



MOGALAKWENA LOCAL MUNICIPALITY

FORMAL WRITTEN PRICE QUOTATION

| | | | |
|---|------------------|--|--------------|
| NOTICE NUMBER: | | 260/2024 | |
| QUOTATION NUMBER: | | Q60-2024/2025 | |
| DESCRIPTION: | | Supply and Delivery of Social Relief Items | |
| CLOSING DATE: | 22 November 2024 | CLOSING TIME: | 12H00 |
| QUOTATIONS MUST BE DEPOSITED IN THE QUOTATION BOX SITUATED AT: 54 RETIEF STREET MOKOPANE 0601 | | NB: 1. All quotations must be submitted on the official forms – (not to be retyped) 2. Quotations must be completed in black and white 3. No quotations will be considered from persons in the service of the state | |
| Name of Quotationder: | | | |
| Central Supplier Database (CSD) Number (Compulsory): | | | |
| Central Supplier Database (CSD) Unique Reference Number | | | |
| Tax Compliance Status (TCS) Verification Pin: | | | |
| Contact Details of Quotationder | | Name: _____ Telephone: _____ Cell Phone: _____ E-mail: _____ | |
| Total Quotation Price: | | | |

CONTENTS

| PART 1 | | |
|---------------|---|-------------|
| NO. | ITEM | PAGE |
| 1. | Formal Written Price Quotation Notice and Invitation to Quotation | 3 |
| 2. | Notice to Service providers | 4 |
| 3. | Municipal Quotationding Document 4 – Declaration of Interest | 6 |
| 4. | Municipal Quotationding Document 6.1 - Preference Points Claim Form in Terms of the Preferential Procurement Regulations 2022 | 9 |
| 5. | Municipal Quotationding Document 8 – Declaration of Quotationder's Past Supply Chain Management Practices | 14 |
| 6. | Municipal Quotationding Document 9 – Certificate of Independent Quotation Determination | 16 |
| 7. | Declaration of Municipal Accounts | 20 |
| 8. | Signatory of Authority | 23 |
| 9. | Specifications / Terms of Reference/Pricing Schedule/Bill of Quantities | 26 |
| 10. | Form of Offer and Acceptance | 29 |
| 11. | Declaration by Quotationder | 31 |

1. FORMAL WRITTEN PRICE QUOTATION NOTICE AND INVITATION TO QUOTATION



MOGALAKWENA LOCAL MUNICIPALITY REQUEST FOR QUOTATION NOTICE AND INVITATION TO QUOTATION

| | | | | |
|--------------------------------|--|------------------|------------|-------|
| ADVERTISED IN: | MUNICIPAL NOTICE BOARD, MUNICIPAL WEBSITE | | | |
| QUOTATION NUMBER: | Q60-2024/2025 | NOTICE NO: | 260 / 2024 | |
| PUBLISHED DATE: | 15 November 2024 | DEPARTMENT | FINANCE | |
| Request for Written Quotation: | Supply and Delivery of Social Relief Items | | | |
| CLOSING TIME AND DATE: | DATE | 22 November 2024 | TIME | 12H00 |
| | QUOTATIONS MUST BE DEPOSITED IN THE QUOTATION BOX SITUATED AT: MOGALAKWENA LOCAL MUNICIPALITY 54 RETIEF STREET MOKOPANE 0601 | | | |

NOTICE TO QUOTATIONDERDS

1. No quotation/quotation shall be considered from persons in the service of state (MBD 4)
2. Quotations are to be completed in accordance with the conditions and quotations rules contained in the quotation document.
3. Quotations may only be submitted on the quotation documentation issued by the Municipality.
4. Electronic (e-mailed or faxed) quotations/quotations are not accepted.
5. Quotations are subject to the Mogalakwena Local Municipality Supply Chain Management Policy.
6. Copy of the statement of municipal rates and taxes for the company or of its directors (not in arrears for more than three (3) months before the closing date), if renting a lease agreement and owner's proof of municipal rates must be submitted (not in arrears for more than three (3) months before the closing date). If the quotationder is operating where municipal rates are not applicable, a proof of residence from the traditional authority must be submitted (not older than three (3) months before the date).
7. The successful provider will be the one scoring the highest points.
8. The lowest or any quotation shall not necessarily be accepted, and the Municipality reserves the right to accept any part of the quotation.
9. All service providers must submit valid, certified copies of their BEE certificate from an accredited BEE verification agency with their submission of quotation.

| | | | | | |
|---|--|--|--|-----------------|---------|
| QUOTATIONS SHALL BE EVALUATED IN TERMS OF THE PREFERENTIAL PROCUREMENT POLICY OF MOGALAKWENA LOCAL MUNICIPALITY | | All quotations received will be evaluated on the 80/20-point scoring basis. The 80 points will be for Price and 20 points are for specific goals | | | |
| PREFERENTIAL PROCUREMENT POINT SYSTEM APPLICABLE | | 80/20 | LOCAL CONTENT REQUIREMENT | N/A | |
| CIDB REGISTRATION REQUIRED | | NOT APPLICABLE | | VALIDITY PERIOD | 60 Days |
| SITE MEETING/INFORMATION SESSION | | NOT APPLICABLE | | | |
| ANY ENQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO: | | ANY ENQUIRIES REGARDING THE QUOTATIONDING PROCEDURE MAY BE DIRECTED TO: | | | |
| SECTION: | Finance | SECTION: | Supply Chain Management | | |
| CONTACT PERSON: | Mr T Ombe | CONTACT PERSON: | Mr. D. Nkhwashu | | |
| TEL: | 015 491 9662 | TEL: | 015 491 9662/9649 | | |
| EMAIL: | monakedir@mogalakwena.gov.za | EMAIL: | supplychain@mogalakwena.gov.za | | |

