



STEVE TSHWETE LOCAL MUNICIPALITY

QUOTATION NO. Q13.04.19

CALLING FOR QUOTATIONS FOR SERVICES
(R 30 000 TO R 200 000.00)

MEDICAL SURVEILLANCE (RED TICKET)

CLOSING DATE:	2019/04/18	TIME	12H00
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NAME OF COMPANY	
TOTAL AMOUNT (MBD 3.1)	
CENTRAL SUPPLIER DATABASE NUMBER	MAAA
TAX COMPLIANCE STATUS PIN	
CONTACT PERSON	
TELEPHONE NUMBER	
FAX NUMBER	

ENQUIRIES REGARDING QUOTATION PROCEDURES		TECHNICAL ENQUIRIES	
DIRECTORATE FINANCIAL SERVICES SUPPLY CHAIN MANAGEMENT UNIT		DIRECTORATE: CORPORATE SERVICES	
KENNETH MAHLANGU		TRESUR MATHABATHE	
CHIEF DEMAND AND ACQUISITION MANAGER		SAFETY OFFICER	
TEL. NUMBER	013 249 7702	TEL. NUMBER	013 249 7335

QUOTATION ISSUED BY			
KATLEGO HLONGWA		SUPPLY CHAIN MANAGEMENT UNIT	
BUYER		TEL. NUMBER	013 249 7703
STEVE TSHWETE LOCAL MUNICIPALITY		P.O. BOX 14, MIDDELBURG, 1050	

QUOTATION DETAILS

QUOTATION NUMBER	Q13.04.19					
TENDER TITLE	MEDICAL SURVEILLANCE (RED TICKET)					
CLOSING DATE	2019/04/18		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		N/A	
QUOTATION BOX SITUATED AT	SUPPLY CHAIN MANAGEMENT OFFICES, CNR PROTEA AND WALTER SISULU STREET, MIDDELBURG					
OPERATING HOURS	The bid box is open during office hours, Monday to Thursdays from 08h00 to 16h00 and Fridays from 08h00 to 13h00.					
OFFER TO BE VALID FOR	90	DAYS FROM THE CLOSING DATE OF QUOTATION.				
<p>PLEASE NOTE:</p> <ol style="list-style-type: none"> 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. This quotation is subject to the Preferential Procurement Policy Framework Act and the Preferential Procurement Regulations, 2017, the General Conditions of contract (GCC) and, if applicable, any other special conditions of contract. 4. Mailed, telegraphic, telex, or faxed quotations will not be accepted. 5. No late quotations after closing date and time will be accepted. 6. Quotations not clearly marked and unamend will not be accepted. 7. Quotations may only be submitted on the quotation documentation provided by the municipality. No awards will be made to a person: <ol style="list-style-type: none"> 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 						

MBD 1

Q13.04.19					
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BIDDER

WITNESS

EMPLOYER

WITNESS

PART A INVITATION TO BID

YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF MUNICIPALITY/ MUNICIPAL ENTITY)

BID NUMBER:	CLOSING DATE:	2019/03/22	CLOSING TIME:	12H00
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DESCRIPTION: MEDICAL SURVEILLANCE (RED TICKET)

THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7).

BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX
SITUATED AT (STREET ADDRESS)

SUPPLY CHAIN MANAGEMENT OFFICES, CNR PROTEA STREET AND WALTER SISULU STREET, MIDDELBURG, 1050

SUPPLIER INFORMATION

NAME OF BIDDER				
POSTAL ADDRESS				
STREET ADDRESS				
TELEPHONE NUMBER	CODE		NUMBER	
CELLPHONE NUMBER				
FACSIMILE NUMBER	CODE		NUMBER	
E-MAIL ADDRESS				
VAT REGISTRATION NUMBER				
TAX COMPLIANCE STATUS	TCS PIN:		OR	CSD No:
B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE [TICK APPLICABLE BOX]	<input type="checkbox"/> Yes <input type="checkbox"/> No		B-BBEE STATUS LEVEL SWORN AFFIDAVIT	<input type="checkbox"/> Yes <input type="checkbox"/> No

[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/ SWORN AFFIDAVIT (FOR EMES & QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]

<i>ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No [IF YES ENCLOSE PROOF]	<i>ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES /WORKS OFFERED?</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No [IF YES, ANSWER PART B:3]
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<i>TOTAL NUMBER OF ITEMS OFFERED</i>	<i>TOTAL BID PRICE</i>
	R

