



## REQUEST FOR QUOTATION

(In terms of the Supply Chain Management Regulations (Government Gazette 27636 of 30 May 2005))

**RFQ NO: LLMSCM2023/2024-019**

**RFQ DESCRIPTION: BREATHING AIR COMPRESSOR**

**NAME OF COMPANY:** \_\_\_\_\_

**Trading as** \_\_\_\_\_

**QUOTATION PRICE (VAT INCLUSIVE) R**\_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

NB: Tenders must be properly received and deposited in the tender box on or before the closing date and before the closing time. No late tender offers will be accepted under any circumstances. Tender offers must be submitted in a sealed envelope properly marked in terms of the tender number and tender description as indicated above. If the tender offer is too large to fit into the abovementioned tender box, please inquire at the public counter opposite the tender box for assistance.

**Do not dismember this Tender document (do not take it apart) and all other documents of the submission must be attached to the pages provided for in this tender document.**

**CLOSING TIME:** 12H00

**TENDER BOX:** MAIN BUILDING (RECORDS OFFICE)

**CLOSING DATE:** 24 AUGUST 2023

## INVITATION TO QUOTE

---

### BREATHING AIR COMPRESSOR QUOTATION NO: LLMSCM2023/2024-019

---

Bids are hereby invited for the Appointment of a Service Provider for the supply of a BREATHING AIR COMPRESSOR for **LEKWA LOCAL MUNICIPALITY**.

Bids documents with detailed bid specifications and detailed information are obtainable at the Supply Chain Management Office hours 08h00 to 15h00.

Sealed Bids clearly marked “**LLMSCM2023/2024-019 BREATHING AIR COMPRESSOR**” must be placed in the tender box situated at the offices of the **LEKWA LOCAL MUNICIPALITY, CNR MBONANI MAYISELA & BEYERS NAUDE STREET** on or before 12h00 on **24 AUGUST 2023**

The LEKWA LOCAL MUNICIPALITY does not bind itself to accept the lowest or any bid and the Municipality reserves the right to accept the whole or part of any bid and further reserves the right to appoint or not to appoint if it so wishes to.

Quotations will be adjudicated according to the LEKWA LOCAL MUNICIPALITY's Supply Chain Management Policy, the Preferential Procurement Policy Framework Act (Act 5 of 2005) and the Preferential Procurement Regulations 2022 as well as the Broad Based Black Economic Empowerment Act (Act 53 of 2003). The tender quotations will be evaluated on the 80/20 Points system as prescribed by the Preferential Procurement Regulations, 2022

**NB: BIDS WHICH ARE LATE, INCOMPLETE, UNSIGNED, COMPLETED BY PENCIL, SENT BY TELEGRAPH, FASCIMALE, ELECTRONICALLY (FAX), OR E-MAIL AND WITHOUT THE COMPULSORY REQUIREMENTS SHALL BE DISQUALIFIED.**

**Technical Queries can be directed to JW Mkhwanazi 084 329 0283**

Supply Chain queries to Mr M Masuku 072 327 0891 [mmasuku@lekwalm.gov.za](mailto:mmasuku@lekwalm.gov.za)

**VERY IMPORTANT NOTICE ON DISQUALIFICATIONS:**  
**QUOTATION CONDITIONS**

A bid not complying with the peremptory requirements stated hereunder will be regarded as not being an "Acceptable bid", and as such will be rejected.

"Acceptable bid" means any bid which, in all respects, complies with the conditions of bid and specifications as set out in the bid documents, including conditions as specified in the Preferential Procurement Policy Framework Act (Act 5 of 2000) and related legislation as published in Government Gazette number 22549, dated 10 August 2001, in terms of which provision is made for this policy.