PART A INVITATION TO QUOTATION

| | | | | | |
|--|--|----------------------|--|--|-------|
| YOU ARE HEREBY INVITED TO QUOTATION FOR REQUIREMENTS OF THE MOGALAKWENA LOCAL MUNICIPALITY | | | | | |
| NOTICE NUMBER: | 260/2024 | CLOSING DATE: | 22 November 2024 | CLOSING TIME: | 12H00 |
| DESCRIPTION | Supply and Delivery of Social Relief Items | | | | |
| THE SUCCESSFUL QUOTATIONDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7). | | | | | |
| <p>QUOTATION RESPONSES MUST BE DEPOSITED IN A QUOTATION BOX SITUATED AT:</p> <p>MOGALAKWENA LOCAL MUNICIPALITY 54 RETIEF STREET MOKOPANE 0601</p> | | | | | |
| QUOTATIONDER'S INFORMATION | | | | | |
| NAME OF QUOTATIONDER | | | | | |
| POSTAL ADDRESS | | | | | |
| PHYSICAL ADDRESS | | | | | |
| TELEPHONE NUMBER | | | | | |
| CELL PHONE NUMBER | | | | | |
| E-MAIL ADDRESS | | | | | |
| VAT REGISTRATION NUMBER | | | | | |
| TAX COMPLIANCE STATUS | TCS PIN | | CSD NO, | | |
| TOTAL NUMBER OF ITEMS OFFERED | | | TOTAL PRICE | | |
| SIGNATURE OF QUOTATIONDER | | | DATE | | |
| ANY ENQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO: | | | ANY ENQUIRIES REGARDING THE QUOTATIONDERING PROCEDURE MAY BE DIRECTED TO: | | |
| SECTION: | Finance | | SECTION: | Supply Chain Management | |
| CONTACT PERSON: | Mr T Ombe | | CONTACT PERSON: | Mr D Nkhwashu | |
| TEL: | 015 491 9662 | | TEL: | 015 491 9662/9649 | |
| EMAIL: | monakedir@mogalakwena.gov.za | | EMAIL: | supplychain@mogalakwena.gov.za | |

PART B TERMS AND CONDITIONS FOR QUOTATIONDING

| | | | | | | | | | | |
|--|--|--|--|--|---|--|--|--|--|--|
| 1. QUOTATION SUBMISSION: | | | | | | | | | | |
| <p>1.1. QUOTATIONS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE QUOTATIONS WILL NOT BE ACCEPTED FOR CONSIDERATION.</p> <p>1.2. ALL QUOTATIONS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED (NOT TO BE RE-TYPED)</p> <p>1.3. THIS QUOTATION IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2022, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.</p> | | | | | | | | | | |
| 2. TAX COMPLIANCE REQUIREMENTS | | | | | | | | | | |
| <p>2.1 SERVICE PROVIDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.</p> <p>2.2 SERVICE PROVIDERS 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.</p> <p>2.3 APPLICATION FOR THE TAX COMPLIANCE STATUS (TCS) CERTIFICATE OR PIN MAY ALSO BE MADE VIA E-FILING. TO USE THIS PROVISION, TAXPAYERS WILL NEED TO REGISTER WITH SARS AS E-FILERS THROUGH THE WEBSITE WWW.SARS.GOV.ZA.</p> <p>2.4 FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B:</p> <p>2.5 SERVICE PROVIDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE QUOTATION.</p> <p>2.6 IN QUOTATIONS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.</p> <p>2.7 WHERE NO TCS IS AVAILABLE BUT THE QUOTATIONDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.</p> | | | | | | | | | | |
| 3. QUESTIONNAIRE TO QUOTATIONDING FOREIGN SUPPLIERS | | | | | | | | | | |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 70%;">3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?</td> <td style="width: 30%; text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA?</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> <tr> <td>3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?</td> <td style="text-align: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</td> </tr> </table> <p>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.</p> | 3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)? | <input type="checkbox"/> YES <input type="checkbox"/> NO | 3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA? | <input type="checkbox"/> YES <input type="checkbox"/> NO | 3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA? | <input type="checkbox"/> YES <input type="checkbox"/> NO | 3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA? | <input type="checkbox"/> YES <input type="checkbox"/> NO | 3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION? | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)? | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | | |
| 3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA? | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | | |
| 3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA? | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | | |
| 3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA? | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | | |
| 3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION? | <input type="checkbox"/> YES <input type="checkbox"/> NO | | | | | | | | | |

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

SIGNATURE OF QUOTATIONDER:

CAPACITY UNDER WHICH THIS QUOTATION IS SIGNED:

DATE:

2. NOTICE TO SERVICE PROVIDERS

A Notice Number complying with the peremptory requirements stated hereunder shall be regarded as not being an 'acceptable quotation¹', and as such will be rejected.

