<b>TEL. NUMBER</b>	<b>013 249 7702</b>	<b>TEL. NUMBER</b>	<b>013 2497289</b>
<b>QUOTATION ISSUED BY</b>			
<b>KENNETH MAHLANGU</b>		LEGAL & ADMINISTRATION DEPARTMENT	
<b>DEMAND AND ACQUISITION MANAGER</b>	<b>TEL. NUMBER</b>	<b>013 249 7702</b>	
STEVE TSHWETE LOCAL MUNICIPALITY	P.O. BOX 14, MIDDELBURG, 1050		

**QUOTATION DETAILS**

QUOTATION NUMBER

**Q01.07.18**

TENDER TITLE

**PROFESSIONAL OR REGISTERED NURSES TO ASSIST WITH THE DRAWING OF BLOOD FROM THE DRUNKEN DRIVING SUSPECTS ARRESTED WITHIN THE STEVE TSHWETE LOCAL MUNICIPALITY, MP313 AREA**

CLOSING DATE

**2018/07/13**

CLOSING TIME

**12H00**

SITE MEETING

DATE

N/A

TIME

N/A

COMPULSORY

N/A

SITE MEETING ADDRESS

**N/A**

CIDB GRADING REQUIRED

**N/A**

LEVEL AND CATEGORY

**N/A**

QUOTATION DOCUMENT FEE

FREE OF CHARGE

PREFERENCE POINT SYSTEM

**80/20**

QUOTATION BOX SITUATED AT

**DEMAND AND ACQUISITIONING MANAGEMENT OFFICES, SCM,CORNER WALTER SISULU AND PROTEA STREET, MIDDELBURG**

OPERATING HOURS

The bid box is open during office hours, Monday to Thursdays from 8h00 to 16h00 and Fridays from 8h00 to 13h00.

OFFER TO BE VALID FOR

90

DAYS FROM THE CLOSING DATE OF QUOTATION.

PLEASE NOTE:

1. Prospective suppliers must be registered on CSD prior to submitting quotation and copy of said document must be attached to quotation.
2. Quotations that are deposited in the incorrect box will not be considered.
3. Mailed, telegraphic, telex, or faxed quotations will not be accepted.
4. No late quotations after closing date and time will be accepted.
5. Quotations not clearly marked and unamend will not be accepted.
6. Quotations may only be submitted on the quotation documentation provided by the municipality.
7. No awards will be made to a person:
  - i. Who is in the service of the state,
  - ii. If that person is not a natural person , of which any director, manager, principal shareholder or stakeholder is a person in the service of the state
  - iii. Who is an advisor or consultant contracted with the municipality or municipal entity

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BIDDER

WITNESS

EMPLOYER

WITNESS

# QUOTATION NOTICE & INVITATION

STEVE TSHWETE LOCAL MUNICIPALITY

QUOTATION NO.: Q01.07.18

**CLOSING DATE: 2018/07/13 AT 12H00**



## PROFESSIONAL OR REGISTERED NURSES TO ASSIST WITH THE DRAWING OF BLOOD FROM THE DRUNKEN DRIVING SUSPECTS ARRESTED WITHIN THE STEVE TSHWETE LOCAL MUNICIPALITY, MP313 AREA

In terms of Section 110 of the Municipal Finance Management Act, 2003 (No. 56 of 2003), quotations are hereby invited for **PROFESSIONAL OR REGISTERED NURSES TO ASSIST WITH THE DRAWING OF BLOOD FROM THE DRUNKEN DRIVING SUSPECTS ARRESTED WITHIN THE STEVE TSHWETE LOCAL MUNICIPALITY, MP313 AREA**

Quotation documents and specifications are available on the municipal website( [www.stlm.gov.za](http://www.stlm.gov.za))

The closing time for receipt of quotations is **12:00hrs** on **2018/07/13**. Telegraphic, telephonic, telex, facsimile, e-mail, unmarked and **late quotations** will under no circumstances be considered and accepted. The quotation box will be emptied just after closing time on the closing date. Hereafter all quotations will be public.

Any technical enquiries relating to the quotation document may be directed to the SAMUEL MAHLANGU, SUPERINTENDENT DEPARTMENT on **Error! Reference source not found.289**.