<i>SIGNATURE OF BIDDER</i>	<i>DATE</i>
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CAPACITY UNDER WHICH THIS BID IS SIGNED

BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO:		TECHNICAL INFORMATION MAY BE DIRECTED TO:	
DEPARTMENT	FINANCE	CONTACT PERSON	TRESUR MATHABATHE
CONTACT PERSON	KENNETH MAHLANGU	TELEPHONE NUMBER	013 249 7189
TELEPHONE NUMBER	013 249 7702	FACSIMILE NUMBER	013 243 2550
FACSIMILE NUMBER	013 243 2550	E-MAIL ADDRESS	tresurm@stlm.gov.za
E-MAIL ADDRESS	kennethm@stlm.gov.za		

Q13.04.19				
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BIDDER

WITNESS

EMPLOYER

WITNESS

PART B TERMS AND CONDITIONS FOR BIDDING

1. BID SUBMISSION:

- 1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.
- 1.2. ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED-(NOT TO BE RE-TYPED) OR ONLINE
- 1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.

2. TAX COMPLIANCE REQUIREMENTS

- 2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.
- 2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VIEW THE TAXPAYER'S PROFILE AND TAX STATUS.
- 2.3 APPLICATION FOR THE TAX COMPLIANCE STATUS (TCS) CERTIFICATE OR PIN 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.
- 2.4 FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B:3.
- 2.5 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.
- 2.6 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.
- 2.7 WHERE NO TCS IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.

3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS

- 3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)? YES NO
- 3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA? YES NO
- 3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA? YES NO
- 3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA? YES NO
- 3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION? YES NO

IF THE ANSWER IS "NO" TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 ABOVE.

**NB: FAILURE TO PROVIDE ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.
NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE.**

SIGNATURE OF BIDDER:

CAPACITY UNDER WHICH THIS BID IS SIGNED:

DATE:

Q13.04.19				
BIDDER	WITNESS	EMPLOYER	WITNESS	



STEVE TSHWETE LOCAL MUNICIPALITY
QUOTATION NO.: Q13.04.19
CLOSING DATE: 2019/04/18 AT 12H00
MEDICAL SURVEILLANCE (RED TICKET)

In terms of Section 110 of the Municipal Finance Management Act, 2003 (No. 56 of 2003), quotations are hereby invited for Training: MEDICAL SURVEILLANCE (RED TICKET).

Quotation documents and specifications are available on the municipal website(www.stlm.gov.za)

The closing time for receipt of quotations is **12:00hrs** on **2019/04/18**. 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 TRESUR MATHABATHE, **Error! Reference source not found.** on 013 249 7189 or via email.

Fully completed quotation documents, clearly marked "**Quote No. Q13.04.19: MEDICAL SURVEILLANCE (RED TICKET)**" with "**NAME OF SUPPLIER**" must be placed in a sealed envelope and placed in the **quotation box** at SUPPLY CHAIN MANAGEMENT OFFICES, CNR PROTEA STREET AND WALTER SISULU STREET, MIDDELBURG, 1050**Error! Reference source not found.** **by no later than 12h00 on 2019/04/18**. 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 repective of BBEE. **Bidders will be evaluated on functionality whereby a minimum score of 60 out of a possible 100 has to be obtained before financial proposals and BBEE 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.

The following documents have to be attached (Bidders that fail to submit documents indicated as compulsory will be disqualified)

- **Original certified copy of valid BBEE Certificate (non-compulsory, failure to submit no points will be awarded) only SANAS accredited or Affidavits will be accepted.**
- **Copy of company registration certificate(CK) - Compulsory**
- **Valid Tax Clearance Certificate & SARS Pin reference pin issued- Compulsory**
- **Copy of current municipal account (not older than 3 months) – copy of Lease Agreement – Compulsory**
- **CSD summary report – Compulsory**
- **Copy of relevant professional registration certificate – (HPCSA) Compulsory**

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

Q13.04.19					
	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.

