



PROJECT NO: 529 - APPOINTMENT OF A PANEL OF THREE (03) SERVICE PROVIDERS FOR THE SUPPLY AND DELIVERY OF MACHINERY AND EQUIPMENT FOR FIRE AND RESCUE SERVICE (THLM, DRJSLM & NOKANENG FIRE STATIONS) AS AND WHEN REQUIRED FOR A PERIOD OF 36 MONTHS RE-ADVERT.

## CONTRACT DATA

### DATA PROVIDED BY THE EMPLOYER

	<b>Data</b>
1	<p>The Name of the Employer is <b>Nkangala District Municipality</b></p> <p>The address of the Employer is: 2A Walter Sisulu Street MIDDELBURG 1050</p> <p>P O Box 437 Middelburg 1050</p> <p>Telephone: 013 249 2000 Facsimile: 013 249 2145</p>
2	<p><b>PROJECT NO: 529 APPOINTMENT OF A PANEL OF THREE (03) SERVICE PROVIDERS FOR THE SUPPLY AND DELIVERY OF MACHINERY AND EQUIPMENT FOR FIRE AND RESCUE SERVICE (THLM, DRJSLM &amp; NOKANENG FIRE STATIONS) AS AND WHEN REQUIRED FOR A PERIOD OF 36 MONTHS.</b></p>
3	The Period of Performance is as per letter of appointment
4	The Service Provider may not release public or media statements or publish material related to the Services or Project without the written approval of the Employer.
5	The Service provision shall be completed as per letter of appointment
6	the service provider shall provide 12 months proof of warranty
7	The client shall not be responsible for any overtime worked or overtime payments made to the personnel of the Service Provider.
8	Copyright of document prepared for the project shall be vested with the Nkangala District Municipality
9	Service Providers will be paid in accordance with the Nkangala District Supply Chain Management Policy.
10	A Service Provider may not subcontract any work not approved by the employer the Nkangala District Municipality



PROJECT NO: 529 - APPOINTMENT OF A PANEL OF THREE (03) SERVICE PROVIDERS FOR THE SUPPLY AND DELIVERY OF MACHINERY AND EQUIPMENT FOR FIRE AND RESCUE SERVICE (THLM, DRJSLM & NOKANENG FIRE STATIONS) AS AND WHEN REQUIRED FOR A PERIOD OF 36 MONTHS RE-ADVERT.

## **PART 1: DATA PROVIDED BY THE SERVICE PROVIDER**

1.	<p>The Service Provider is . . . . .</p> <p>Address: . . . . .</p> <p>Telephone: . . . . .</p> <p>Facsimile: . . . . .</p>
2	<p>The authorised and designated representative of the Service Provider is:</p> <p>Name: . . . . .</p> <p>The address for receipt of communications is:</p> <p>Telephone: . . . . .</p> <p>Facsimile: . . . . .</p> <p>Address: . . . . .</p>