A quotation will be rejected:

1. If a **Valid Tax Pin** or copy thereof has not been submitted with the quotation document on the closing date of the quotation (An expired tax pin submitted at closure of the quotation will not be considered and/or accepted). In quotations where consortia and joint ventures are involved, each party must submit a separate Tax Pin Certificate.

Copies of the TCC 001, "Application for a Tax Pin Certificate" form are available from any SARS branch office or on www.sars.gov.za. Applications for the Tax Pin Certificate may also be made via e-Filing. To use this provision, taxpayers must register with SARS as e-Filers through the website www.sars.gov.za.

2. If any pages of this quotation document have been removed, and have therefore not been submitted, or a copy of the original quotation document has been submitted.
3. In the event of failure to complete and sign the schedule of quantities as required, i.e., only lump sums are provided.
4. In the event of there being scratching out, writing over, or painting out rates or information, affecting the evaluation of the quotation, without initialing next to the amended rates or information.
5. If the quotation has not been properly signed by a person having authority to do so. (refer to the declaration form for authority of the signatory in the case of representative)
6. If the quotationer attempts to influence or has influenced the evaluation and/or awarding of the contract.
7. If the quotation has been submitted either in the wrong box or after the relevant closing date and time.
8. If a quotationer who during the past five years has failed to perform satisfactorily on a previous contract with the municipality, municipal entity, or any other organ of state after a written notice was given to that quotationer that their performance was unsatisfactory.
9. No award may be given to a person –
 - a) who is in the service of state; or
 - b) if that person is not a natural person, of which any director, manager, shareholder or stakeholder, is a person in the service of state; or
 - c) who is an advisor or consultant contracted with the Municipality in respect of contract that would cause a conflict of interest.
10. If the quotationer or any of its directors is listed on the Register of Quotation Defaulters in terms of the Prevention and Combating of Corrupt Activities Act, 12 of 2004, as a person prohibited from doing business with public sector.

11. If the quotationder has abused the Mogalakwena Local Municipality's supply chain management system and action was taken in terms of regulation 38 of the MFMA Municipal Supply Chain Management Regulations.
12. If the price schedule is not completed in full, i.e., rates; unit prices; VAT (where applicable); and totals.
13. If more than one (1) company quotes and the director/s is the same person/s and the companies fail to disclose this in the MBD 4 form, the quotations will be rejected due to anti-competitive behaviour.
14. If any of the following has not been fully completed and signed –
 - a) MBD 1 Invitation to Quotation
 - b) MBD 4 Declaration of Interest
 - c) MBD 6.1 Preference Points Claim
 - d) MBD 8 Declaration of Quotationder's Past Supply Chain Management Practices
 - e) MBD 9 Certificate of Independent Quotation Determination

¹ "Acceptable quotation" means any quotation which, in all respects, complies with the conditions of quotation and specifications as set out in the quotation documents

3. MBD4: DECLARATION OF INTEREST

1. No quotation 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 quotation. In view of possible allegations of favoritism, should the resulting quotation, or part thereof, be awarded to persons connected with or related to persons in service of the state, it is required that the quotationder or their authorized 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 quotation.

| | | |
|------------|--|--|
| 3.1 | Full Name of quotationder or his or he representative | |
| 3.2 | Identity Number | |
| 3.3 | Position occupied in the Company (director, trustee, shareholder) | |
| 3.4 | Company Registration Number | |
| 3.5 | Tax Reference Number | |
| 3.6 | Vat Registration Number | |

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

| | | | |
|--------|---|-----|----|
| 3.8 | Are you presently in the service of the state? | Yes | No |
| 3.8.1 | If yes, furnish particulars | | |
| | | | |
| 3.9 | Have you been in the service of the state for the past twelve months? | Yes | No |
| 3.9.1 | If yes, furnish particulars | | |
| | | | |
| 3.10 | Do you have any relations (family, friend, other) with persons in the service of the state and who may be involved with the evaluation and/or adjudication of this quotation? | Yes | No |
| 3.10.1 | If yes, furnish particulars | | |
| | | | |

| | | | |
|--------|--|-----|----|
| | | | |
| 3.11 | Do you have any relations (family, friend, other) with persons in the service of the state and who may be involved with the evaluation and/or adjudication of this quotation? | Yes | No |
| 3.11.1 | If yes, furnish particulars | | |
| | | | |
| 3.12 | Are any of the company's directors, trustees, managers, principle shareholders or stakeholders in service of the state? | Yes | No |
| 3.12.1 | If yes, furnish particulars | | |
| | | | |
| 3.13 | Are any spouse, child or parent of the company's directors, managers, principal shareholders or stakeholders in the service of state? | Yes | No |
| 3.13.1 | If yes, furnish particulars | | |
| | | | |
| 3.14 | Do you or any of the directors, trustees, managers, principal shareholders or stakeholders of this company have interest in any other related companies or businesses whether or not they are budding for this contract. | Yes | No |
| 3.14.1 | If yes, furnish particulars | | |
| | | | |