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

MBD 3.1 BID PRICE

Bid Number: **Q13.04.19**

(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) QUANTITY	(B) UNIT RATE (VAT EXCL)	UNIT RATE MEASUREMENT (C)	(D) TOTAL COST (VAT EXCL) (A*B*C)
1	TIME BASED COSTS: (EXAMPLE) – FIXED	1	R100 000	Per Item	Not applicable
	TIME BASED COSTS - RATES	4000	R25,00	Per meter	R100 000
1.1	MEDICAL SURVEILLANCE (RED TICKET)	300			
1.2					
1.3					
1.4					
1.5					
2	OTHER COSTS: (TO BE INDICATED BY TENDERER):				
2.1					
2.2					
2.3					
SUB- TOTAL COST PER ANNUM (section1 – 2)					
VAT at 15%					
TOTAL AMOUNT CARRIED FORWARD TO FORM OF OFFER (C1.1.1)					
Inflation (if applicable per tender specification)				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

Q13.04.19				
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BIDDER

WITNESS

EMPLOYER

WITNESS

FORM OF OFFER

The employer, identified in the acceptance signature block, has solicited offers to enter into a contract for the following project:

Bid / Tender Number	Q13.04.19
Tender Title	MEDICAL SURVEILLANCE (RED TICKET)

The tenderer, identified in the offer signature block, has examined the documents listed in the tender data and addenda thereto as listed in the returnable schedules, and by submitting this offer has accepted the conditions of tender.

By the representative of the tenderer, deemed to be duly authorized, signing this part of this form of offer and acceptance, the tenderer offers to perform all of the obligations and liabilities of the service provider / consultant under the contract including compliance with all its terms and conditions according to their true intent and meaning for an amount to be determined in accordance with the conditions of contract identified in the contract data.

THE OFFERED TOTAL OF THE PRICES INCLUSIVE OF VALUE ADDED TAX IS THE FOLLOWING:

AMOUNT IN WORDS (INCL. VAT)	RAND	AMOUNT IN FIGURES (INCL VAT)
	R	

****AMOUNT MUST BE IN WORDS AS WELL AS FIGURES**

This offer may be accepted by the employer by communicating such acceptance in writing to the tenderer or by signing the acceptance part of this Form of Offer and Acceptance and returning one copy thereof to the tenderer, whereupon the tenderer becomes the party named as the provider / consultant in the conditions of contract identified in the contract data.

Signature Block: Tenderer			
Signature		Date	
Name			
Capacity			
Name of organization			
Address of organization			
Signature of witness		Date	
Name of witness			

Q13.04.19					
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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			

MBD 1

1. TAX COMPLIANCE REQUIREMENTS

- 1. Bidders must ensure compliance with their tax obligations.
- 2. Bidders are required to submit their unique personal identification number(PIN) issued by SARS to enable Organ of state to view the taxpayer's profile and tax status.
- 3. Application for the tax compliance status (TCS) certificate or PIN may 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
- 4. Foreign suppliers have must complete the pre-award questionnaire in part 2.
- 5. Bidders may also submit a printed TCS certificate together with the bid.
- 6. In bids where Consortia / Joint Ventures / Sub-contractors are involved, each party must submit a separate TCS certificate / pin / CSD number.
- 7. Where no TCS is available but the bidder is registered on the Central Supplier Database (CSD), a CSD number must be provided.

2. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS

- 1. Is the entity a resident of the Republic of South Africa? YES / NO
- 2. Does the entity have a branch in the RSA? YES / NO
- 3. Does the entity have a permanent establishment in the RSA? YES / NO
- 4. Does the entity have any source of income in RSA? YES / NO
- 5. Is the entity liable in the RSA for any form of Taxation? YES / NO

(IF THE ANSWER IS "NO"TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM SARS AND IF NOT REGISTER AS PER 1.3. ABOVE)

NB: Failure to provide any of the above particulars may render the bid invalid.

.....
Signature of BIDDER

.....
Date

.....
Capacity under which this bid is signed

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

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.

No.	Information	Please provide detail	
3.1	Full name of bidder or his or her representative		
3.2	Identity number		
3.3	Position occupied in the company (director, trustee, hareholder ²)		
3.4	Company registration number		
3.5	Tax reference number		
3.6	VAT registration number		
Note	<i>(The names of all directors / trustees / shareholders members, their individual identity numbers and state employee numbers must be indicated in paragraph 4 below.)</i>		
3.7	Are you presently in the service of the state? If yes, please furnish particulars :	Yes	No
3.7.1	Name of director		
3.7.2	Service of state organization		

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		

3.12.3	Relationship		
3.13	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? If yes, please furnish particulars:	Yes	No
3.13.1	Name of director		
3.13.2	Related company		
Note:	<p>SCM Regulations:</p> <p>"¹In the service of the state" means to be –</p> <p>(a) a member of –</p> <p>(i) any municipal council;</p> <p>(ii) any provincial legislature; or</p> <p>(iii) the national Assembly or the national Council of provinces;</p> <p>(b) a member of the board of directors of any municipal entity;</p> <p>(c) an official of any municipality or municipal entity;</p> <p>(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);</p> <p>(e) a member of the accounting authority of any national or provincial public entity; or</p> <p>(f) an employee of Parliament or a provincial legislature.</p> <p>"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.</p>		

4. Full details of directors / trustees / members / shareholders

Full Name	Identity Number	State Employee Number

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.	
NAME OF REPRESENTATIVE	AUTHORIZED SIGNATURE (UNDERSIGNED)
DATE	CAPACITY

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) The 80/20 preference point system will be applicable to this tender Points for this bid shall be awarded for:
 - (a) Price; and
 - (b) B-BBEE Status Level of Contributor.

