

|                                                                                                                                                            |                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| <b>RFQ NR</b>                                                                                                                                              | COJ0034-25/26 RE-ADVERT                                                            |
| <b>ADVERT DATE</b>                                                                                                                                         | 04 FEBRUARY 2026                                                                   |
| <b>CLOSING DATE</b>                                                                                                                                        | 11 FEBRUARY 2026                                                                   |
| <b>CLOSING TIME</b>                                                                                                                                        | 10H30                                                                              |
| <b>DESCRIPTION OF GOOD/SERVICES</b>                                                                                                                        | REQUEST FOR QUOTATION FOR SAFETY MANAGEMENT TRAINING COURSE, BASIC LIFE SUPPORT    |
| <b>COMPULSORY BRIEFING</b>                                                                                                                                 | n/a                                                                                |
| <b>DEPARTMENT</b>                                                                                                                                          | GCSS                                                                               |
| <b>CONTACT PERSON</b>                                                                                                                                      | NOKWAZI BOVUNGANA                                                                  |
| <b>CONTACT NUMBER</b>                                                                                                                                      | <a href="mailto:NokwaziB@joburg.org.za">NokwaziB@joburg.org.za</a><br>069 197 5660 |
| <b>TO BE DEPOSITED INTO A QUOTATION BOX, AT SAPPI BUILDING (RECEPTION), 48 AMESHOFF STREET BRAAMFONTEIN, JOHANNESBURG (OPP. FOOD LOVERS &amp; DISCHEM)</b> |                                                                                    |

1. Conditions of Quotation, Form A.
2. Specification, Form B
3. RFQ Checklist
4. Form of Quotation and Form of Acceptance, Form C
5. Statement of Authorization, Form D
6. MBD 4: Declaration of Interest, Form E
7. MBD 8: Declaration of Tenderer's past Supply Chain Management Practices, Form F
8. MBD 9: Certificate of Independent Bid Determination, Annexure G
9. Declaration on State of Municipal Account., Form H
10. Article of Agreement in terms of the Occupational Health and Safety act, 1993, Form I
11. MD1 6.1: Preference points claim form in terms of the preferential procurement regulations 2022, Form J

**N.B: TENDERERS ARE REMINDED THAT ALL FORMS ARE TO BE SIGNED OR THE RFQ WILL BE DISQUALIFIED.**

Quotations will be received on the closing dates and times shown and must be enclosed in separate sealed envelopes, bearing the applicable quotation description and reference number as well as the closing time and due date, and must be addressed to the GROUP HEAD: STRATEGIC SUPPLY CHAIN MANAGEMENT, 15<sup>TH</sup> FLOOR METRO CENTRE, 158 CIVIC BOULEVARD STREET, BRAAMFONTEIN, and placed in the quotation box indicated above. Quotations will be opened at the latter address at the time indicated.

SUPPLIER NAME: \_\_\_\_\_

SUPPLIER NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CONTACT PERSON: \_\_\_\_\_

SARS PIN CODE: \_\_\_\_\_

CENTRAL SUPPLIER DATABASE NUMBER: \_\_\_\_\_

**COJ DATABASE NUMBER** \_\_\_\_\_

**COMPULSORY BRIEFING SESSION DETAILS:**

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|                                                                                                                                                            |  |       |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------|--|
| DATE:                                                                                                                                                      |  | TIME: |  |
| VENUE:                                                                                                                                                     |  |       |  |
| <b>NB: IT IS OF UTMOST IMPORTANCE THAT THE TIME SET FOR THE OFFICIAL SITE INSPECTION IS STRICTLY ADHERED TO AS <u>NO LATE ARRIVALS</u> WILL BE ALLOWED</b> |  |       |  |

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**CHECKLIST**  
RFQ NR: COJ0034-25/26 RE-ADVERT