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

| Full Name | Identity Number | State Employee Number |
|------------------|------------------------|------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

| Name of Quotationder | | | |
|-----------------------------|--|---------------------|--|
| Signature | | Name (Print) | |
| Capacity | | Date | |

¹MSCM Regulations: "in the service of the state" means to be –

- (a) a member of –
 - (i) any municipal council;
 - (ii) any provincial legislature; or
 - (iii) the national Assembly or the national Council of provinces;
- (b) a member of the board of directors of any municipal entity;
- (c) an official of any municipality or municipal entity;
- (d) an employee of any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No.1 of 1999);
- (e) a member of the accounting authority of any national or provincial public entity; or
- (f) an employee of Parliament or a provincial legislature.

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

4. MBD 6.1: PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022

This preference points claim form must form part of all quotations estimated to exceed R30 000. It contains general information and serves as a claim form for preferential points for specific goals as prescribed in the PPPFA Preferential Procurement Regulations, 2022, the Broad-Based Black Economic Empowerment Act, and the promotion of local economic development.

1. GENERAL CONDITIONS

1.1. The following preference point systems are applicable to all quotations:

- 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).

The value of this quotation is estimated to not exceed R50 000 000 (all applicable taxes included) and therefore 80/20 preference point system shall be applicable or

1.2. Points shall be awarded for:

- a) Price;
- b) B-BBEE Status Level of Contributor (Specific Goal 1); and
- c) Locality of quotationder (Specific Goal 2)

1.3. The formulae and methodologies for calculating price and specific goal points as set out in the 2022 PPPFA Regulations 4 to 7 of PPPFA Preferential Procurement Regulations, 2022, shall apply.

1.4. The maximum points for this quotation are allocated as follows:

| | | POINTS | |
|--|-----|---------------|------------|
| 1. Price | | 80 | 90 |
| 2. Specific Contract Participation Goals | | 20 | 10 |
| 2.1 Historically Disadvantaged Individuals (HDI) | | 16 | 8 |
| 2.1.1 Who had no franchise in national elections before the 1983 and 1993 Constitution | 8/4 | | |
| 2.1.2 Who is female | 4/1 | | |
| 2.1.3 Who has a disability and/or Youth | 2/1 | | |
| 2.1.4 Who is Youth | 2/1 | | |
| 2.2 Other specific goals (Local Economic Development goals of the RDP) | | | |
| 2.2.1 Business operations within the Waterberg District | 4/2 | | |
| Total points for Price and HDI principles must not exceed | | 100 | 100 |

To claim specific goals listed under 2.2 above the quotation must submit a municipal account statement in the name of the company or individual in the case of the sole proprietor.

1.5. Failure on the part of a quotation to submit proof of claim together with the quotation will be interpreted to mean that the preference points are not claimed.

- 1.6. The purchaser or organ of state reserves the right to require of a quotation or tenderer, either before a quotation is adjudicated or at any time subsequently, to substantiate any claim regarding preferences, in any manner required by the purchaser.

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) "quotation" 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 quotationing 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) "Functionality" means the ability of a tenderer to provide goods or services in accordance with specifications as set out in the tender documents.
- f) "price" includes all applicable taxes less all unconditional discounts.
- g) "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;
- h) "Rand value" means the total estimated value of a contract in Rand, calculated at the time of quotationinvitation, and includes all applicable taxes;
- i) "Specific goals" means specific goals as contemplated in Part 05 of Mogalakwena Local Municipality's Supply Chain Management Policy.

3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

3.1 POINTS AWARDED FOR PRICE – THE 80/20 OR 90/10 PREFERENCE POINT SYSTEM

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

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

Where:

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

3.2 FORMULAE FOR DISPOSAL OR LEASING OF STATE ASSETS AND INCOME GENERATING

PROCUREMENT POINTS AWARDED FOR PRICE

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

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

Where:

- P_s = Points scored for price of quotation under consideration
- P_t = Price of quotation under consideration
- P_{max} = Price value of highest acceptable quotation

4. POINTS AWARDED FOR SPECIFIC GOALS

- 4.1 In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential Procurement Regulations, preference points must be awarded for specific goals stated in the quotation. For the purposes of this quotation, the quotationder will be allocated points based on the goals stated in Table 1 below as may be supported by proof/documentation stated in the conditions of this quotation.
- 4.2 In cases where organs of state intend to use Regulation 3(2) of the PPPFA Preferential Procurement Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the quotation documents, stipulate that in case of:
 - a) An invitation for quotation for income-generating contracts, that either 80/20 or 90/10 preference point system will apply and the highest acceptable quotation will be used to determine the applicable preference point system; or
 - b) Any other invitation for quotation, that either 80/20 or 90/10 preference point system will apply and that the lowest acceptable quotation will be used to determine the applicable preference point system.

The organ of state must indicate the points allocated for specific goals for both 80/20 and 90/10 preference point system.

Table 1: Specific goals for the quotation and points claimed are indicated per the table below.

