



Fezile Dabi

District Municipality

SUPPLY CHAIN MANAGEMENT UNIT

P O Box 10
Sasolburg, 1947

• E-mail: scm@feziledabi.gov.za

Enquiries: Tel: (016) 970 8600

Fax:

Website: www.feziledabi.gov.za

VENDOR APPLICATION FORM

COVER SHEET AND CHECKLIST

NB: Completing this checklist is mandatory to ensure completeness of the application

Name of Supplier	
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Questions	Indicate Yes / No
1. I / we have read and agree with the conditions set out in <u>Section 2</u> of this application as well as the general conditions of contract published by National Treasury	
2. Section 3: Supplier details completed and signed.	
3. Section 3: Central Suppliers Database Registration Report Attached – Not older than 30 days	
4. Section 4: Goods and services offered completed (select a maximum of 5)	
5. Section 5: Declaration of interest (MBD 4) completed and signed	
6. Certified copy of municipal health certificate in case of caterers	
7. Proof of any professional body registered with (if applicable)	
8. Valid B-BBEE Status Level Verification Certificate (Original or Certified Copy) bearing SANAS logo. EMEs: Sworn affidavit / CIPC confirmation of turnover.	
9. ORIGINAL banking details maintenance form for new suppliers completed and stamped by bank (Not required for existing suppliers unless banking details changed)	

Signature		Date	
Name of Signatory			
Designation of Signatory			
<p>I/we, the undersigned, who warrants that I/we, am/are authorised to do so on behalf of the supplier, certify that:</p> <ul style="list-style-type: none"> • All information provided in this application is correct; • I/we have read and agree to the terms and conditions of registering on the Supplier Database; • I/we have read and agree to the general conditions of contract published by National Treasury • I/we will abide by all applicable legislation and policies related to Supply Chain Management in Government and the DPME. 			

SECTION 2: CONDITIONS OF REGISTERING ON THE FDDM SUPPLIERS DATABASE

1. All suppliers must be registered on the central supplier's database managed by National Treasury (www.csd.gov.za) before they can register on the FDDM supplier's database.
2. All information will be treated confidentially.
3. Applications that are incomplete or that are not accompanied by the required documents will be disqualified. The included checklist should be completed to ensure completeness of the application.
4. Completed application forms should be posted to or hand delivered at the above mentioned addresses. No e-mail or fax copies can be accepted
5. The Fezile Dabi District Municipality's (FDDM) Service Provider Database will be used mainly for the purposes of identifying entities (individuals or juristic persons) when price quotations/bids for goods and services are to be invited. Requests for quotations / proposals are normally sent by e-mail or hand delivery to the address provided on this registration form. The fact that an entity is registered as a supplier does not constitute any contractual relationship between the entity and the Fezile Dabi District Municipality.
6. Suppliers may list a maximum of 5 categories of goods and services offered (Section 4). Where a supplier lists more than 5 categories, the FDDM may at its own discretion reject the application or select the 5 most applicable categories.
7. For procurement above the financial limit applicable to price quotations/bids, as determined from time to time by National Treasury, the FDDM will normally invite competitive bids by means of advertisements in the Government Tender Bulletin/National news paper. The duty is on entities to monitor the tender bulletin and to ensure that they obtain copies of the bidding documents that are available on the FDDM when bids are advertised.
8. The Municipality reserves the right to approach potential service providers not on the database in cases where an insufficient number of suppliers are registered for a particular commodity or service or an insufficient number of quotations are received in response to a particular request for quotations or proposals.
9. It is the responsibility of a registered entity to inform the FDDM immediately in writing of any changes in the particulars as stated in the application, especially changes in respect of contact details, ownership, B-BBEE and the SMME or EME status of the entity. Should a contract be awarded to an entity based on incorrect particulars provided by that entity, the FDDM shall have the right to, in addition to any other remedy that it may have in terms of applicable regulation, cancel the contract and to claim damages.
10. The FDDM reserves the right to cancel the registration of an entity if that entity has given incorrect or false information in the application form or any correspondence relating to the application or:
 - Failed to inform the Municipality of any changes to the particulars as furnished in the application;
 - Failed to comply with the conditions of any contract that might have been awarded to the entity;
 - The entity has been included on the list of restricted suppliers maintained by National Treasury; or
 - The entity has acted in an improper, fraudulent or corrupt manner.
11. The FDDM reserves the right to cancel the registration of an entity if that entity fails to respond to three or more consecutive requests for quotations / proposals.
12. The following documentation must accompany this application:
 - All documents included in this application form.
 - Certified company registration documents.
 - Valid tax clearance certificate.
 - Municipal stamp/LandLord business stamp(as proof that municipal services are been paid)
 - Original or certified copy of a valid B-BBEE Status level certificate (must bear SANAS logo) or sworn affidavit or letter signed by accounting officer or registered auditor attached in cases of EMEs.
 - Printout from Central Suppliers Database (www.csd.gov.za) with supplier unique registration reference.
13. For the purposes of section 256 of the Tax Administration Act of 2011 the bidder / supplier authorises the South African Revenue Service to disclose "taxpayer information" as contemplated under the provisions of Chapter 6 of the Act in relation to the compliance status of tax registration, tax debt and filing requirements to the Fezile Dabi District Municipality.