**PLEASE USE THIS CHECKLIST TO VERIFY WHETHER ALL COMPULSORY DOCUMENTS HAVE BEEN ATTACHED TO YOUR QUOTATION.**

| No  | Details                                                                                                                                                                     | ✓ |
|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| 1.  | Certified Copy of Company Registration Document                                                                                                                             |   |
| 2.  | Rates & Taxes Invoice for Company OR Certified Copy of Lease Agreement OR Affidavit from the Lessor Certified by the Commissioner of Oath / SAPS                            |   |
| 3.  | Rates and Taxes Invoice for All the Directors of the Company OR Certified Copy of Lease Agreement OR Affidavit from the Lessor Certified by the Commissioner of Oath / SAPS |   |
| 4.  | Declaration on State of Municipal Account (Attached)                                                                                                                        |   |
| 5.  | MBD 4: Declaration of Interest (Attached)                                                                                                                                   |   |
| 6.  | MD1 6.1: Preference points claim form in terms of the preferential procurement regulations 2022, Form J (Attached)                                                          |   |
| 7.  | MBD 8: Declaration of Tenderer Past SCM Practices, Form F                                                                                                                   |   |
| 8.  | MBD 9: Certificate of Independent Bid Determination. (Attached)                                                                                                             |   |
| 9.  | Conditions of Quotation, Form A                                                                                                                                             |   |
| 10. | Form of Quotation and Form of Acceptance, Form C                                                                                                                            |   |
| 11. | Statement of Authorisation, Form D                                                                                                                                          |   |
| 12. | Article of Agreement in terms of the Occupational Health and Safety Act, Form I                                                                                             |   |
| 13. | Certified Copy of B-BBEE certificate or Sworn Affidavit.                                                                                                                    |   |
| 14. | Original Tax Clearance Certificate or SARS One-Time Pin Code                                                                                                                |   |
| 15. | Training Suppliers to be accredited with SETA (Certified Copy to be attached) (IF REQUIRED)                                                                                 |   |
| 16. | Catering Suppliers to submit a Health Certificate (Certified Copy to be attached) (IF REQUIRED)                                                                             |   |
| 17. | Construction/Building Maintenance to submit CIDB Registration (Certified Copy to be attached) (IF REQUIRED)                                                                 |   |
| 18. | Have all price alterations been signed for?                                                                                                                                 |   |
| 19. | Has the Quotation been signed?                                                                                                                                              |   |

**SIGNATURE** \_\_\_\_\_

**NAME** \_\_\_\_\_

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**CONDITIONS OF QUOTATION:**

- 1 Quotation documents must be completed in black ink.
- 2 The lowest price or any quotation will not necessarily be accepted, and the City of Johannesburg reserves the right to accept the whole or any portion of a quotation.
- 3 Quotations are to remain open for acceptance for a period of thirty (30) days effective from the date on which they are lodged and shall be accepted at any time within the said period of thirty (30) days.
- 4 Tenderers are requested to furnish the full registered name of the tendering company/supplier on the Form of Quotation and Form of Acceptance, Form B.
- 5 Tenderers are also required to sign each page of the Form of Quotation and Form of Acceptance, Form B, in the space provided at the bottom of each page.
- 6 **In the event of a mistake having been made on the price schedule it shall be crossed out in ink and be accompanied by an initial at each and every price alteration. Corrections in terms of price may not be made by means of a correction fluid such as Tipp- Ex or a similar product. If correction fluid has been used on any specific item price, such item will not be considered. No correction fluid may be used in a Bill of Quantities where prices are calculated to arrive at a total amount. If correction fluid has been used, the quotation as a whole will not be considered. The Municipality will reject the quotation if corrections are not made in accordance with the above.**
7. **NO PRICE INCREASES WILL BE CONSIDERED.**
- 8 If items are not quoted for, a line must be drawn through the space in pen.
- 9 All goods or services purchased will be subject to CoJ SCM Policy and Procedures. A copy of said conditions is available on the CoJ website.
- 10 All purchases will be made through an official purchase order form. Therefore, no goods must be delivered or services rendered before an official purchase order has been forwarded to and accepted by the successful bidder.
- 11 To participate in the City's Quotation process for the procurement of goods and/or services, vendors are advised to get accredited and registered on the City's Supplier Database. Supplier registration forms are available from the Supply Chain Management Unit and on the CoJ website. The City will only deal with the registered and accredited suppliers on its Database.
- 12 All prices **must** be quoted in South African currency (SA rand)
- 13 All prices quoted must be exclusive of Value Added Tax (VAT). Suppliers who are not registered for VAT will be treated as Non - VAT Vendors.
- 14 All prices submitted must be firm. "Firm" prices are deemed to be fixed prices, which are only subject to the following statutory changes, namely VAT and any levy related to customs and excise.
- 15 All prices and details must be legible/readable to ensure the quotation will be considered for adjudication.