1. If any pages have been removed from the bid document, and have therefore not been submitted, or a copy of the original bid document has been submitted.
2. If the bid document is completed using a pencil. Only ink must be used to complete the bid document.
3. THE BID HAS NOT BEEN PROPERLY SIGNED BY A PARTY HAVING THE AUTHORITY TO DO SO ACCORDING TO THE EXAMPLE OF "AUTHORITY FOR SIGNATORY"
4. The bidder attempts to influence, or has in fact influenced the evaluation and/or awarding of the contract.
5. The bid has been submitted after the relevant closing date and time.
6. If any bidder who during the last five years has failed to perform satisfactorily on a previous contract with the municipality, municipal entity or any other organ of state after written notice was given to that bidder that performance was unsatisfactory.
7. The accounting officer must ensure that irrespective of the procurement process followed, no award may be given to a person –
  - (a) who is in the service of the state, or;
  - (b) 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; or;
  - (c) Who is an advisor or consultant contracted with the municipality in respect of contract that would cause a conflict of interest?
8. Bid offers will be rejected if the bidder or any of his directors is listed on the Register of Bid 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
9. Bid offers will be rejected if the bidder has abused the LEKWA LOCAL MUNICIPALITY's Supply Chain Management System.
10. Failure to complete and sign the certificate of independent determination or disclosing of wrong information.
11. Prices quoted must be firm (Fixed for the term of the contract) and must be inclusive of VAT (if applicable)
12. All MBD forms together with the related annexures MUST be completed and signed
13. Registration summary must be attached as a proof that the bidder is registered with Central Suppliers Database (CSD)
14. A firm delivery period must be indicated
15. No correction pens will be allowed and any cancellation must be signed
16. This bid will be evaluated in terms of the preference point system as prescribed by PPPFA regulations of 2022
  - Where 80/20 is below the transaction value up to R 50 000 000 &
  - Where 90/10 is above the transaction value of R 50 000 000

N.B FAILURE TO ADHERE TO THE ABOVE-MENTIONED CONDITIONS WILL AUTOMATICALLY DISQUALIFY YOUR BID

Failure to submit the above will lead to immediate disqualification

-----  
**BIDDER (COMPANY NAME)**

-----  
**AUTHORISED SIGNATURE**

## PART A INVITATION TO BID (MBD 1)

|                                                                                                       |                          |                |                |               |       |
|-------------------------------------------------------------------------------------------------------|--------------------------|----------------|----------------|---------------|-------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF MUNICIPALITY/ MUNICIPAL ENTITY)</b> |                          |                |                |               |       |
| BID NUMBER:                                                                                           | LLMSCM2023/2024-019      | CLOSING DATE:  | 24 AUGUST 2023 | CLOSING TIME: | 12H00 |
| BRIEFING DATE:                                                                                        | N/A                      | BRIEFING TIME: | N/A            | VENUE:        | N/A   |
| DESCRIPTION                                                                                           | BREATHING AIR COMPRESSOR |                |                |               |       |
| <b>THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7).</b>     |                          |                |                |               |       |