Fully completed quotation documents, clearly marked "**Quote No. Q01.07.18: for PROFESSIONAL OR REGISTERED NURSES TO ASSIST WITH THE DRAWING OF BLOOD FROM THE DRUNKEN DRIVING SUSPECTS ARRESTED WITHIN THE STEVE TSHWETE LOCAL MUNICIPALITY, MP313 AREA**

with "**NAME of SUPPLIER**" must be placed in a sealed envelope and placed in the **quotation box** at **DEMAND AND ACQUISITIONING MANAGEMENT OFFICES, SCM,CORNER WALTER SISULU AND PROTEA STREET, MIDDELBURG** by **no later than 12h00 on 2018/07/13**. The envelope must be endorsed with number, title and closing date as indicated above.

A preferential point system shall apply whereby a contract will be allocated to a tenderer in accordance with the Preferential Procurement Policy Framework Act, Act No. 5 of 2000 and as defined in the Conditions of Tender in the tender document, read in conjunction with the Supply Chain Management Policy of Steve Tshwete Local Municipality where 80 points will be allocated in respective of price and 20 points in respective of BBBEE. Bidders will be evaluated on functionality whereby a minimum score of 65 out of a possible 100 has to be obtained before financial proposals and BBBEE can be looked at.

No awards will be made to a person:

- Who is not registered on the Central Supplier Database
- Who is in the service of the state;
- If that person is not a natural person , of which any director, manager, principal shareholder or stakeholder is a person in the service of the state; and/or
- Who is an advisor or consultant contracted with the municipality or municipal entity.

The municipality reserves the right to withdraw any invitation to quote and/or to re-advertise or to reject any quote or to accept a part of it. The municipality does not bind itself to accepting the lowest quotation or award a contract to the bidder scoring the highest number of points.

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	BIDDER	WITNESS	EMPLOYER	WITNESS	

**The following documents have to be attached:**

- **Original certified copy of valid BBBEE certificate( non compulsory, failure to submit no points will be awarded)**
- **Valid Tax Clearance certificate & SARS Pin reference pin issued**
- **Copy of current municipal account( not older than 3 months)**
- **Copy of company registration certificate ( CK)**
- **Copy of CSD document**

B KHENISA  
ACTING MUNICIPAL MANAGER  
STEVE TSHWETE LOCAL MUNICIPALITY  
Municipal Civic Building  
Wanderers Avenue  
MIDDELBURG, 1050

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		BIDDER	WITNESS	EMPLOYER	WITNESS

## C2 PRICING SCHEDULE

### C2.1 PRICING INSTRUCTIONS

- a) These pricing instructions provide the tenderer with guidelines and requirements with regard to the completion of the pricing schedule. These pricing instructions also describe the criteria and assumptions which will be assumed in the contract to have been taken into account by the tenderer when developing his prices.
- b) The pricing schedule shall be read with all the documents which form part of this contract.
- c) The following words have the meaning hereby assigned to them:

Words/Abbreviation	Meaning
Example: M	Meter

- d) The rates to be inserted in the pricing schedule are to be full inclusive for the work described under the specification. Such rates shall cover all costs and expenses that may be required in and for the execution of the work described, and shall cover the cost of all general risks, liabilities, and obligations set forth or implied in the documents on which the tender is based, as well as overhead charges and profit.
- e) A rate is to be entered against each item in the Schedule of Fees and Disbursements. An item against which no rate is entered will be accepted as a rate of nil having been entered against such items and covered by the other prices or rates in the schedule.
- f) All rates and sums of money quoted in the pricing schedule shall be in Rands and whole cents. Fractions of a cent shall be discarded.
- g) All travelling costs, accommodation, meals and other incidental costs are to be included in the time based costs.
- h) Provisional amounts shall only be expended on the specific instruction of the Employer.
- i) All prices and rates entered in the pricing schedule must be **exclusive of Value Added Tax (VAT)**.
- j) If registered VAT is should be added at below the schedule. If not VAT registered indicate zero or “-“
- k) Only firm prices will be accepted. Non-firm prices (including prices subject to rates of exchange variations) will not be considered.
- l) In cases where different delivery points influence the pricing, a separate pricing schedule must be submitted for each delivery point.
- m) In cases of contract periods longer than 12 months and price adjustments is applicable, it will be based on CPI. If higher inflation is required indicate CPI + and number %.
- n) If the tender required firm (fixed prices) the amount indicated in Colum D will be the tender amount.
- o) If the tender amount is payable at end of contract on delivery of goods and services, Scratch out total per month with N/A or “-“
- p) If the tender amount is based on rates (Column B), the tender will be awarded to the rate and the total contract amount will only be used for evaluation purposes.