SECTION 3: SUPPLIER DETAILS

CENTRAL SUPPLIERS DATABASE REGISTRATION REPORT NOT OLDER THAN 30 DAYS MUST BE ATTACHED (www.csd.gov.za)

MAIN CONTACT PERSON (AUTHORISED CONTACT PERSON IN CASE OF COMPANIES)

Title	Initials	Surname	Position
Telephone No.	Cell no.	Fax no.	
e-mail address of main contact person			
e-mail address to be used for account enquiries			

SALES CONTACT PERSON

Title	Initials	Surname	Position
Telephone No.	Cell no.	Fax no.	e-mail address for requests for quotations

BEE STATUS I.T.O PPPFA REGULATIONS OF 2017

B-BBEE Status Level	Documentation attached
	<ol style="list-style-type: none"> 1. Certified copy of B-BBEE Status Level verification certificate issued by SANAS accredited verification agency; OR 2. Sworn affidavit or letter by an accounting officer or registered auditor in case of Emerging Micro Enterprise (EME)

ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS / SERVICES / WORKS OFFERED? [IF YES ENCLOSE PROOF]	YES	NO
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Signature		Date	
Name of Signatory			
Designation of Signatory			
Name of supplier (if different)			

SECTION 4: GOODS AND SERVICES OFFERED

LIMITED TO 5 PER SUPPLIER

(Mark with an X next to the relevant goods/services from the list which your company can provide)

General services	
	Advertising (Recruitment and Tenders)
	Conferences / Events management
	Catering
	Locksmith services
	Posting and courier services
	Printing and reproduction services
	Publications layout and design
Professional services / Training	
	Coaching and Leadership Training
	Translation / Language Editing
	University / Technical College etc.
	M&E Capacity Building
	Peer review: Evaluation
	Workshop Facilitation
Consumables	
	Books and magazines
	Cleaning supplies
	Corporate Gifts / Promotional Material
	Office stationary
	Protective Clothing / Uniforms
Contractors	
	Security services
	Furniture / Office removal
	Cleaning services
	Space planning
	Reception / Frontline staff
	Building maintenance

Equipment and Furniture	
	Audio visual equipment
	Cleaning equipment
	Electrical appliances
	Kitchen / Catering Equipment and Appliances
	Office equipment
	Office furniture
	Water coolers
Human resources and related services	
	Competency assessments
	Employee Health and Wellness
	Job evaluation and job descriptions
	Labour Relations Law
	Personnel recruitment and response handling
	Training and development
ICT	
	Computer Consumables
	Computer Hardware
	Computer Software
	Internet Service Provider
	Computer Training
	Website design / development
	Network/Software Design
	Telephone Equipment

SECTION 5: DECLARATION OF INTEREST (MBD 4)

Any legal person, including persons employed by the state¹, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of an invitation to bid (includes a price quotation, advertised competitive bid, limited bid or proposal). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where:

- the bidder is employed by the state; and/or
- the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the bid.