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

|                                                                                                                                                                       |                                                                                    |  |                                                                                      |              |                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------|--------------|-------------------------------------------------------------------------------------------|
| <b>LEKWA LOCAL MUNICIPALITY</b>                                                                                                                                       |                                                                                    |  |                                                                                      |              |                                                                                           |
| <b>CNR BEYERS NAUDE AND MBONANI MAYISELA STANDERTON</b>                                                                                                               |                                                                                    |  |                                                                                      |              |                                                                                           |
| <b>SUPPLIER INFORMATION</b>                                                                                                                                           |                                                                                    |  |                                                                                      |              |                                                                                           |
| 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<br>CERTIFICATE<br>[TICK APPLICABLE BOX]                                                                                              | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No                    |  | B-BBEE STATUS<br>LEVEL SWORN<br>AFFIDAVIT                                            |              | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No                           |
| <b>[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/ SWORN AFFIDAVIT (FOR EMES &amp; QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]</b> |                                                                                    |  |                                                                                      |              |                                                                                           |
| ARE YOU THE ACCREDITED<br>REPRESENTATIVE IN SOUTH AFRICA<br>FOR THE GOODS /SERVICES /WORKS<br>OFFERED?                                                                | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF] |  | ARE YOU A FOREIGN<br>BASED SUPPLIER FOR<br>THE GOODS<br>/SERVICES /WORKS<br>OFFERED? |              | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES, ANSWER PART<br>B:3 ] |
| <b>TOTAL NUMBER OF ITEMS<br/>OFFERED</b>                                                                                                                              |                                                                                    |  | <b>TOTAL BID<br/>PRICE</b>                                                           |              | R                                                                                         |
| <b>SIGNATURE OF BIDDER</b>                                                                                                                                            | .....                                                                              |  | <b>DATE</b>                                                                          |              |                                                                                           |
| <b>CAPACITY UNDER WHICH THIS BID IS<br/>SIGNED</b>                                                                                                                    |                                                                                    |  |                                                                                      |              |                                                                                           |
| <b>BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO:</b>                                                                                                                |                                                                                    |  | <b>TECHNICAL INFORMATION MAY BE DIRECTED TO:</b>                                     |              |                                                                                           |
| DEPARTMENT                                                                                                                                                            | SUPPLY CHAIN                                                                       |  | CONTACT PERSON                                                                       | JW Mkhwanazi |                                                                                           |
| CONTACT PERSON                                                                                                                                                        | Mr M Masuku                                                                        |  | TELEPHONE NUMBER                                                                     | 084 329 0283 |                                                                                           |
| TELEPHONE NUMBER                                                                                                                                                      | 072 327 0891                                                                       |  | E-MAIL ADDRESS                                                                       |              |                                                                                           |
| E-MAIL ADDRESS                                                                                                                                                        | mmasuku@lekwalim.gov.za                                                            |  |                                                                                      |              |                                                                                           |

## PART B

### TERMS AND CONDITIONS FOR BIDDING

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                      |                                                          |                                                |                                                          |                                                                 |                                                          |                                                            |                                                          |                                                                |                                                          |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------|
| <b>1. BID SUBMISSION:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                      |                                                          |                                                |                                                          |                                                                 |                                                          |                                                            |                                                          |                                                                |                                                          |
| <p>1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.</p> <p>1.2. <b>ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED–(NOT TO BE RE-TYPED) OR ONLINE</b></p> <p>1.3. THIS BID 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>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                      |                                                          |                                                |                                                          |                                                                 |                                                          |                                                            |                                                          |                                                                |                                                          |
| <b>2. TAX COMPLIANCE REQUIREMENTS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                      |                                                          |                                                |                                                          |                                                                 |                                                          |                                                            |                                                          |                                                                |                                                          |
| <p>2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.</p> <p>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.</p> <p>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 <a href="http://WWW.SARS.GOV.ZA">WWW.SARS.GOV.ZA</a>.</p> <p>2.4 FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B:3.</p> <p>2.5 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.</p> <p>2.6 IN BIDS 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 BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.</p>                                                                                                                                                                                                     |                                                                      |                                                          |                                                |                                                          |                                                                 |                                                          |                                                            |                                                          |                                                                |                                                          |
| <b>3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                      |                                                          |                                                |                                                          |                                                                 |                                                          |                                                            |                                                          |                                                                |                                                          |
| <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><b>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.</b></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 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: .....

## PRICING SCHEDULE – FIRM PRICES (PURCHASES)

**NOTE: ONLY FIRM PRICES WILL BE ACCEPTED. NON-FIRM PRICES (INCLUDING PRICES SUBJECT TO RATES OF EXCHANGE VARIATIONS) WILL NOT BE CONSIDERED**

**IN CASES WHERE DIFFERENT DELIVERY POINTS INFLUENCE THE PRICING, A SEPARATE PRICING SCHEDULE MUST BE SUBMITTED FOR EACH DELIVERY POINT**

Name of Bidder..... RFQ Number: LLMSCM2023/2024-019

Closing Time: 12:00

Closing Date: 24 AUGUST 2023

OFFER TO BE VALID FOR...30.....DAYS FROM THE CLOSING DATE OF BID.

| ITEM<br>NO. | QUANTITY | DESCRIPTION | BID PRICE IN RSA CURRENCY<br>**(ALL APPLICABLE TAXES INCLUDED) |
|-------------|----------|-------------|----------------------------------------------------------------|
|-------------|----------|-------------|----------------------------------------------------------------|

**As per SPECIFICATIONS/ TERMS OF REFERENCES/BOQ page BELOW**

- Required by: .....
- At: .....  
.....
- Does the offer comply with the specification(s)? \*YES/NO
- If not to specification, indicate deviation(s) .....
- Period required for delivery .....  
\*Delivery: Firm/Not firm
- Delivery basis .....

