## PROPOSAL QUESTIONNAIRE

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	PRICE BAS	SIS						
Bidd	ers shall indicate whether the prices quoted							
1.1	are fixed (F	Please note that	at SAPO	O prefers fixed prices).				
	Ye	es		No				
	If no specif	y:						
1.2	VAT Inclus							
	Ye	es		No				
1.3	exclude the	e discounts off	ered as	s per paragraph 4 of this Annexure;				
	Ye	es		No				
	If no specif	fy:						
1.4	include all	costs applicab	le					
	Ye	es		No				
	If no specif	fy:						
PAY	AYMENT							
Bidders shall indicate whether they accept the terms of payment of the Post Office as stipulated clause 9 of the Contractual Terms and Conditions (Annexure 'C').								
	Yes	☐ No						
If 'n	o', please sp	ecify alternative	ve term	s of payment required.				

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Pay	ment will be made at the end of the month following the date of statement.								
How	ever, should we decide to make an earlier payment, state the settlement discount offered:								
% D	iscount:								
Day	S:								
Fron	n:								
DEL	IVERY/EXECUTION								
3.1	It is required that delivery / execution shall commence immediately after contract award. Please, indicate whether this target can be achieved.								
	Yes No								
3.2	If 'no', please specify alternative delivery date(s).								
3.3	Should it become apparent to the successful Bidder at any time during the course of the execution of the order that the guaranteed completion date may not be reached, the successful Bidder shall immediately notify the SAPO representative in writing of this fact, stating the reasons for the delay as well as the actions being taken to rectify the situation								
VAL	ALIDITY PERIOD OF PROPOSAL								
(18	ease note that the Post Office requires that the bid be valid for a period of hundred and eighty (0) days from closing date of the RFP without any right of withdrawal from the bidder. The lder accepts the validity period.								
	Yes No								
CON	IDITIONS OF PURCHASE								
Bidd	ers shall indicate whether they accept the Contractual Terms and Conditions (Annexure 'C').								
	Yes No								

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Annexure 'G'

If 'N	Annexure 'G' Page 3 of 5 o', please specify amendments for consideration (attach additional pages if required).							
MAI	NUFACTURING FACILITIES (if applicable)							
6.1	Physical address where the manufacturing process will take place.							
6.2	Name of company who will do the manufacturing.							
ei ie	DDI IED CDEDENTIAL EODM							
	SUPPLIER CREDENTIAL FORM							
	Annexure 'I' refers.							
	ders shall complete and return the credential form, which will be considered part of the bosal.							
QU	QUALITY ASSURANCE							
	ders shall indicate what Quality Assurance System is being used by their company and, if licable, by their sub-contractors.							
Note	e: Accreditation to ISO standards would be imperative. Please submit full details in this regard and submit a copy of the relevant certificate if applicable (attach additional pages if required).							
CC	OMPLIANCE TO SPECIFICATION							
	dders shall indicate whether the goods/services offered comply with the specifications listed in nexure 'D'.							
	] Yes							
If '	No' please specify the deviations (attach additional pages if required).							

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## Annexure 'G' Page 4 of 5

SIGNATURE	:	
NAME OF DELEGATED SIGNATO (PRINT)	RY:	in his capacity of
DESIGNATION OF SIGNATORY (PRINT)	:	who warrants his authority to sign on behalf of
NAME OF BIDDER (COMPANY)	:	
DATE	:	