**MBD 3.1 BID PRICE**

Bid Number: **Q01.07.18**

**(Note : Contract amount to be carried over to Form of Offer C1.1.1)**

(Departments should amend pricing schedule according to pricing requirements and specifications)

ITEM	TASK / ITEM	(A) QUAN TITY	(B) UNIT RATE PER Unit (VAT EXCL)	UNIT RATE MEASUR EMENT	(C) TOTAL COST (VAT EXCL) (A*B)	(D) TOTAL COST (VAT INCL) (A*B+15%) – If applicable
1	<b>TIME BASED COSTS: (EXAMPLE) – FIXED</b>	1	R100 000	Per Item	Not applicable	R100 000
	<b>TIME BASED COSTS - RATES</b>	4000	R25,00	Per meter	R100 000	R1 200 000
1	Drawing of blood from the drunken driver: Monday to Friday :06:00a-18:00 Monday to Friday :18:00 – 06:00 Saturday: 06:00 -18:00 Saturday :18:00 – Sunday @ 06:00	1	R	Each	R	R
2	Sunday :06:00 -18:00 Sunday :18:00 – Monday @ 06:00	1	R	Each	R	R
3	During operation: 06:00-18:00 18:00-06:00	1	R	Each	R	R
2	<b>OTHER COSTS: (TO BE INDICATED BY TENDERER):</b>					
2.1		1	R	Each	R	R
2.2		1	R	Each	R	R
2.3		1	R	Each	R	R
<b>SUB- TOTAL COST PER ANNUM (section1 – 2)</b>				R		
<b>TOTAL AMOUNT CARRIED FORWARD TO FORM OF OFFER (C1.1.1)</b>				R		
<b>Inflation (if applicable per tender specification)</b>				CPI		
Delivery period from date of signing agreement to transfer funds				Days		

**OFFER TO BE VALID FOR 90 DAYS FROM THE CLOSING DATE OF BID**

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BIDDER

WITNESS

EMPLOYER

WITNESS



## FORM OF ACCEPTANCE

By signing this part of this form of offer and acceptance, the employer identified below accepts the tenderer's offer. In consideration thereof, the employer shall pay the service provider / consultant the amounts due in accordance with the conditions of contract identified in the contract data. Acceptance of the tenderer's offers shall form an agreement between the employer and the tenderer upon the terms and conditions contained in this agreement and in the contract that is the subject of this agreement.

The terms of the contract, are contained in:

- Part C1 Agreements and contract data, (which includes this agreement)
- Part C2 Pricing data
- Part C3 Scope of work.
- Service Level of Agreement attached to this document (if any) as amended ( if applicable) and signed by the parties.

and documents or parts thereof, which may be incorporated by reference into Parts C1 to C3 above.

Deviations from and amendments to the Service Level Agreement and documents listed in the tender data and any addenda thereto as listed in the tender schedules, will only be valid if reduced to writing and signed by both parties.

The tenderer shall within two weeks after receiving a completed copy of this agreement, contact the employer's agent (whose details are given in the contract data) to arrange the delivery of any bonds, guarantees, proof of insurance and any other documentation to be provided in terms of the conditions of contract identified in the contract data. Failure to fulfill any of these obligations in accordance with those terms shall constitute a repudiation of this agreement.

Unless otherwise specified elsewhere in this bidding document or any subsequent written agreement entered into between the parties, this agreement comes into effect on the date when the Employer communicates the acceptance and/or conditions of acceptance of the tenderer's offer in writing or signs the acceptance part of the Offer and Acceptance, whichever occurs first.

Signature Block: Employer			
Signature		Date	
Name			
Capacity			
Name of organization	Steve Tshwete Local Municipality		
Address of organization	P.O. Box 14, Middelburg, 1050		
Signature of witness		Date	
Name of witness			

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## MBD 2

### TAX CLEARANCE CERTIFICATE REQUIREMENTS

**It is a condition of bid that the taxes of the successful bidder must be in order, or that satisfactory arrangements have been made with South African Revenue Service (SARS) to meet the bidder's tax obligations.**

1. In order to meet this requirement bidders are required to complete in full form TCC001 "Application for a Tax Clearance Certificate" and submit it to any SARS branch office nationally. The tax clearance certificate requirements are also applicable to foreign bidders / individuals who wish to submit bids. Copies of the TCC 001 "Application for a Tax Clearance Certificate" form are available from any SARS branch office nationally or on the website [www.sars.gov.za](http://www.sars.gov.za).
2. SARS will then furnish the bidder with a tax clearance certificate that will be valid for a period of 1 (one) year from the date of approval.
3. The original tax clearance certificate must be submitted together with the bid. Failure to submit the original and valid tax clearance certificate will result in the invalidation of the bid. Certified copies of the Tax Clearance Certificate will not be acceptable.
4. In bids where consortia / joint ventures / sub-contractors are involved, each party's must submit a separate Tax Clearance Certificate.
5. Applications for the tax clearance certificates may also be made via e-Filing. In order to use this provision, taxpayers will need to register with SARS as e-Filers through the website [www.sars.gov.za](http://www.sars.gov.za).
6. Exemption to the provision of a tax clearance certificate will be granted provided that:
  - a) The bidder is registered on the vendor database of the municipality and a valid tax clearance certificate was submitted together with the application for registration
  - b) If the closing date of the price quotation or bid falls within the expiry date of the tax clearance certificate that is in the municipality's possession.