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

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

- 1.4 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.
- 1.5 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.

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

2. DEFINITIONS

- (a) **“B-BBEE”** means broad-based black economic empowerment as defined in section 1 of the Broad-Based Black Economic Empowerment Act;
- (b) **“B-BBEE status level of contributor”** means the B-BBEE status of an entity in terms of a code of good practice on black economic empowerment, issued in terms of section 9(1) of the Broad-Based Black Economic Empowerment Act;
- (c) **“bid”** means a written offer in a prescribed or stipulated form in response to an invitation by an organ of state for the provision of goods or services, through price quotations, advertised competitive bidding processes or proposals;
- (d) **“Broad-Based Black Economic Empowerment Act”** means the Broad-Based Black Economic Empowerment Act, 2003 (Act No. 53 of 2003);
- (e) **“EME”** means an Exempted Micro Enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (f) **“functionality”** means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- (g) **“prices”** includes all applicable taxes less all unconditional discounts;
- (h) **“proof of B-BBEE status level of contributor”** means:
 - 1) B-BBEE Status level certificate issued by an authorized body or person;
 - 2) A sworn affidavit as prescribed by the B-BBEE Codes of Good Practice;
 - 3) Any other requirement prescribed in terms of the B-BBEE Act;
- (i) **“QSE”** means a qualifying small business enterprise in terms of a code of good practice on black economic empowerment issued in terms of section 9 (1) of the Broad-Based Black Economic Empowerment Act;
- (j) **“rand value”** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

3. POINTS AWARDED FOR PRICE

3.1 THE 80/20 OR 90/10 PREFERENCE POINT SYSTEMS

A maximum of 80 or 90 points is allocated for price on the following basis:

80/20 **or** **90/10**

$$P_s = 80 \left(1 - \frac{P_t - P_{\min}}{P_{\min}} \right) \quad \text{or} \quad P_s = 90 \left(1 - \frac{P_t - P_{\min}}{P_{\min}} \right)$$

Where

- P_s = Points scored for price of bid under consideration
- P_t = Price of bid under consideration
- P_{min} = Price of lowest acceptable bid

4. POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR

- 4.1 In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for attaining the B-BBEE status level of contribution in accordance with the table below:

Q13.04.19				
BIDDER	WITNESS	EMPLOYER	WITNESS	

B-BBEE Status Level of Contributor	Number of points (90/10 system)	Number of points (80/20 system)
1	10	20
2	9	18
3	6	14
4	5	12
5	4	8
6	3	6
7	2	4
8	1	2
Non-compliant contributor	0	0

5. BID DECLARATION

5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:

6. B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1

6.1 B-BBEE Status Level of Contributor: . =(maximum of 10 or 20 points)

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.

7. SUB-CONTRACTING

7.1 Will any portion of the contract be sub-contracted?

(Tick applicable box)

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

7.1.1 If yes, indicate:

- i) What percentage of the contract will be subcontracted.....%
- ii) The name of the sub-contractor.....
- iii) The B-BBEE status level of the sub-contractor.....
- iv) Whether the sub-contractor is an EME or QSE

(Tick applicable box)

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
-----	--------------------------	----	--------------------------

v) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations,2017:

Designated Group: An EME or QSE which is at last 51% owned by:	EME	QSE
	√	√
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		
OR		
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]

Q13.04.19					
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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.

WITNESSES

1.

2.

.....
SIGNATURE(S) OF BIDDERS(S)

DATE:

ADDRESS

.....

.....