Note: All delivery costs must be included in the bid price, for delivery at the prescribed destination.

\*\* "all applicable taxes" includes value- added tax, pay as you earn, income tax, unemployment insurance fund contributions and skills development levies.

\*Delete if not applicable

\*\* "all applicable taxes" includes value- added tax, pay as you earn, income tax, unemployment insurance fund contributions and skills development levies.

**SPECIFICATIONS/ TERMS OF REFERENCES/BOQ****BREATHING AIR COMPRESSOR**

| ITEM                                                                                | QTY | DESCRIPTION                                                                                                                                                                                                                | AMOUNT |
|-------------------------------------------------------------------------------------|-----|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|
| 1.                                                                                  | 1   | Breathing Air Compressor<br>High pressure compressor,<br>300 l/min,<br>7,5 kW,<br>three-phase motor 400 V,<br>50Hz,<br>P21 filter system<br>Must be able to fill 200 – 300 bar cylinders<br>(similar to Bauer PE 300 – TE) |        |
| <b>TOTAL (EX VAT)</b>                                                               |     |                                                                                                                                                                                                                            |        |
| <b>VAT</b>                                                                          |     |                                                                                                                                                                                                                            |        |
| <b>TOTAL (INC VAT)</b>                                                              |     |                                                                                                                                                                                                                            |        |
| <b>DELIVERY AND OFF LOADING TO LEKWA LOCAL MUNICIPALITY STORES MUST BE INCLUDED</b> |     |                                                                                                                                                                                                                            |        |

**NB: If name or brand is mentioned above this is for specification purposes**

.....  
**Authorised Signature**

.....  
**Date**

**DECLARATION OF INTEREST**

1. **No Bid will be accepted from persons in the service of the state\*.**
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 and/or take an oath declaring his/her interest.
3. In order to give effect to the above, the following questionnaire must be completed and submitted with the Bid:
  - 3.1 Full Name:.....
  - 3.2 Identity Number:.....
  - 3.3 Company Registration Number:.....
  - 3.4 Tax Reference Number: .....
  - 3.5 VAT Registration Number:.....
  - 3.6 Are you presently in the service of the state \*YES / NO  
\* Delete if not applicable
  - 3.6.1 If so, furnish particulars.  
 .....  
 .....
  - 3.7 Have you been in the service of the state for the past twelve months \*YES / NO  
\* Delete if not applicable
  - 3.7.1 If so, furnish particulars.  
 .....  
 .....
  - 3.8 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? \*YES / NO  
\* Delete if not applicable
  - 3.8.1 If so, furnish particulars.  
 .....  
 .....
  - 3.9 Are you aware of any relationship (family, friend, other) between a bidder and any persons in the service of the state who may be involved with the evaluation and or adjudication of this Bid. \*YES / NO  
\* Delete if not applicable
  - 3.9.1 If so, furnish particulars  
 .....  
 .....

★ MSCM 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.

3.10 Are any of the company's directors, managers, principal shareholders or stakeholders in service of the state? \*YES / NO

\* Delete if not applicable

3.10.1 If so, furnish particulars.

.....  
 .....

3.11 Are any spouse, child or parent of the company's directors, managers, principal shareholders or stakeholders in service of the state? \*YES / NO

\* Delete if not applicable

3.11.1 If so, furnish particulars.

.....  
 .....

## CERTIFICATION

I, THE UNDERSIGNED (NAME) .....

**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.**

|                    |                         |
|--------------------|-------------------------|
| .....<br>Signature | .....<br>Date           |
| .....<br>Position  | .....<br>Name of Bidder |

## PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022

This preference form must form part of all tenders invited. It contains general information and serves as a claim form for preference points for specific goals.