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3.8	Have you been in the service of the state for the past twelve months? If yes, please furnish particulars :	Yes	No
3.8.1	Name of director		
3.8.2	Service of state organization		
3.9	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? If yes, please furnish particulars :	Yes	No
3.9.1	Name of person in the service of state		
3.9.2	Relationship		
3.10	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? If yes, please furnish particulars :	Yes	No
3.10.1	Name of person in the service of state		
3.10.2	Relationship		
3.11	<i>Are any of the company's directors, trustees, managers, principle shareholders or stakeholders in service of the state?</i> If yes, please furnish particulars :	Yes	No
3.11.1	Name of director		
3.11.2	Service of state organization		
3.12	Is any spouse, child or parent of the company's director trustees, managers, principle shareholders or stakeholders in service of the state? If yes, please furnish particulars:	Yes	No
3.12.1	Name of director		
3.12.2	Name of relative		



5. I, the undersigned certify that the information furnished on this declaration form is correct.

I accept that the state may act against me should this declaration prove to be false.	
<b>NAME OF REPRESENTATIVE</b>	<b>AUTHORIZED SIGNATURE (UNDERSIGNED)</b>
<b>DATE</b>	<b>CAPACITY</b>

## MBD 6.1

### PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2017

This preference form must form part of all bids invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (B-BBEE) Status Level of Contribution

**NB: BEFORE COMPLETING THIS FORM, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF B-BBEE, AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.**

#### 1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to all bids:

- the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- the 90/10 system for requirements with a Rand value above R50 000 000 (all applicable taxes included).

1.2

- a) The value of this bid is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore the 80/20 preference point system shall be applicable; or
- b) Either the 80/20 or 90/10 preference point system will be applicable to this tender (*delete whichever is not applicable for this tender*).

1.3 Points for this bid shall be awarded for:

- (a) Price; and
- (b) B-BBEE Status Level of Contributor.

1.4 The maximum points for this bid are allocated as follows:

	POINTS
PRICE	80
B-BBEE STATUS LEVEL OF CONTRIBUTOR	20
<b>Total points for Price and B-BBEE must not exceed</b>	<b>100</b>

1.5 Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the bid, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.

1.6 The purchaser reserves the right to require of a bidder, either before a bid is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

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<b>Designated Group: An EME or QSE which is at least 51% owned by:</b>	<b>EME</b>	<b>QSE</b>
	√	√
Black people		
Black people who are youth		
Black people who are women		
Black people with disabilities		
Black people living in rural or underdeveloped areas or townships		
Cooperative owned by black people		
Black people who are military veterans		
<b>OR</b>		
Any EME		
Any QSE		

**8. DECLARATION WITH REGARD TO COMPANY/FIRM**

8.1 Name of company/firm:.....

8.2 VAT registration number:.....

8.3 Company registration number:.....

**8.4 TYPE OF COMPANY/ FIRM**

- Partnership/Joint Venture / Consortium
- One person business/sole propriety
- Close corporation
- Company
- (Pty) Limited

[TICK APPLICABLE BOX]

**8.5 DESCRIBE PRINCIPAL BUSINESS ACTIVITIES**

.....  
.....  
.....  
.....

**8.6 COMPANY CLASSIFICATION**

- Manufacturer
- Supplier
- Professional service provider
- Other service providers, e.g. transporter, etc.

[TICK APPLICABLE BOX]

**8.7 MUNICIPAL INFORMATION**

**Municipality where business is situated:** .....

**Registered Account Number:** .....

**Stand Number:**.....

8.8 Total number of years the company/firm has been in business:.....

8.9 I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we acknowledge that:

- i) The information furnished is true and correct;
- ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;
- iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have –
  - (a) disqualify the person from the bidding process;
  - (b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
  - (c) cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;
  - (d) recommend that the bidder or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted by the National Treasury from obtaining business from any organ of state for a period not exceeding 10 years, after the *audi alteram partem* (hear the other side) rule has been applied; and
  - (e) forward the matter for criminal prosecution.