(Note to organs of state: Where either the 90/10 or 80/20 preference point system is applicable, corresponding points must also be indicated as such. Note to service providers: The quotationder must indicate how they claim points for each preference point system.)

| The specific goals allocated in terms of this quotation | Number of points allocated (80/20) (To be completed by the organ of state) | Number of points allocated (90/10) (To be completed by the organ of state) | Number of points claimed (80/20) (To be completed by the quotationder) | Number of points allocated (90/10) (To be completed by the quotationder) |
|---|--|--|--|--|
| | | | | |

| | | | | |
|---|-----------|-----------|--|--|
| Category 1: Ownership – Historically Disadvantaged Individuals (HDI) by unfair discrimination (No franchise in national elections before 1983 and 1993 Constitution) | 16 | 8 | | |
| • Race | 6 | 3 | | |
| • Female | 3 | 1 | | |
| • Youth | 4 | 2 | | |
| • Disability | 3 | 2 | | |
| Category 2: Reconstruction and Development Programme (Government Gazette: 16085 of 23 November 1994) | 4 | 2 | | |
| • Promotion of Local Enterprises (within the Waterberg District) | 4 | 2 | | |
| TOTAL | 20 | 10 | | |

Table 1

DECLARATION WITH REGARD TO COMPANY/FIRM

4.3 Name of company/firm _____

4.4 Company registration number _____

4.5 Type of Company/Firm

- Partnership/Joint Venture/Consortium
- Sole Propriety
- Close Corporation
- Public Company
- Private Company
- State Owned Company

4.6 I, the undersigned, who is duly authorized to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals of this quotation, qualifies the company/firm for the preference(s) shown and I acknowledge that:

a) The information furnished is true and accurate;

- b) The preference points claimed are in accordance with the general conditions as indicated in paragraph 1 of this form;
- c) In the event of a contract being awarded as a result of points claimed as shown in the paragraph 1.4 and 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;
- d) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state, in addition to any other remedy it may have:
 - i. disqualify the person from the quotationing processes;
 - ii. recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
 - iii. cancel the contract and claim any damages which it has suffered as a result of having to make less favorable arrangements due to such cancellation;
 - iv. recommend that the quotationder or contractor, its shareholders and directors, or only the shareholders and directors who acted in a fraudulent manner, be restricted from obtaining business from any organ of state for a period not exceeding 10 years after the *audi alteram partem* rule has been applied; and
 - v. forward the matter for criminal prosecution, if deemed necessary.

.....
SIGNATURE(S) OF QUOTATIONDER(S)

SURNAME AND NAME:

DATE:

ADDRESS:

.....

.....

5. MBD 8: DECLARATION OF QUOTATIONDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES

1. This Municipal Quotationding Document must form part of the of all invited quotations
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 to combat the abuse of the supply chain management system.
3. **The quotation of any quotationder may be rejected if the quotationder or any of its directors have:**
 - a) Abused the Municipality's Supply Chain Management System or committed any improper conduct in relation to such system;
 - b) Been convicted for fraud or corruption during the past five years;
 - c) Wilfully neglected, reneged or failed to comply with any government, municipal, or public sector contract during the past five years; or
 - d) Been listed in the Register for Quotation 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 quotation**

| ITEM | QUESTION | YES | NO |
|-------|--|-----|----|
| 4.1 | <p>Is the quotationder or any of its directors listed on the National Treasury's database as a company or person prohibited from doing business with the state?</p> <p>(Companies or persons who are listed on this database were informed in writing of their 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 can be accessed on the National Treasury's website www.treasury.gov.za.</p> | YES | NO |
| 4.1.1 | If so, furnish particulars: | | |
| 4.2 | <p>Is the quotationder or any of its directors listed on the National Treasury's Register for Quotation Defaulters in terms of section 29 of the Prevention and Combating of Corruption Activities Act, No. 12 of 2004?</p> <p>(The Register for Quotation Defaulters can be accessed on the National Treasury's website www.treasury.gov.za.)</p> | YES | NO |
| 4.2.1 | If so, furnish particulars: | | |

| | | | |
|-------|---|-----|----|
| 4.3 | Was the quotationder 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 quotationder or any of its directors owe any municipal rates and taxes or municipal charges to the Municipality/Municipal entity, or 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 quotationder and 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 contract? | YES | NO |
| 4.5.1 | If so, furnish particulars: | | |

CERTIFICATION

I, the undersigned (full name), _____

certify that the information furnished on this declaration form is 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 Quotationder | | | |
| Signature | | Name (Print) | |
| Capacity | | Date | |

6. MBD 9: CERTIFICATE OF INDEPENDENT QUOTATION DETERMINATION

1. This Municipal Quotationing Document must form part of all quotations¹ 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 horizontal relationship and if it involves collusive quotationing (or quotation rigging)². Collusive bidding is a per se prohibition meaning that it cannot be justified under any grounds.
3. Regulation 38(1) of the Municipal Supply Chain Management Regulations 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:
 - a) take all reasonable steps to prevent such abuse;
 - b) reject the quotation of any quotationder if that quotationder 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
 - c) cancel a contract awarded to a person if the person committed any corrupt or fraudulent act during the quotationing 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 quotations are considered, reasonable steps are taken to prevent any form of quotation-rigging.
5. In order to give effect to the above, the attached Certificate of Quotation Determination (MBD 9) must be completed and submitted with the quotation.