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

MBD 8

DECLARATION OF BIDDERS PAST SUPPLY CHAIN MANAGEMENT PRACTICES

1. This municipal bidding document must form part of all bids invited.
2. It serves as a declaration to be used by municipalities and municipal entities in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
3. The bid of any bidder may be rejected if that bidder, or any of its directors have:
 - 3.1 abused the municipality's / municipal entity's supply chain management system or committed any improper conduct in relation to such system;
 - 3.2 been convicted for fraud or corruption during the past five years;
 - 3.3 willfully neglected, reneged on or failed to comply with any government, municipal or other public sector contract during the past five years; or
 - 3.4 been listed in the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No. 12 of 2004).
4. **In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.**

Item	Question	Yes	No
4.1	<p>Is the bidder or any of its directors listed on the National Treasury's Database of Restricted Suppliers as companies or persons prohibited from doing business with the public sector?</p> <p>(Companies or persons who are listed on this database were informed in writing of this restriction by the accounting officer / authority of the institution that imposed the restriction after the <i>audi alteram partem</i> rule was applied).</p> <p>The Database of Restricted Suppliers now resides on the National Treasury's website www.treasury.gov.za and can be accessed by clicking on its link at the bottom of the home page</p>	Yes	No
4.1.1	If so, furnish particulars:		
4.2	<p>Is the bidder or any of its directors listed on the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No. 12 of 2004)?</p> <p>The Register for Tender Defaulters can be accessed on the National Treasury's website www.treasury.gov.za by clicking on its link at the bottom of the home page.</p>	Yes	No
4.2.1	If so, furnish particulars:		

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	BIDDER	WITNESS	EMPLOYER	WITNESS	

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.

NAME OF REPRESENTATIVE	AUTHORIZED SIGNATURE (UNDERSIGNED)
DATE	CAPACITY

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

MBD 9

CERTIFICATE OF INDEPENDENT BID DETERMINATION

- 1 This municipal bidding document (MBD) must form part of all bids¹ 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).² 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:

¹ Includes price quotations, advertised competitive bids, limited bids and proposals.

² 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.

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

MBD 9

CERTIFICATE OF INDEPENDENT BID DETERMINATION

I, the undersigned, in submitting the accompanying bid:

TENDER: Q13.04.19 : MEDICAL SURVEILLANCE (RED TICKET) in response to the invitation for the bid made by:

NAME OF MUNICIPALITY / MUNICIPAL ENTITY

do hereby make the following statements that I certify to be true and complete in every respect:

I certify, on behalf of:

NAME OF REPRESENTATIVE

that:

1. I have read and I understand the contents of this certificate.
2. I understand that the accompanying bid will be disqualified if this certificate is found not to be true and complete in every respect.
3. I am authorized by the bidder to sign this certificate, and to submit the accompanying bid, on behalf of the bidder.
4. Each person whose signature appears on the accompanying bid has been authorized by the bidder to determine the terms of, and to sign, the bid, on behalf of the bidder.
5. For the purposes of this certificate and the accompanying bid, I understand that the word "competitor" shall include any individual or organization, other than the bidder, whether or not affiliated with the bidder, who:
 - a. Has been requested to submit a bid in response to this bid invitation;
 - b. Could potentially submit a bid in response to this bid invitation, based on their qualifications, abilities or experience; and
 - c. Provides the same goods and services as the bidder and/or is in the same line of business as the bidder.

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

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 consortium³ 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.

³ **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.

NAME OF REPRESENTATIVE	AUTHORIZED SIGNATURE (UNDERSIGNED)
DATE	CAPACITY

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

SCHEDULE 2: COMPULSORY ENTERPRISE QUESTIONNAIRE

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 Provinces	<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"/>

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Name of sole proprietor, partner in a partnership or director, manager, principal shareholder or stakeholder	Name of institution, public office, board or organ of state and position held	Status of service (tick appropriate column)	
		Current	Within last 12 months

Section 6: Records of spouses, children and parents in the service of the state

Indicate by making the relevant boxes with a cross, if any spouses, child or parent of a 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 been 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 legislature	<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"/>

Name of spouse, child or parent	Name of institution, public office, board or organ of state and position held	Status of service (tick appropriate column)	
		Current	Within last 12 months

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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 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

NAME OF REPRESENTATIVE	AUTHORIZED SIGNATURE (UNDERSIGNED)
CAPACITY	DATE

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

SCHEDULE 3: CLEARANCE CERTIFICATE FOR WATER & LIGHTS

Section 45(1)(d) of Municipal Supply Chain Regulations requires that the municipality must reject a bidder whose municipal rates and taxes are in arrears for more than three months.

The purpose of this schedule is to obtain proof that municipal services, rates and taxes of the service provider are not in arrears for more than three months, with the relevant municipality / landlord in the municipal area where the service provider conduct his / her business.