<p>WITNESSES</p> <p>1. ....</p> <p>2. ....</p>
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<p>..... SIGNATURE(S) OF BIDDERS(S)</p> <p>DATE: .....</p> <p>ADDRESS .....</p> <p>.....</p> <p>.....</p>
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Item	Question	Yes	No
4.3	Was the bidder or any of its directors convicted by a court of law (including a court of law outside the Republic of South Africa) for fraud or corruption during the past five years?	Yes	No
4.3.1	If so, furnish particulars:		
4.4	Does the bidder or any of its directors owe any municipal rates and taxes or municipal charges to the municipality / municipal entity, or to any other municipality / municipal entity, that is in arrears for more than three months?	Yes	No
4.4.1	If so, furnish particulars:		
4.5	Was any contract between the bidder and the municipality / municipal entity or any other organ of state terminated during the past five years on account of failure to perform on or comply with the contract?	Yes	No
4.5.1	If so, furnish particulars:		

## CERTIFICATION

I, the undersigned certify that the information furnished on this declaration form true and correct.

I accept that, in addition to cancellation of a contract, action may be taken against me should this declaration prove to be false.

<b>NAME OF REPRESENTATIVE</b>	<b>AUTHORIZED SIGNATURE (UNDERSIGNED)</b>
<b>DATE</b>	<b>CAPACITY</b>

## MBD 9

### CERTIFICATE OF INDEPENDENT BID DETERMINATION

- 1 This municipal bidding document (MBD) must form part of all bids<sup>1</sup> invited.
- 2 Section 4(1)(b)(iii) of the Competition Act No. 89 of 1998, as amended, prohibits an agreement between, or concerted practice by, firms, or a decision by an association of firms, if it is between parties in a horizontal relationship and if it involves collusive bidding (or bid rigging).<sup>2</sup> Collusive bidding is a *pe se* prohibition meaning that it cannot be justified under any grounds.
- 3 Municipal Supply Regulation 38(1) prescribes that a supply chain management policy must provide measures for the combating of abuse of the supply chain management system, and must enable the accounting officer, among others, to:
  - 3.1. take all reasonable steps to prevent such abuse;
  - 3.2. reject the bid of any bidder if that bidder or any of its directors has abused the supply chain management system of the municipality or municipal entity or has committed any improper conduct in relation to such system; and
  - 3.3. cancel a contract awarded to a person if the person committed any corrupt or fraudulent act during the bidding process or the execution of the contract.
- 4 This MBD serves as a certificate of declaration that would be used by institutions to ensure that, when bids are considered, reasonable steps are taken to prevent any form of bid rigging.
- 5 In order to give effect to the above, the attached Certificate of Bid Determination (MBD 9) must be completed and submitted with the bid:

**<sup>1</sup> Includes price quotations, advertised competitive bids, limited bids and proposals.**

**<sup>2</sup> Bid rigging (or collusive bidding) occurs when businesses, that would otherwise be expected to compete, secretly conspire to raise prices or lower the quality of goods and / or services for purchasers who wish to acquire goods and / or services through a bidding process. Bid rigging is, therefore, an agreement between competitors not to compete.**

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as the bidder.

6. The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However, communication between partners in a joint venture or consortium<sup>3</sup> will not be construed as collusive bidding.
7. In particular, without limiting the generality of paragraphs 6 above, there has been no consultation, communication, agreement or arrangement with any competitor regarding:
  - 7.1 Prices;
  - 7.2 Geographical area where product or service will be rendered (market allocation);
  - 7.3 Methods, factors or formulas used to calculate prices;
  - 7.4 The intention or decision to submit or not to submit a bid;
  - 7.5 The submission of a bid which does not meet the specifications and conditions of the bid;  
or
  - 7.6 Bidding with the intention not to win the bid.
8. In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications and conditions or delivery particulars of the products or services to which this bid invitation relates.
9. The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening or of the awarding of the contract.

**<sup>3</sup> Joint venture or consortium means an association of persons for the purpose of combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.**

10. I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act No. 89 of 1998 and or may be reported to the National Prosecuting Authority (NPA) for criminal investigation and or may be restricted from conducting business with the public sector for a period not exceeding ten (10) years in terms of the Prevention and Combating of Corrupt Activities Act No. 12 of 2004 or any other applicable legislation.