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- 16 Prices quoted must be all inclusive of delivery charges and goods must be delivered **to the address indicated on the quotation page.**
- 17 The successful company must provide labor for off-loading/delivering.
- 18 Quantities are given in good faith and without commitment to the City of Johannesburg. The City reserves the right to increase or reduce the quantity to be in line with the set threshold for quotations prescribed in the SCM Policy.
- 19 **The CoJ will conduct business with an entity which complies with the Codes of Good Practice on BBBEE as published from time to time by the Minister of Trade and Industry**
- 20 **Quotations must be deposited into the quotation box at the location indicated on the cover page. *THE CITY OF JOHANNESBURG DOES NOT TAKE RESPONSABILITY FOR ANY QUOTATIONS DEPOSITED IN THE WRONG BOX.***
- 21 **FORWARD EXCHANGE RATE COVER**
- In the event of price/prices being based on the exchange rate, the successful tenderer/s will be required to obtain exchange rate cover in order to protect the Municipality against exchange rate variations.  
Proof must be provided that forward Exchange Rate cover has been taken out within 14 days after an order has been placed.  
If proof that cover was taken out within 14 days after the order has been placed, is not submitted to the City of Joburg, with the invoice, the contract price adjustment will not be accepted and the contract may be cancelled.
- 22 **EXECUTION OF ORDERS**
- Tenderers are reminded that orders placed against accepted quotations are to be executed in strict accordance with the accepted specification and within the quoted delivery period. In this regard, the attention of tenderers is drawn in particular to Clause 20 of the Municipality's General Conditions Applicable to the Consideration of Written Quotations (Supply chain Management Policy), which is available on request and/or also available on the Municipality's website, [www.joburg.org.za](http://www.joburg.org.za)
23. **OCCUPATIONAL HEALTH AND SAFETY**
- The successful tenderer will be required to comply with the requirements of the Occupational Health and Safety Act and regulations.
24. **COPYRIGHT/PATENT RIGHTS**
- Copyright in any document produced, and the patent rights or ownership in any plant, machinery, thing, system or process designed, by a consultant/trainer in the course of the consultancy service is vested in the Municipality.
25. **SUPPLIER REGISTRATION**
- Prospective tenderers are required to register as suppliers/service providers on the City of Johannesburg supplier database prior to quoting. The tenderer is required to record the vendor number in the space provided on the cover page of this quotation document.
- 26 The municipality reserves the right, to cancel and re-issue the quotation.