Each bidder must complete the below checklist. Important: if you fail to complete this form, the bid will be non-responsive. (Please tick with **X** where appropriate):

QUESTIONS		YES	NO
1.	Is your municipal rates and taxes account up to date / current (not in arrears for more than three months)?		
2.	If yes, provide the following details:		
2.1	▪ Municipality name		
2.2	▪ Municipal account number		
3.	If yes, please attached proof in the form of the original or certified copy of the bidder's municipal rates and taxes account not older than 3 months		
4.	Does the bidder lease* / rent the property where the business is situated?		
5	If yes, provide the following details:		
5.1	▪ Landlord name		
5.2	▪ Address property is situated		
5.3	▪ Contact number of landlord		
6.	Please attach the copy of the lease agreement signed by the landlord / lessor and the tenant / lessee as proof		
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			

NOTICE OF SUPPLY CHAIN MANAGEMENT

APPLICATION FOR REGISTRATION ON CENTRAL SUPPLIER DATABASE

Section 14(1)(a) of the municipal supply chain management policy states that the municipality may only transact with vendors registered on the National Treasury Central Supplier Database.”

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	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">▪ CSD registration number</td> <td>MAAA</td> </tr> </table>	▪ CSD registration number	MAAA		
▪ CSD registration number	MAAA				
2.2	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">▪ Unique CSD number</td> <td></td> </tr> </table>	▪ Unique CSD number			
▪ 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, www.csd.gov.za , 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					

SCHEDULE 4: EVALUATION SCHEDULE : TENDERER'S EXPERIENCE

The experience of the tenderer in similar projects or nature or similar areas and conditions in relation to the scope of work will be evaluated here.

Briefly describe company or individual experience in regard to the above scope of work and attach this to this schedule.

NB: Proof of previous work history must be attached for e.g. purchase order, appointment or reference letter etc.

A summary of the relevant work experience in line with the scope of work should be indicated in the table below: (Any additional information regarding previous work experience can be attached to this schedule).

Employer, contact person and telephone number, where available	Description of work (service)	Value of work (i.e. the service provided) inclusive of VAT (Rand)	Date completed

The scoring of the tenderer's experience will be as follows:

Non-responsive (score 0)	Tenderer has no experience or no information has been provided
Poor (max score 5)	Tenderer has previous work experience but not relevant to scope of work (One project).
Satisfactory (max score 10)	Tenderer has limited relevant experience and has not dealt with the critical issues specific to the assignment (2 - 3 projects).
Good (max score 30)	Tenderer has relevant experience in relation to the project and has worked previously under similar conditions and circumstances (4 – 5 projects)
Very good (score 40)	Tenderer has outstanding work experience in projects of a similar nature (6+ projects).

NB: Only bidders who score a minimum of 60 Points will be further evaluated on price and BBBEE.

I the undersigned, who warrants that he / she is duly authorized to do so on behalf of the enterprise, confirms that the contents of this schedule are within my personal knowledge and are to the best of my belief both true and correct.

SIGNED AT	AUTHORIZED SIGNATURE (UNDERSIGNED)
DATE	NAME AND CAPACITY

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

SCHEDULE 5 PROPOSED ORGANIZATION, STAFFING & KEY STAFF EXPERIENCE

The tenderer should indicate the company high level organizational structure and composition of their team responsible for this project. The key staff members involved with their main disciplines and or roles of responsibilities (job descriptions) must be attached to this page as well as the proposed technical and support staff allocated to work on the project to successfully implement this tender.

Experience of the key staff (assigned personnel) in relation to the scope of work will be evaluated from three different points of view:

- a) General experience (total duration of professional activity), level of education and training and positions held of each key staff member / expert member.
- b) The education, training and experience of the key staff members / experts, in the specific sector, field, subject, etc. which is directly linked to the scope of work.
- c) The key staff members' / experts' knowledge of issues which the tenderer considers pertinent to the project e.g. local conditions, affected communities, legislation, techniques etc.

In the case of an association / joint venture / consortium, it should, indicate how the duties and responsibilities are to be shared. The organization, staffing and key staff should be based on the implementation of one area as per project scope. Tenderers should provide organization structure for complete scope of work which includes garden waste removal and street cleaning.