<b>NAME OF REPRESENTATIVE</b>	<b>AUTHORIZED SIGNATURE (UNDERSIGNED)</b>
<b>DATE</b>	<b>CAPACITY</b>



## CLARIFICATION MEETING ATTENDANCE CERTIFICATE

<b>This is to certify that, I</b>	
<b>representing</b>	
<b>in the company of</b>	
<b>attended the clarification meeting on</b>	<b>Error! Reference source not found. at Error! Reference source not found.</b> <b>Address: Error! Reference source not found.</b>
<p>I have made myself familiar with all conditions likely to influence the work and the cost thereof. I further certify that I am satisfied with the description of the work and explanations given at the clarification meeting and that I understand perfectly the work to be done, as specified and implied, in the execution of this contract.</p>	

<b>NAME OF REPRESENTATIVE</b>	<b>SIGNATURE</b>	<b>DATE</b>

<b>NAME OF MUNICIPAL REPRESENTATIVE</b>	<b>SIGNATURE</b>	<b>DATE</b>

The following particulars must be furnished. In the case of a joint venture, separate enterprise questionnaires in respect of each partner must be completed and submitted.

**Section 1: Name of enterprise**

**Section 2: VAT registration number, if any**

**Section 3: Particulars of sole proprietors and partners in partnerships**

No	Name*	Identity Number*	Personal Income Tax Number*
3.1			
3.2			
3.3			

\* Complete only if sole proprietor or partnership and attach separate page if more than 3 partners

**Section 4: Particulars of companies and close corporations**

4.1	Company Registration number	
4.2	Close corporation number	
4.3	Tax reference number	

**Section 5: Record in the service of the state**

Indicate by marking the relevant boxes with a cross, if any sole proprietor, partner in a partnership or director, manager, principal shareholder or stakeholder in a company or close corporation is currently or has been within the last 12 months in the service of any of the following:

A member of any municipal council	<input type="checkbox"/>	An employee of any provincial department, national or provincial public entity or constitutional institution within the meaning of the Public finance Management Act, 1999 (Act 1 of 1999)	<input type="checkbox"/>
A member of any provincial legislation	<input type="checkbox"/>	A member of an accounting authority of any national or provincial public entity	<input type="checkbox"/>
A member of the National Assembly or the National Council of Province	<input type="checkbox"/>	An employee of Parliament or a provincial legislature	<input type="checkbox"/>
A member of the board of directors of any municipal entity	<input type="checkbox"/>	An official of any municipality or municipal entity	<input type="checkbox"/>



The undersigned, who warrants that he/she is duly authorized to do so on behalf of the enterprise:

- i) authorizes the Employer to obtain a tax clearance certificate from the South African Revenue Services that my / our tax matters are in order;
- ii) confirms that the neither the name of the enterprise or the name of any partner, manager, director or other person, who wholly or partly exercises, or may exercise, control over the enterprise appears on the Register of Tender Defaulters established in terms of the Prevention and Combating of Corrupt Activities Act of 2004.
- iii) confirms that no partner, member, director or other person, who wholly or partly exercises, or may exercise, control over the enterprise appears, has within the last five years been convicted of frauds or corruption;
- iv) confirms that I / we are not associated, linked or involved with any other tendering entities submitting tender offers and have no other relationship with any of the tenderers or those responsible for compiling the scope of work that could cause or be interpreted as a conflict of interest; and
- v) confirms that the contents of this questionnaire are within my personal knowledge and are to the best of my belief both true and correct.

Note: insert separate page if necessary

<b>NAME OF REPRESENTATIVE</b>	<b>AUTHORIZED SIGNATURE (UNDERSIGNED)</b>
<b>CAPACITY</b>	<b>DATE</b>



## NOTICE OF SUPPLY CHAIN MANAGEMENT

### APPLICATION FOR REGISTRATION ON CENTRAL SUPPLIER DATABASE

Par 14(1)(a) of the municipal supply chain management policy states that the municipality must keep a list of accredited prospective providers of goods and services that must be used for the procurement requirements.

The purpose of this notice is to obtain proof that the service provider is registered on the Central Supplier Database. **Registration is COMPULSORY in order to conduct business with Steve Tshwete Local Municipality.** The database will be used to verify the accreditation of a supplier before an award can be made.