I, the undersigned, in submitting the accompanying quotation:

(Notice Number and Description)

In response to the invitation for the quotation 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: _____ that:
(Name of Quotationder)

1. I have read and I understand the contents of this Certificate;
2. I understand that the accompanying quotation will be disqualified if this Certificate is found not to be true and complete in every respect.
3. I am authorized by the quotationder to sign this Certificate, and to submit the accompanying quotation, on behalf of the quotationder.
4. Each person whose signature appears on the accompanying quotation has been authorized by the quotationder to determine the terms of and to sign the quotation, on behalf of the quotationder.
5. For the purposes of this Certificate and the accompanying quotation, I understand that the word "competitor" shall include any individual or organization, other than the quotationder, whether or not affiliated with the quotationder, who:
 - a) has been requested to submit a quotation in response to this quotation invitation;
 - b) could potentially submit a quotation in response to this quotation invitation, based on their qualifications, abilities or experience; and
 - c) provides the same goods and services as the quotationder and/or is in the same line of business as the quotationder.
6. The quotationder has arrived at the accompanying quotation independently from, and without consultation, communication, agreement or arrangement with any competitor. However, communication between partners in a joint venture or consortium will not be construed as collusive quotationding.
7. In particular, with limiting the generality of paragraph 6 above, there has been no consultation, communication, communication, agreement or arrangement with any competitor regarding:
 - a) prices;
 - b) geographical area where product or service will be rendered (market allocation);
 - c) methods, factors or formulas used to calculate prices;
 - d) the intention or decision to submit or not to submit a quotation;
 - e) the submission of a quotation which does not meet the specifications and conditions of the quotation; or
 - f) quotationding with the intention not to win the quotation.
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 quotation invitation relates.
9. The terms of the accompanying quotation have been, and will not be, disclosed by the quotationder, directly or indirectly, to any competitor, prior to the date and time of the official quotation opening or of awarding of the contract.
10. I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to quotations and contracts, quotations 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 Prosecutions Authority (NPA) for criminal investigation and/or may be restricted in terms of the Prevention and Combating of Corruption Activities Act, No. 12 of 2004, or any other applicable legislation.

| | | | |
|-----------------------------|--|---------------------|--|
| Name of Quotationder | | | |
| Signature | | Name (Print) | |
| Capacity | | Date | |

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

² Quotation rigging (or collusive quotationding) 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 quotationding process. Quotation rigging is, therefore, an agreement between competitors not to compete.

7. DECLARATION OF MUNICIPAL ACCOUNTS

Declaration in terms of regulation 38(1)(d)(1) of the Local Government: Municipal Supply Chain Management Regulations

NB: Please note that this declaration must be completed by ALL service providers

- i. I, the undersigned hereby declare that the signatory to this quotation is duly authorized and further declare that,
- ii. I acknowledge that according to regulation 38(1)(d)(i) of the Municipal Supply Chain Management Regulations the Municipality may reject the quotation of the quotationder if any municipal rates and taxes or municipal service charges owed by the quotationder or any of its directors/members/partners to the Mogalakwena Local Municipality, or to any other municipality or municipality, are in arrears for more than ninety (90) days or three (3) months.
- iii. I acknowledge that, should it be found that any municipal rates and taxes or municipal service charges as set out in (ii) above are in areas for more than ninety (90) days or three (3) months, the quotation will be rejected and the Mogalakwena Local Municipality may take such remedial action as is required, including the rejection of the quotation and/or termination of contract; and
- iv. The following account/s of the quotationding entity has reference:

| Physical Business Address(es) of the quotationder | Municipality | Municipal Account Number |
|--|---------------------|---------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

NB: If the above space is insufficient, please submit it on a separate page.

Please note that if no municipal rates and taxes or municipal charges are payable by the quotationding entity, indicate the reason/s for that in the form below by means of a tick next in the relevant block.

| Reason | Tick | Portfolio of Evidence |
|---|------|---|
| Quotationding entities who rent premises from a landlord, | | A signed copy of the lease agreement together with a letter from the landlord stating that no levies are in arrears |
| Quotationding entities who operate from a property owned by a director/member/partner | | Municipal account statement/s of a director/member/partner |
| Quotationding entities who operate from farms/informal settlements | | A letter from their Induna/owner |
| Quotationding entities who operate from someone else's property. | | A sworn affidavit stating the details and relationship with the property owner. |

Attach latest municipal account statement behind this page. The portfolio of evidence must not be older than three (3) months from the close of this quotation.