**NB: BEFORE COMPLETING THIS FORM, TENDERERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF THE TENDER AND PREFERENTIAL PROCUREMENT REGULATIONS, 2022**

### 1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to invitations to tender:

- 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 **To be completed by the organ of state**

*(delete whichever is not applicable for this tender).*

- a. The applicable preference point system for this tender is the **90/10** preference point system.
- b. The applicable preference point system for this tender is the **80/20** preference point system.
- c. Either the **90/10 or 80/20 preference point system** will be applicable in this tender. The lowest/ highest acceptable tender will be used to determine the accurate system once tenders are received.

1.3 Points for this tender (even in the case of a tender for income-generating contracts) shall be awarded for:

- (a) Price; and
- (b) Specific Goals.

1.4 **To be completed by the organ of state:**

The maximum points for this tender are allocated as follows:

|                                                  | POINTS     |
|--------------------------------------------------|------------|
| PRICE                                            | 80         |
| SPECIFIC GOALS                                   | 20         |
| <b>Total points for Price and SPECIFIC GOALS</b> | <b>100</b> |

1.5 Failure on the part of a tenderer to submit proof or documentation required in terms of this tender to claim points for specific goals with the tender, will be interpreted to mean that preference points for specific goals are not claimed.

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

## 2. DEFINITIONS

“**tender**” means a written offer in the form determined by an organ of state in response to an invitation to provide goods or services through price quotations, competitive tendering process or any other method envisaged in legislation;

- (a) “**price**” means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;
- (b) “**rand value**” means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;
- (c) “**tender for income-generating contracts**” means a written offer in the form determined by an organ of state in response to an invitation for the origination of income-generating contracts through any method envisaged in legislation that will result in a legal agreement between the organ of state and a third party that produces revenue for the organ of state, and includes, but is not limited to, leasing and disposal of assets and concession contracts, excluding direct sales and disposal of assets through public auctions; and
- (d) “**the Act**” means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

## 3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

### 3.1. POINTS AWARDED FOR PRICE

#### 3.1.1 THE 80/20 OR 90/10 PREFERENCE POINT SYSTEMS

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

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

Where

- Ps = Points scored for price of tender under consideration
- Pt = Price of tender under consideration
- Pmin = Price of lowest acceptable tender

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

#### 3.2.1. POINTS AWARDED FOR PRICE

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

$$Ps = 80 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right) \quad \text{or} \quad Ps = 90 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right)$$

Where

- Ps = Points scored for price of tender under consideration
- Pt = Price of tender under consideration
- Pmax = Price of highest acceptable tender

#### 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 tender. For the purposes of this tender the tenderer 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 tender:
- 4.2. In cases where organs of state intend to use Regulation 3(2) of the 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 tender documents, stipulate in the case of—
- (a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or
  - (b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system,
- then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

**Table 1: Specific goals for the tender 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 tenderers: The tenderer must indicate how they claim points for each preference point system.)*

| The specific goals allocated points in terms of this tender                                                       | Number of points allocated<br>(80/20 system)<br>(To be completed by the organ of state) | Number of points claimed (80/20 system)<br>(To be completed by the tenderer) |
|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| PRICE                                                                                                             | 80                                                                                      | n/a                                                                          |
| Previously Disadvantaged Individuals (Certified ID Copy)                                                          | 4                                                                                       |                                                                              |
| Women (Certified ID Copy)                                                                                         | 4                                                                                       |                                                                              |
| Disabled (Health Record Stating nature of disability)                                                             | 4                                                                                       |                                                                              |
| Youth (Certified ID Copy)                                                                                         | 4                                                                                       |                                                                              |
| Locality (Attach Proof of Residence)<br>4 points if business located within Lekwa Local Municipality Jurisdiction | 4                                                                                       |                                                                              |

#### 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
  - ☐ One-person business/sole propriety
  - ☐ Close corporation
  - ☐ Public Company
  - ☐ Personal Liability Company
  - ☐ (Pty) Limited
  - ☐ Non-Profit Company
  - ☐ State Owned Company
- [TICK APPLICABLE BOX]

4.6. I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I 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 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;
- iv) 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 may, in addition to any other remedy it may have –
  - (a) disqualify the person from the tendering 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 tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted 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, if deemed necessary.