Each bidder must complete the below checklist (please tick with an X where appropriate)

	QUESTIONS	YES	NO
1.	Is your company registered on the Central Supplier Database?		
2.	If yes, provide the following details:		
2.1	▪ CSD registration number	MAAA	
2.2	▪ Unique CSD number		
3.	Enquiries related to par. 2.1 and 2.2 can be made to Ms. Martha Makoala and Thembi Jiyane at (013) 2497309 / 2497164		
4.	If no, please register on Central Supplier Database ,website, <a href="http://www.csd.gov.za">www.csd.gov.za</a> , before submitting tender document		
I, (insert full name)			
of (insert physical address)			
being a Director, Principal Shareholder, owner of company (insert company name)			
hereby confirms that, the information submitted in this form is accurate, to the best of my knowledge			
SIGNATURE			
5.	VERIFICATION BY STEVE TSHWETE LOCAL MUNICIPALITY OFFICIAL		
I, (insert full name)			
in the capacity as			
hereby confirms that the information submitted by the service provider was verified with the Central Supplier Database and found as correct to be the best of my knowledge			
SIGNATURE			

**CONTRACT FORM - RENDERING OF SERVICES**

**THIS FORM MUST BE FILLED IN BY BOTH THE SERVICE PROVIDER (PART 1) AND THE EMPLOYER / MUNICIPALITY (PART 2) AND SIGNED IN THE DUPLICATE.**

**PART 1 (TO BE FILLED IN BY THE SERVICE PROVIDER)**

- I hereby undertake to render the services as described in the attached bidding documents to Steve Tshwete Local Municipality in accordance with the requirements and task directives / proposals specifications stipulated in bid number **Q01.07.18** at the price/s quoted. My offer/s remains binding upon me and open for acceptance by the Employer / Municipality during the validity period indicated and calculated from the closing date of the bid.
1. The following documents shall be deemed to form and be read and construed as part of this agreement:
    - 2.1 Bidding documents, viz
      - Invitation to bid;
      - Tax clearance certificate;
      - Pricing schedule(s);
      - Filled in task directive/proposal;
      - Preference claims for Broad Based Black Economic Empowerment Status Level of Contribution in terms of the Preferential Procurement Regulations 2011;
      - Declaration of interest;
      - Declaration of Bidder's past SCM practices;
      - Certificate of Independent Bid Determination;
      - Special Conditions of Contract;
      - Service Level Agreement
    - 1.2 General Conditions of Contract;
    - 1.3 Other (specify)
  2. I confirm that I have satisfied myself as to the correctness and validity of my bid; that the price(s) and rate(s) quoted cover all the services specified in the bidding documents; that the price(s) and rate(s) cover all my obligations and I accept that any mistakes regarding price(s) and rate(s) and calculations will be at my own risk.
  3. I accept full responsibility for the proper execution and fulfillment of all obligations and conditions devolving on me under this agreement as the principal liable for the due fulfillment of this contract.
  4. I declare that I have no participation in any collusive practices with any bidder or any other person regarding this or any other bid.
  5. I confirm that I am duly authorized to sign this contract.

<b>SIGNED AT</b>	<b>AUTHORIZED SIGNATURE (UNDERSIGNED)</b>
<b>DATE</b>	<b>NAME AND CAPACITY</b>
<b>WITNESSES: (SIGNATURE)</b>	<b>DATE</b>
1.	
2.	

Q01.07.18					
BIDDER	WITNESS	EMPLOYER	WITNESS		

**MBD 7.2**

**CONTRACT FORM - RENDERING OF SERVICES**

**PART 2 (TO BE FILLED IN BY THE EMPLOYER / MUNICIPALITY)**

I \_\_\_\_\_ in my capacity  
 as \_\_\_\_\_ accept your bid under  
 reference number \_\_\_\_\_ dated \_\_\_\_\_  
 for the rendering of services hereunder and/or further specified in the annexures.

1. An official order indicating service delivery instructions is forthcoming.
2. I undertake to make payment for the services rendered in accordance with the terms and conditions of the contract, within 30 (thirty) days after receipt of an invoice, subject to the National Treasury's Central Supplier Database reflecting your tax status as compliant.

DESCRIPTION OF SERVICE	PRICE (ALL APPLICABLE TAXES INCLUDED)	COMPLETION DATE	B-BBEE STATUS LEVEL OF CONTRIBUTION	MINIMUM THRESHOLD FOR LOCAL PRODUCTION & CONTENT (IF APPLICABLE)

4. I confirm that I am duly authorized to sign this contract.

<b>SIGNED AT</b>	<b>AUTHORIZED SIGNATURE (UNDERSIGNED)</b>
<b>DATE</b>	<b>NAME AND CAPACITY</b>
<b>WITNESSES: (SIGNATURE)</b>	<b>OFFICIAL STAMP</b>
1.	
2.	



## C1.2 CONTRACT DATA

### PART 1 - DATA PROVIDED BY THE EMPLOYER

The employer is the **Steve Tshwete Local Municipality**.