SIGNED AT _____ THIS _____ DAY OF _____ 20_____

Name of Duly Authorized Signatory: (Please Print): _____

Authorized Signature: _____

Witnesses:

1. _____

2. _____

| | | | |
|-----------------------------|--|---------------------|--|
| Name of Quotationder | | | |
| Signature | | Name (Print) | |
| Capacity | | Date | |

8. AUTHORITY OF SIGNATORY

Indicate the status of the quotationder by ticking the appropriate box hereunder. The quotationder must complete the certificate set out below for the relevant category.

| COMPANY | PARTNERSHIP | JOINT VENTURE | SOLE PROPRIETOR | CLOSE CORPORATION |
|---------|-------------|---------------|-----------------|-------------------|
| | | | | |

A. Certificate for Company

I, _____ chairperson of the board of directors of

_____ hereby confirm that by resolution of the board of directors

(copy attached) taken on _____ Mr/Ms _____ acting in the capacity

of _____, was authorized to sign all documents in connection with this quotation for **Notice Number: 260/2024**

and any contract resulting from it on behalf of the company.

Witnesses:

1. _____ Chairman _____

2. _____ Date _____

B. Certificate for Partnership

We, the undersigned, being the key partners in the business trading as_____

hereby authorize Mr/Ms _____ acting in the capacity of _____

to sign all documents in connection with this quotation for **Notice Number: 260/2024** and any contract resulting from it on our behalf.

| Name | Address | Signature | Date |
|------|---------|-----------|------|
| | | | |
| | | | |
| | | | |

Note: This certificate is to be completed and signed by all key partners upon whom rests the direction of the affairs of the Partnership as a whole.

C. Certificate for Joint Venture

We, the undersigned, are submitting this quotation offer in Joint Venture and hereby authorize Mr/Ms_____

authorized signatory of the company _____ acting in the capacity of lead partner to sign all documents in connection with this quotation for **Notice Number: 260/2024** and any contract resulting from it on our behalf.

This authorization is evidenced by the attached power of attorney signed by legally authorized signatories of the
partners to the Joint Venture.

| Name of Firm | Address | Authorizing Name and Capacity | Authorizing Signature |
|---------------|---------|-------------------------------|-----------------------|
| Lead Partner: | | | |
| | | | |
| | | | |

NOTE: A copy of the Joint Venture Agreement indicating clearly the percentage contribution of each partner to the Joint Venture, is to be submitted with the quotation. A board resolution, authorizing each signatory who signed above to do so, is to be submitted with the quotation.

D. Certificate for Sole Proprietor

I, _____, hereby confirm that I am the sole owner of
the business trading as _____

Witnesses:

| | |
|----------|------------------|
| 1. _____ | Sole Owner _____ |
| 2. _____ | Date _____ |

E. Certificate for Close Corporation

We, the undersigned, being key members in the business trading as _____

hereby authorize Mr/Ms _____ acting in capacity of _____

to sign all documents in connection with this quotation for **Notice Number: 260/2024** and any contract resulting from it on our behalf.

| Name | Address | Signatory | Date |
|------|---------|-----------|------|
| | | | |
| | | | |
| | | | |

Note: This certificate is to be completed and signed by all key partners upon whom rests the direction of the affairs of the Close Corporation as a whole.

9. TERMS OF REFERENCE/SPECIFICATIONS

1. INTRODUCTION

The Mogalakwena Local Municipality wishes to appoint a service Supply and Delivery of Social Relief Items

2. PROJECT DELIVERABLES/TECHNICAL REQUIREMENTS

The Service Provider will be required to Supply and Delivery of Social Relief Items to Mogalakwena Local Municipality.

3. ACCESS TO ELECTRONIC MAIL (E-MAIL) FACILITY

The appointed Service Providers will be required to have access to the electronic mail (e-mail) facilities to receive official orders Supply and Delivery of Social Relief Items Local Municipality.

4. SPECIFICATIONS FOR SUPPLY AND DELIVERY OF SOCIAL RELIEF ITEMS

| NO. | DESCRIPTION OF SERVICE | Unit Price | Quantity | Amount |
|-------------------------|--|------------|----------|--------|
| 1 | Heavy Duty PVC tarp sheet 800 semi fire resistant with Teflon type coating for durability, manufactured as per SABS standard, supported with chrome plated eye lids every 500mm a nylon rope 3m long, secured with double stitch as described below: | | | |
| | (5m by 5m) clearly marked Mogalakwena Local Municipality in bold | R | 5 | R |
| | (3m by 3m) clearly marked Mogalakwena Local Municipality in bold | R | 10 | R |
| | (3m by 2m) clearly marked Mogalakwena Local Municipality in bold | R | 10 | R |
| | (3m by 5m) clearly marked Mogalakwena Local Municipality in bold | R | 10 | R |
| 2 | A-frame 1.2 Aluminium Ladder | R | 2 | R |
| 3 | 0.9 Y-Standard steel Pole; one side sharpened point and one side 5mm eye (500mm from flat of steel pole) | R | 60 | R |
| 4 | 14 pound hammer | R | 2 | R |
| 5 | 4 pound hammer | R | 2 | R |
| 6 | Ratchet Double Hook 0.9m heavy duty stripe | R | 10 | R |
| SUB TOTAL EXCLUDING VAT | | | | R |
| VAT 15% | | | | R |
| TOTAL INCLUDING VAT | | | | R |

10. FORM OF OFFER AND ACCEPTANCE

OFFER (to be completed by the Tenderer)

The Employer, identified in the acceptance signature block, has solicited offers to enter into a contract in respect of the following works:

NOTICE NUMBER: 260/2024– SUPPLY AND DELIVERY OF SOCIAL RELIEF ITEMS The tenderer, identified in the offer signature block below, has examined the documents listed in the tender data and addenda thereto as listed in the tender 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 contractor 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:

_____ Rand (in words)

R _____ (In figures).