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- 27 A valid Tax Clearance Certificate or the SARS Pin of the Company should be submitted with this quotation document. In cases where the tenderer has not submitted a Tax Clearance Certificate/SARS Pin, the Municipality reserves the right to at any time after the closure of the tender, but before the award of the tender, request from the tenderer to provide the valid Tax Clearance Certificate or a SARS Pin within seven (07) days from date of notification. Bidders should note, that in accordance with legislation, no contract may be awarded to a/an person/entity who/which has failed to submit a Valid Tax Clearance Certificate issued by the South African Revenue Service (SARS), certifying that the taxes of that person/entity are in order, or that suitable arrangements have been made with SARS/SARS pin to enable the City of Johannesburg to verify that the Company is tax compliant.  
Each party to a consortium/joint venture should submit a separate tax clearance certificate or SARS Pins.
- 28 Quotations must be enclosed in separate sealed envelopes, bearing the RFQ Number, closing time and due date.
- 29 **PLEASE NOTE THAT NO PRICE CHANGES WILL BE ALLOWED AFTER THE CLOSING DATE AND TIME OF THE QUOTATION.**
- 30 **FALSE DECLARATION ON MUNICIPAL BIDDING DOCUMENTS FORM (MBD) MAY LEAD TO AUTOMATIC DISQUALIFICATION.**
- 31 **NB! RECOMMENDED BIDDER WILL BE SUBJECTED TO VETTING PROCESS**
- 32 **ALL PAGES MUST BE INITIALED**
- 33 **EVALUATION CRITERIA:**

**VALIDITY OF RFQ: 30 DAYS**

| <b><u>OFFICE USE ONLY:</u></b><br><b><u>PRICE/S TO BE VAT EXCLUSIVE</u></b>                                                                                                                                                                                                                             |                                    |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------|
| RFQ'S above R30 000,00 to a maximum of R750 000,00 VAT Inclusive will be evaluated on the basis of the 80:20-point system as stipulated in the Preferential Procurement Policy Framework Act (Act No. 5 of 2000), Preferential Procurement Regulations, 2022 and SCM practice note: 02/2023 and 01/2024 |                                    |
| Points will be allocated as follows:                                                                                                                                                                                                                                                                    |                                    |
| Points for price:                                                                                                                                                                                                                                                                                       | 80                                 |
| Preferential Goals (Max of 20):                                                                                                                                                                                                                                                                         | 20                                 |
| Preferential Goals                                                                                                                                                                                                                                                                                      | Allocated Points<br>(80/20 system) |
| Business owned by 51% or more <b>Black People</b>                                                                                                                                                                                                                                                       | 5                                  |
| Cooperative which is at least 51% owned by <b>Black people</b>                                                                                                                                                                                                                                          | 5                                  |
| SMMEs (An EME or QSE)                                                                                                                                                                                                                                                                                   | 5                                  |

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|                                                                                                                                                                   |   |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|
| Enterprises located in a specific region within the City of Johannesburg Metropolitan Municipality for work to be done or services to be rendered in that region. | 5 |
|                                                                                                                                                                   |   |

***I HEREWITH CONFIRM THAT I HAVE READ AND UNDERSTOOD THE ABOVEMENTIONED CONDITIONS.***

**SIGNATURE**\_\_\_\_\_

**NAME**\_\_\_\_\_

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## CENTRAL SUPPLIER DATABASE

The Central Supplier Database maintains a database of organisations, institutions and individuals who can provide goods and services to government. The CSD will serve as the single source of key supplier information for organs of state from 01 April 2016 providing consolidated, accurate, up-to-date, complete and verified supplier information to procuring organs of state.

Prospective suppliers interested in pursuing opportunities within the South African government are encouraged to self-register on the Central Supplier Database. This self-registration application represents an expression of interest from the supplier to conduct business with the South African government. Once submitted, your details will be assessed for inclusion on the Central Supplier Database.

**NB: Suppliers are still required to register on the City of Johannesburg Supplier Database or keep up- to- date their registration profiles on the City of Johannesburg Supplier Database.**

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RFQ NR: COJ0034-25/26 RE-ADVERT

**REQUEST FOR QUOTATION FOR SAFETY MANAGEMENT TRAINING COURSE, BASIC LIFE SUPPORT****1. Scope of Work**

The training to be undertaken through practical skills and development sessions. The project aims to train 14 employees for a maximum of 2 weeks.