**The authorized and designated representative of the employer is:**

Name:

SAMUEL MAHLANGU, TRAFFIC DEPARTMENT

The address for receipt of communications is:

Steve Tshwete Local Municipality  
Civic Centre  
P.O. Box 14  
Middelburg  
1050

Telephone:

013 249 7289

Facsimile:

-

Email:

samuelm@stlm.gov.za

The project is:

**PROFESSIONAL OR REGISTERED NURSES TO ASSIST WITH THE DRAWING OF BLOOD FROM THE DRUNKEN DRIVING SUSPECTS ARRESTED WITHIN THE STEVE TSHWETE LOCAL MUNICIPALITY, MP313 AREA**

**The service provider is**

Name

Address

Telephone:

Facsimile:

**The authorized and designated representative of the service provider is**

Name

The address for receipt of communications is

Telephone

Facsimile

Email

Address

# C3 SCOPE OF WORKS / SPECIFICATIONS

## TERMS OF REFERENCE

### 1. Background information

Professional or Registered Nurses are hereby requested to submit quotations for the drawing of blood from the drunken driving suspects arrested within Steve Tshwete Local Municipality, MP 313 Area.

### 2. Scope of Works of the services required

Drawing of blood from the drunken driving suspects arrested within Steve Tshwete Local Municipality, MP 313 Area.

- The persons must be residing within the Steve Tshwete Local Municipality, MP313 Area.
- The persons must have Grade 12 Certificate, Diploma or Degree in Nursing and who is currently registered with the South African Nursing Council.
- The persons must be a professional or registered nurse with a valid membership number.
- The persons must be prepared to give evidence as and when it is necessary in the court of law.
- The services of these persons will be required as and when required, mostly during peak period months, Festive and Easter holidays when traffic officials are all out conducting roadblocks or drunken driving operations.
- Persons must be prepared to work awkward hours, such as during the night when there is a drunken driving operation.
- Persons will be required to be on standby on an occasional basis.
- Persons must have their own transport to enable them to reach their destination, within a reasonable time.

### 2. METHOD OF PAYMENT

- Payment will be paid per suspect.
- Weekdays from Monday to Friday rate should be indicated as such.
- Saturday's rate.
- Holidays and Sundays rate.
- Payment will be made upon production of the signed register by the traffic Supervisor.
- Transport rate.

### 3. CONTRACT

- Persons will have to enter into a contract with the Municipality on a yearly basis.

The following requirements apply to all prospective service providers:

1. Must be registered on the Central Database.
2. Price(s) quoted must be valid for at least ninety (90) days after the closing date of the proposal.
3. Council is not bound to accept the lowest or any quotation and can further decide not to appoint.
4. Original certified copy of valid BBBEE certificate( non compulsory, failure to submit no points will be awarded)
5. Valid Tax Clearance certificate & SARS Pin reference pin issued
6. Copy of current municipal account( not older than 3 months)
7. Copy of company registration certificate ( CK)
8. Copy of CSD document

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## VALIDITY PERIOD

The quotation shall be valid for 90 days from date of opening the quote.

## ESTIMATE TIMEFRAMES

No.	Activity	Estimate Date
1.	Advertisement and invitation	05/07/2018
2.	Closing Date for submission of quotations	<b>13/07/2018</b>
3.	Evaluation process.	
4.	Signing of final award	

### **C.4. Supporting documents for quotation:**

**Service providers are requested to file all relevant supporting documents according to this list.**

<b><u>Annexure</u></b>	<b><u>Description</u></b>	<b><u>Applicable Yes / No</u></b>
A	Tax Clearance Certificate & SARS reference pin	Yes
B	Original certified copy of BBBEE Certificate	Yes
C	Central Supplier Database report	Yes
D	Copy of Municipal Water & Lights Account or Lease agreement	Yes
E	Original certified copy of CIDB Grading certificate	Yes
F	Accreditation certificate for :	Yes / No
G	Company registration certificate ( CK 1)	Yes
H	Functionality report: Tenderer's experience	Yes / No
I	Functionality report: Proposed organization, staffing and key staff experience evaluation	Yes / No
J	Functionality report: Capacity to execute & implement the tender (physical resources) evaluation	Yes / No
K	Functionality report: Tenderer's implementation plan for the project	Yes / No
L	JV Agreement ( If applicable)	Yes / No
M	Sub Contractor's information and documents ( If applicable)	Yes / No

## GENERAL CONDITIONS OF CONTRACT

The General Conditions of Contract are not included in this document and may be downloaded from the following website – [www.treasury.gov.za/legislation](http://www.treasury.gov.za/legislation).

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