The scoring of the proposed organization and staffing will be as follows:

Non-responsive (score 0)	No information has been provided
Poor (max score 05)	The organization chart is incomplete, the staffing plan is weak in relation to the project, or the staffing schedule is inconsistent with the timing of the most important deliverables. There is no clarity in allocation of tasks and responsibilities and lack of experience.
Satisfactory (max score 15)	The organizational chart is complete, the technical level and composition of the staffing arrangements are adequate and staffing is consistent with both timing and deliverables. Certificate and experience in related field (2 years)
Good (max score 40)	The organizational chart is complete, staff are well balanced i.e. they show good coordination, complimentary skills, clear duties and responsibilities, and sufficient number of technical experts relevant to the project. Key staff members of the project team have worked together before and have good experience to implement the project. Diploma/Degree in related field (3-5 years)
Very good (max score 50)	Besides meeting the "good" rating, the proposed team is well integrated and several members have extensive work experience relevant to the scope of work, technical staff has suitable qualifications, and team members have extensively worked together in the past. Diploma/Degree in related field (> 5 years)

NB: Only bidders who score a minimum of 60 Points will be further evaluated on price and BBEE.

The undersigned, who warrants that he / she is duly authorized to do so on behalf of the enterprise, confirms that the contents of this schedule are within my personal knowledge and are to the best of my belief both true and correct.	
SIGNED AT	AUTHORIZED SIGNATURE (UNDERSIGNED)
DATE	NAME AND CAPACITY

Q13.04.19					
	BIDDER	WITNESS	EMPLOYER	WITNESS	

SCHEDULE 6: CAPACITY TO EXECUTE & IMPLEMENT THE TENDER (PHYSICAL RESOURCES) EVALUATION

The tenderer needs to indicate the lists of equipment that they presently own or lease or will acquire or hire to successfully implement this contract if the tender. The physical resources should include a list of the main requirements as well as the back-up equipment.

Proof of ownership or lease, or quotation to acquire physical resources for main and back-up equipment must be attached to the document. Failure to attach may result in no points allocation. All physical resources indicated in the below schedule or attached must be in good condition.

Evaluation points will be awarded in accordance with physical resources capacity, age and ownership status.

List of main physical resources and equipment to be used on project:

Quantity	Description, size, capacity, manufacturing, etc.	Year / Age of equipment	Registration Number	Owned/ Hired/ Acquired/ Company	Roadworthy/ Condition
Example:					
1	4 ton truck(brand name)	2005, 5 years	Xxx123mp	Owned	Yes, good with service record
2	3m trailer	2000, 10 years	Xxx123mp	Leased from Company X for period of tender.	Yes, Fair
1	COMPUTER/LAPTOP				
2	PROJECTOR				
3	TEST EQUIPMENT				

NB: Proof of ownership or lease, or quotation to acquire physical resources for main physical resources, (vehicle & equipment) must be attached to the document.

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NB: Only bidders who score a minimum of 60 POINTS will be further evaluated on price and BBEE.

Non-responsive (score 0)	No information has been provided
Poor (max score 02)	There is inadequate information submitted regarding availability of equipment. The contractor will not be in a position to meet the requirements of the contract with the available equipment / supplied equipment does not meet the minimum requirements prescribed above. Tenderer have no access or limited access to backup equipment. Most of the physical resources are hired with no ownership.
Satisfactory (max score 05)	The equipment provided meets the required criteria and is adequate to meet the requirements of the contract age of vehicles and equipment is less than 10 years. Tenderer indicate access to backup equipment to be leased, hired. Contractor proof sufficient access to equipment to be leased or hired.
Good (max score 08)	Besides meeting the “satisfactory” rating, the tenderer is in the position to provide more equipment than is required by the contract. The tender have owned equipment which can be used as backups. The contractor has a good mix of equipment to be either leased or owned.
Very good (max score 10)	Besides meeting the “good” rating, the tenderer is in a position to provide additional and advanced equipment which will enhance the execution of the contract. The tenderer has advanced owned physical resources (vehicles and backup equipment.) more than one. All resources are owned.

The undersigned, who warrants that he / she is duly authorized to do so on behalf of the enterprise, confirms that the contents of this schedule are within my personal knowledge and are to the best of my belief both true and correct.

SIGNED AT	AUTHORIZED SIGNATURE (UNDERSIGNED)
DATE	NAME AND CAPACITY

Q13.04.19				
	BIDDER	WITNESS	EMPLOYER	WITNESS

MBD 7.2**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 **Q13.04.19** 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.

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

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	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.