.....  
**SIGNATURE(S) OF TENDERER(S)**

**SURNAME AND NAME:** .....

**DATE:** .....

**ADDRESS:** .....

.....

.....

.....

**DECLARATION OF SUPPLIER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES**

1. This Municipal Bidding Document must form part of all bids invited
2. This serves as a declaration 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 supplier may be rejected if that bidder 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 on or failed to comply with any government, municipal or other public sector contract during the past five years; or
  - d. 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 as a company or person prohibited from doing business with the public sector?</p> <p><b>(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).</b></p> <p><b>The Database of Restricted Suppliers now resides on the National Treasury's website (<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) and can be accessed by clicking on its link at the bottom of the home page.</b></p> | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 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><b>The Register for Tender Defaulters can be accessed on the National Treasury's website (<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) by clicking on its link at the bottom of the home page.</b></p>                                                                                                                                                                                                                                                          | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.2.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                                |
| 4.3   | <p>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?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.3.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                                |
| 4.4   | <p>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?</p>                                                                                                                                                                                                                                                                                                                                                                                                                                   | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |

|       |                                                                                                                                                                                             |                                 |                                |
|-------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------|
| 4.4.1 | If so, furnish particulars:                                                                                                                                                                 |                                 |                                |
| 4.5   | Was any contract between the bidder and the municipality 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<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.5.1 | If so, furnish particulars:                                                                                                                                                                 |                                 |                                |

**CERTIFICATION**

**I, THE UNDERSIGNED (FULL NAME)**

.....  
**CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM TO BE 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.**

|                    |                         |
|--------------------|-------------------------|
| .....<br>Signature | .....<br>Date           |
| .....<br>Position  | .....<br>Name of Bidder |

**CERTIFICATE OF INDEPENDENT BID DETERMINATION**

- 1 Section 4 (1) (b) (iii) of the Competition Act No. 89 of 1998, as amended, prohibits an agreement between, or concerted practice by, firms, or a decision by an association of firms, if it is between parties in a horizontal relationship and if it involves collusive bidding (or bid rigging).<sup>\*</sup> Collusive bidding is a *per se* prohibition meaning that it cannot be justified under any grounds.
- 2 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:
  - a. take all reasonable steps to prevent such abuse;
  - b. 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
  - c. 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.
- 3 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.
- 4 In order to give effect to the above, the attached Certificate of Quotation Determination (**MBD 9**) must be completed and submitted with the bid:

---

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

**CERTIFICATE OF BID DETERMINATION**

I, the undersigned, in submitting the accompanying Bid:

**LLMSCM2023/2024-019 BREATHING AIR COMPRESSOR**

in response to the invitation for the Bid made by:

**LEKWA LOCAL MUNICIPALITY**

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 Bidder)

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
6. The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However communication between partners in a joint venture or consortium\* 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:
  - (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 bid;
  - (e) the submission of a bid which does not meet the specifications and conditions of the bid; or
  - (f) 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.
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.

|                           |                                |
|---------------------------|--------------------------------|
| .....<br><b>Signature</b> | .....<br><b>Date</b>           |
| .....<br><b>Position</b>  | .....<br><b>Name of Bidder</b> |

\* 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.

**CONTRACT FORM - PURCHASE OF GOODS/WORKS**

**THIS FORM MUST BE FILLED IN DUPLICATE BY BOTH THE SUCCESSFUL BIDDER (PART 1) AND THE PURCHASER (PART 2). BOTH FORMS MUST BE SIGNED IN THE ORIGINAL SO THAT THE SUCCESSFUL BIDDER AND THE PURCHASER WOULD BE IN POSSESSION OF ORIGINALLY SIGNED CONTRACTS FOR THEIR RESPECTIVE RECORDS.**