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

1.1 Full Name of bidder or his or her representative:

1.2 Identity Number:

1.3 Position occupied in Company (director, trustee, shareholder², member):

1.3.1 The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / PERSAL numbers must be indicated in paragraph 2 below.

1.4 Are you or any person connected with the bidder presently employed by the state? YES NO

1.4.1 If so, furnish the following particulars:

Name of person / director / trustee / shareholder/ member

Name of state institution at which you or the person connected to the bidder is employed:

Position occupied in the state institution:

Any other particulars:

1.4.2 If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector? YES NO

1.4.2.1 If yes, did you attached proof of such authority to the bid document? YES NO
(Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the bid.

1.4.2.2 If no, furnish reasons for non-submission of such proof:

¹ State" means –

- (a) 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);
- (b) any municipality or municipal entity;
- (c) provincial legislature;
- (d) national Assembly or the national Council of provinces; or
- (e) Parliament.

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

1.5 Did you or your spouse, or any of the company's directors /trustees / shareholders / members YES NO
or their spouses conduct business with the state in the previous twelve months?

1.5.1 If so, furnish particulars:

1.6 Do you, or any person connected with the bidder, have any relationship (family, friend, other) YES NO
with a person employed by the state and who may be involved with the evaluation and or
adjudication of this bid?

1.6.1 If so, furnish particulars:

1.7 Are you, or any person connected with the bidder, aware of any relationship (family, friend, YES NO
other) between any other bidder and any person employed by the state who may be involved
with the evaluation and or adjudication of this bid?

1.7.1 If so, furnish particulars:

1.8 Do you or any of the directors / trustees / shareholders / members of the company have any YES NO
interest in any other related companies whether or not they are bidding for this contract?

1.8.1 If so, furnish particulars:

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

See CSD Registration Report

3. DECLARATION

I, THE UNDERSIGNED CERTIFY THAT THE INFORMATION FURNISHED ABOVE IS CORRECT. I ACCEPT THAT THE STATE MAY REJECT THE BID AND/OR ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

Signature		Date	
Name of Signatory			
Designation of Signatory			

OFFICE USE ONLY

Date received	
Capture	
Verified	
Authorise	
Vendor No.	

Banking Details Maintenance Form

NB: All relevant fields must be completed – Must submit ORIGINAL form – no copies allowed

<input type="checkbox"/> New Application
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<input type="checkbox"/> Updating existing details
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COMPANY / PERSONAL INFORMATION			
Registered company name / Full names and surname in case of individual			Registration no. / ID No
Trading As (Individuals leave blank)			Income Tax Number
Name and position in company (Individuals leave blank)			VAT registration number
			PERSAL No (Gov employees)
Telephone No.	Cell no.	Fax no.	e-mail
Postal Address		Physical Address	
Postal Code		Postal Code	
Signature			Date

I/We hereby request and authorise you to pay any amounts, which may accrue to me/us to the credit of my/our account with the mentioned bank. I/we understand that the credit transfers hereby authorised will be processed by computer through a system known as "ACB - Electronic Fund Transfer Service", and I/we understand that no additional advice of payment will be provided by my/our bank, but that the details of each payment will be printed on my/our bank statement or any accompanying voucher. (This does not apply where it is not customary for banks to furnish bank statements). I/we understand that the Department will supply a payment advice in the normal way, and that it will indicate the date on which the funds will be made available on my/our account. This authority may be cancelled by me/us by giving thirty days' notice by prepaid registered post. **Please ensure information is valid as per required bank screens.** I/We understand that bank details provided should be exactly as per record held by the banks. I/We understand that the Department will not be held liable for any delayed payments as a result of incorrect information supplied.

BANK DETAILS (Must be in the name of the supplier – no 3 rd party payments allowed)			
PLEASE MAKE SURE THAT THE DETAILS BELOW MATCH EXACTLY AS CAPTURED BY YOUR BANK			
Account Name (Block Letters) – Must be exactly as on bank lookup screen			Branch Name
Account No.		Branch No.	
Account Type (Mark with X)			Bank Stamp
Cheque	Savings	Transm. Bond Other (Specify):	
<p align="center">Bank Screen info</p> <p>ABSA=CIF Screen, FNB=Hogans system on the CIS4/CUPR STD=Bank-Look-up-screen, Nedbank=Banking Platform under the Client Details Tab</p>			