SIGNED AT	AUTHORIZED SIGNATURE (UNDERSIGNED)
DATE	NAME AND CAPACITY
WITNESSES: (SIGNATURE)	OFFICIAL STAMP
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:	Tresur T. Mathabathe, Safety Officer
The address for receipt of communications is:	Steve Tshwete Local Municipality Civic Centre P.O. Box 14 Middelburg 1050
Telephone:	013 249 7189
Facsimile:	013 243 2550
Email:	tresurm@stlm.gov.za
The project is:	MEDICAL SURVEILLANCE (RED TICKET)

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

MEDICAL SURVEILLANCE (RED TICKET) SPECIFICATION

1. Background information

Quotations are hereby invited from potential service providers to conduct Medical Surveillance for Steve Tshwete Local Municipality's employees. They are approximately 300 employees identified for this service.

2. Scope of Work of the service required

The following will be expected from the service provider:

- a) Perform medical examination which shall comprise of the following :
 - Lung Function Test
 - Urine Test
 - Hearing Test
 - Eye Test
 - Physical body Examination
 - Chest X-Ray
- b) Submit full report on evaluation of each and every employee's medical and occupational history and identify physical ailments.
- c) Make necessary recommendations to Steve Tshwete Local Municipality regarding control of exposure, and remedial/preventive measure based on the outcome of the evaluation and assessment.
- d) Make recommendations regarding personal protective equipment and facilities where the exposure, and remedial/preventive measures based on the outcome of the evaluations and assessments.

3. Information to be provided with the bid

- a) All cost for the service to be included in the quotation.
- b) Suppliers are expected to submit their business profile, directorship, etc.
- c) Service provider must be a reputable and accredited service provider in the field of occupational health and be able to present a proof of previous (Contactable References), experience in this regard and qualified to perform such tests. (Medical Qualification)

4. Required deliverables

Medical Examination for 300 Steve Tshwete Local Municipality Employees, as specified.

5. What is expected from the service provider

- a. Maintain confidentiality of employee's assessment, test and evaluation.
- b. The service provider to utilize own equipment's (Test Equipment's, etc.)
- c. Suppliers are expected to submit their business profile, directorship, etc.
- d. Service provider must be a reputable and accredited service provider in the field of occupational health and be able to present a proof of previous (Contactable References), experience in this regard and qualified to perform such tests. (Medical Qualification).

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6. Information to be obtain by service provider

Red Ticket: Medical Assessment feedback
Medical examination Report
Referral of employees with critical condition to the Doctor or Hospital.

7. Information to be obtained by the Municipality

- Venue for Medical Examination
- Written communication to all departs to notify employees about date, time and venue.

8. Pricing Guidelines

Price per delegate

9. PAYMENTS

(Indicate payment requirement for example;

Payment will be in accordance with the tendered pricing schedule and the Key Performance Indicators indicated in the Terms of Reference. All prices should be inclusive of VAT. A valid tax invoice must be submitted with all mandatory information and reporting as indicated in the scope of work.

Payment will be made within 30 working days from receipt of invoice by the finance department.

10. ELIGIBILITY CRITERIA

(Indicate eligibility criteria of tender base on specifications requirements for example;

Only those tenderers who satisfy the following eligibility criteria are eligible to submit tenders:

- Tenderer receives the minimum required points for functionality.
- Tenderer has the managerial capacity, reliability and experience regarding the nature of the tender.
- The tenderer has in his or her possession an original valid tax clearance certificate issued by the South African Revenue Services.
- The tenderer is not in arrears for more than 3 months with municipal rates and taxes and municipal service charges;
- The tenderer or any of its directors is not listed on the Register of Tender Defaulters in terms of the Prevention and Combating of Corrupt Activities Act of 2004 as a person prohibited from doing business with the public sector; and

11. JOINT VENTURES AND CONSORTIUMS

No joint ventures or consortia's or any sub-contracting will be accepted on this tender or will be accepted. Indicate if acceptable. Following documents have to be attached:

- Signed Joint Venture Agreement
- Combined Joint Venture BBBEE certificate
- Summary report of Central Supplier Database of JV

12. PERIOD OF TENDER

13. SERVICE LEVEL AGREEMENT

(A service level agreement will be entered into on appointment of the contract).

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14. ACCEPTANCE OF OFFER

(Indicate any conditions to the acceptance of the offer, for example:

The municipality reserves the right not to award the tender or any part of the tender subject to the availability of budgetary funds.

15. EVALUATION

(Indicate how the tenders will be evaluated for example:

Tenders will be evaluated on functionality first. Only tenders who receives the minimum eligible points will be further evaluated on price and preference points

16. VALIDITY PERIOD

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

PRICING GUIDELINES

Price should include accommodation and travelling costs of the facilitator, facilitation and assessment costs.

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.

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	BIDDER	WITNESS	EMPLOYER	WITNESS	