**PART 1 (TO BE FILLED IN BY THE BIDDER)**

1. I hereby undertake to supply all or any of the goods and/or works described in the attached bidding documents to (name of institution)..... in accordance with the requirements and specifications stipulated in bid number..... at the price/s quoted. My offer/s remain binding upon me and open for acceptance by the purchaser during the validity period indicated and calculated from the closing time of bid.
2. The following documents shall be deemed to form and be read and construed as part of this agreement:
  - (i) Bidding documents, viz
    - Invitation to bid;
    - SARS Pin;
    - Pricing schedule(s);
    - Technical Specification(s);
    - 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;
  - (ii) General Conditions of Contract; and
  - (iii) Other (specify)
3. 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 goods and/or works 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.
4. I accept full responsibility for the proper execution and fulfilment of all obligations and conditions devolving on me under this agreement as the principal liable for the due fulfilment of this contract.
5. I declare that I have no participation in any collusive practices with any bidder or any other person regarding this or any other bid.
6. I confirm that I am duly authorised to sign this contract.

NAME (PRINT) .....

CAPACITY .....

SIGNATURE .....

NAME OF FIRM .....

DATE .....

**WITNESSES**

1 .....

2. ....

DATE:.....

**MBD 7.1****CONTRACT FORM - RENDERING OF SERVICES**

**THIS FORM MUST BE FILLED IN DUPLICATE BY BOTH THE SERVICE PROVIDER (PART 1) AND THE PURCHASER (PART 2). BOTH FORMS MUST BE SIGNED IN THE ORIGINAL SO THAT THE SERVICE PROVIDER AND THE PURCHASER WOULD BE IN POSSESSION OF ORIGINALLY SIGNED CONTRACTS FOR THEIR RESPECTIVE RECORDS.**

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

7. I hereby undertake to render services described in the attached bidding documents to (name of the institution)..... in accordance with the requirements and task directives / proposals specifications stipulated in Bid Number..... at the price/s quoted. My offer/s remain binding upon me and open for acceptance by the Purchaser during the validity period indicated and calculated from the closing date of the bid.
8. The following documents shall be deemed to form and be read and construed as part of this agreement:
- (iv) Bidding documents, viz
    - Invitation to bid;
    - SARS Pin;
    - 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;
  - (v) General Conditions of Contract; and
  - (vi) Other (specify)
9. 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.
10. I accept full responsibility for the proper execution and fulfilment of all obligations and conditions devolving on me under this agreement as the principal liable for the due fulfillment of this contract.
11. I declare that I have no participation in any collusive practices with any bidder or any other person regarding this or any other bid.
12. I confirm that I am duly authorised to sign this contract.

NAME (PRINT) .....

CAPACITY .....

SIGNATURE .....

NAME OF FIRM .....

DATE .....

**WITNESSES**

1 .....

2 .....

DATE:.....

CONTRACT FORM - RENDERING OF SERVICES

PART 2 (TO BE FILLED IN BY THE PURCHASER)

1. I.....in my capacity as.....  
accept your bid under reference number .....dated.....for  
the rendering of services indicated hereunder and/or further specified in the annexure(s).
2. An official order indicating service delivery instructions is forthcoming.
3. 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.

| DESCRIPTION OF<br>SERVICE | PRICE (ALL<br>APPLICABLE<br>TAXES<br>INCLUDED) | COMPLETION<br>DATE | B-BBEE<br>STATUS LEVEL<br>OF<br>CONTRIBUTION | MINIMUM<br>THRESHOLD<br>FOR LOCAL<br>PRODUCTION<br>AND CONTENT<br>(if applicable) |
|---------------------------|------------------------------------------------|--------------------|----------------------------------------------|-----------------------------------------------------------------------------------|
|                           |                                                |                    |                                              |                                                                                   |

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

SIGNED AT ..... ON .....

NAME (PRINT) .....

SIGNATURE .....

OFFICIAL STAMP

WITNESSES

1 .....

2 .....

DATE: .....