This offer may be accepted by the Employer by signing the acceptance part of this form and returning one copy of this document to the tenderer before the end of the period of validity stated in the Tender Data, whereupon the Tenderer becomes the party named as the Contractor in the conditions of the contract identified in the contract data.

| | | | |
|-------------------------|--|-------------|--|
| Signature | | Date | |
| Name | | | |
| Capacity | | | |
| Name of Tenderer | | | |

Witness

Signature _____ Date _____

ACCEPTANCE (To be completed by the Employer)

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 Contractor the amount due in accordance with the conditions of contract identified in the contract data. Acceptance of the Tenderer's Offer 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 1 Agreements and Contract Data (which includes this Agreement)

Part 2 Pricing Data

Part 3 Scope of Work

Part 4 Additional Documentation

and drawings and documents or parts thereof, which may be incorporated by reference into Parts 1 to 4 above.

Deviations from and amendments to the documents listed in the Tender Data and any addenda thereto listed in the Tender Schedules as well as any changes to the terms of the Offer agreed by the Tenderer and the Employer during this process of offer and acceptance, are contained in the Schedule of Deviations attached to and forming part of this Agreement. No amendments to or deviations from said documents are valid unless contained in this Schedule, which must be duly signed by the authorized representative(s) of both parties.

The Tenderer shall within two weeks after receiving a completed copy of this Agreement, including the schedule of deviations (if any), contact the employer's agent (whose details are given in the tender document) 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 at or just after the date this agreement comes into effect. Failure to fulfill any of these obligations in accordance with those terms shall constitute a repudiation of this Agreement.

Notwithstanding anything contained herein, this Agreement comes into effect on the date when the tenderer receives one fully completed original copy of this document, including the Schedule of Deviations (if any). Unless the Tenderer within five days of the date of such receipt notifies the employer in writing of any reason why he cannot accept the contents of this agreement, this agreement shall constitute a binding contract between the parties.

For the Employer

| | | | |
|----------------------------|--|--|--|
| Name | | Signature | |
| Date | | | |
| Capacity (tick one) | <input type="checkbox"/> Municipal Manager | <input type="checkbox"/> Chief Financial Officer | |
| For the Employer | Mogalakwena Local Municipality | | |
| Name of Witness | | Signature | |

11. DECLARATION BY QUOTATIONDER

I/We acknowledge that I/we am/are fully acquainted with the contents of the conditions of tender of this tender document, and I/we accept the conditions in all respects.

I/We agree that the laws of the Republic of South Africa shall be applicable to the contract resulting from the acceptance of my/our tender and that I/we elect *domicillium et executandi* (physical address at which legal proceedings may be instituted) in the Republic:

I/We accept full responsibility for the proper execution and fulfilment of all obligations devolving in me/us under this agreement as the principal liable for the due fulfilment of this contract.

I/We, furthermore, confirm that I/we satisfied myself/ourselves as to the corrections and validity of my/our tender; that the price quoted covers all the work/items specified in the tender documents, and that the price(s) cover all my/our obligations under a resulting contract and that I/we accept any mistake(s) regarding price and calculations will at my/our risk.

I/We, furthermore, confirm that my/our offer remains binding upon me/us and open for acceptance by the Purchaser/Employer during the validity period indicated and calculated from the closing date of the quotation.

| | | | |
|-----------------------------|--|---------------------|--|
| Name of Quotationder | | | |
| Signature | | Name (Print) | |
| Capacity | | Date | |
| Witness 1 | | Witness 2 | |

Administrative Compliance

The Municipality has prescribed minimum administrative requirements that must be met by the service providers, to determine if the quotation qualifies to be recognized as an acceptable quotation, for evaluation. In this regard, administrative compliance will be carried out to determine whether the service providers complies with the set minimum requirements for administrative compliance.

- a) Fully completed and signed Municipal Bidding Documents (MBDs) Forms in black ink. Municipal Bidding documents that have NOT been manually completed in black ink and have been electronically completed shall be declared invalid and accordingly rejected.
- b) A copy of a municipal account statement for municipal rates and taxes or services in the name of the entity or service provider that is not older than three (3) as of the date of closure of quotation, if renting, a lease agreement and owner's proof of municipal rates must be submitted (not in arrears for more than three (3) months before closing of date of quotation). If the bidder is operating where municipal rates are not applicable, a proof of residence from the traditional authority must be submitted (not older than three (3) months before the closing date).
- c) Tax Compliance Status Verification PIN.
- d) A recent Central Supplier Database (CSD) registration report detailing all compliance requirements (last verified after the date of advertisement of quotation and before the closure date of quotation).
- e) Company Registration Certificate/s.
- f) Certified Copies of Directors Identity Documents (IDs).
- g) Any other documents as may be required from the quotation.