**CONTRACT FORM - PURCHASE OF GOODS/WORKS****PART 2 (TO BE FILLED IN BY THE PURCHASER)**

I..... in my capacity as.....  
 accept your bid under reference number .....dated.....for  
 the supply of goods/works indicated hereunder and/or further specified in the annexure(s).

An official order indicating delivery instructions is forthcoming.

I undertake to make payment for the goods/works delivered in accordance with the terms and conditions of the contract, within 30 (thirty) days after receipt of an invoice accompanied by the delivery note.

| ITEM NO. | PRICE APPLICABLE TAXES INCLUDED) (ALL | BRAND | DELIVERY PERIOD | B-BBEE STATUS LEVEL OF CONTRIBUTION | MINIMUM THRESHOLD FOR LOCAL PRODUCTION AND CONTENT (if applicable) |
|----------|---------------------------------------|-------|-----------------|-------------------------------------|--------------------------------------------------------------------|
|          |                                       |       |                 |                                     |                                                                    |

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

SIGNED AT .....ON.....

NAME (PRINT) .....

SIGNATURE .....

OFFICIAL STAMP

**WITNESSES**

1. ....

2. ....

DATE .....

**BID CHECKLIST**

Suppliers are to use this checklist to ensure that the Quotation documentation is complete. The supplier is to indicate that the documentation is complete and included in the Quotation document by completing the table below. **Failure to attach or complete the relevant documentation will result in your quotation being disqualified**

Tick to indicate that the information is included

| Item | Description                                                                                                                                                                                                                   | Yes                      | No                       |
|------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|
| 1.   | Is your business registered as an accredited prospective supplier with the Lekwa Local Municipality? If not registered please send an email to above SCM Contact for database form and attach completed form to this document | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.   | Is your business registered as an accredited prospective supplier with the Central Supplier Database (CSD)? Attach Full CSD reports                                                                                           |                          |                          |
| 3.   | Is your latest Municipality Account (not older than 60 days) or Lease Agreement/Invoice attached? Must be in the name of the company or Directors name. Account should not be in arrears                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.   | Did you read and understand all pages of the Quotation document?                                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.   | Did you complete the Quotation documents in black ink?                                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.   | Did you provide a certified copy of your company registration?                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> |
| 7.   | Did you provide a certified copy of your identity document?                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| 8.   | Did you provide registration certificate pertaining to the relevant industry e.g. (Electrical Contractors Board, CIDB), if applicable?                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> |
| 9.   | Did you provide an original/certified copy of your SARS Pin                                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> |
| 10.  | Is the resolution taken by the Board of Directors/Members/Partners for Authority to sign completed and signed? Remember it should be on the letterhead of the company.                                                        | <input type="checkbox"/> | <input type="checkbox"/> |
| 11.  | Where applicable, is the resolution taken by the Board of Directors of a Consortium or Joint Venture completed and signed?                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 12.  | Is invitation to Quotation completed and signed? (MBD 1)                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| 13.  | Is Pricing Schedule completed? (MBD 3.1)                                                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| 14.  | Did you complete and sign the SPECIFICATIONS/TERMS OF REFERENCES/BOQ FORM?                                                                                                                                                    | <input type="checkbox"/> | <input type="checkbox"/> |
| 15.  | Is the Declaration of Interest completed and signed? (MBD 4)                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 16.  | Is the Preference Points Claim Form in Terms of the Preferential Procurement Regulation 2022 completed and signed? (MBD 6.1)                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> |
| 17.  | Did you provide an original and valid B-BBEE status level verification certificate or a certified copy thereof or, if you qualify as an EME, did you provide a verification certificate?                                      | <input type="checkbox"/> | <input type="checkbox"/> |
| 18.  | Is the Declaration of Supplier's Past Supply Management Practices completed and signed? (MBD 8)                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> |
| 19.  | Is the Certificate of Independent Quotation Determination completed and signed? (MBD 9)                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> |
| 20.  | Does the product/service offered conform to the Quotation Specifications?                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> |
| 21.  | Is your quotation on your company letterhead attached and signed?                                                                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> |
| 22.  | Have you attached orders, reference letters or completion certificates for similar goods/works/services completed                                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> |

Signature of bidder

Date