**Specific Outcome / Deliverables**

The qualifying learner is capable of:

- (a) Swift recognition of life-threatening situations.
- (b) Proficiency in delivering high-quality chest compressions and rescue breaths.
- (c) Mastery in the use of automated external defibrillators (AEDs).
- (d) Effective team dynamics during resuscitation efforts.
- (e) Integration of the latest BLS and FAP guidelines and best practices.
- (f) Demonstrate an understanding of emergency scene management.

The following unit standard is required.

**LGSETA Unit Standard Title:** Basic Life Support and First Aid Procedures

**SAQA ID:** 119567

**Credits:** 5

**NQF Level:** 1

**Responsibilities of the Service Provider.**

- 1.2.1 Day to day monitoring of classes.
- 1.2.2 Ensure and monitor full attendance for all the participants and advise the project coordinator.
- 1.2.3 Facilitate the above learning area at NQF level 1.
- 1.2.4 Provide the Project Coordinator with attendance registers on a daily basis.
- 1.2.5 Provide a project plan for the programme.
- 1.2.6 Provide learning material as follows:
  - 1.Training Manual.
  - 2. Facilitator Guide (PowerPoint Presentation).
  - 3. Provide learner workbook with practical and theoretical activities.

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#### 4. Portfolio of Evidence (PoE) guide

#### 5. Relevant equipment of the BLS and FAP training

- 1.2.7 Learner assessment and statement of results declaring learner competency with certification
- 1.2.8 Facilitate the training programme using the facilitators that are subject matters experts.
- 1.2.9 Evaluation questionnaire (survey by learners).
- 1.2.10 Specify the validity period of the certificate.
- 1.2.11 Provide a closeout report at the end of the project to the Project Manager.

### Basic Life Support and First Aid Procedures

| No of employees | Duration | Employees Per session | Period  | Outcomes: Demonstrate an understanding of emergency scene management SAQA ID: 119567                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------|----------|-----------------------|---------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 14              | 3 days   | Minimum 14            | 2 weeks | <ul style="list-style-type: none"><li>1. Swift recognition of life-threatening situations.</li><li>2. Proficiency in delivering high-quality chest compressions and rescue breaths.</li><li>3. Mastery in the use of automated external defibrillators (AEDs).</li><li>4. Effective team dynamics during resuscitation efforts.</li><li>5. Integration of the latest BLS and FAP guidelines and best practices.</li><li>6. Demonstrate an understanding of emergency scene management.</li></ul> |

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### **Basic Life Support and First Aid Procedures training**

The training is aimed at addressing and equipping the occupational health team with the following skills:

- Swift recognition of life-threatening situations.
- Proficiency in delivering high-quality chest compressions and rescue breaths.
- Mastery in the use of automated external defibrillators (AEDs).
- Effective team dynamics during resuscitation efforts.
- Integration of the latest BLS and First Aid Procedures guidelines and best practices.
- Demonstrate an understanding of emergency scene management.

**The BLS and First Aid Procedures Training service provider must be fully accredited to conduct the training with the following unit standard:**

**LGSETA Unit Standard Title: Basic Life Support**

**SAQA ID: 119567**

**Credits: 5**

**NQF Level: 1**

#### Evaluation Criteria

Proposals will be evaluated in terms of the Preferential Procurement Policy Framework Act using the 80:20 points system of the revised Preferential Procurement Regulations 2022.

Proposals will initially be evaluated in terms of functionality and then in respect of the Preferential Procurement Policy Framework Act using the 80:20 points system. Only Proposers who score **65 points and more** on functionality will be able to proceed to be further evaluated in terms of the price competitiveness.

Further evaluation will be based on the preferential goals 1 and 2

#### **3 Functionality Criteria**

| <b>CRITERIA APPLICABLE</b> | <b>GUIDELINES</b>                                                                                                                                                                                                                                                                                                            | <b>ALLOCATION OF POINTS</b> |
|----------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| <b>Project Plan</b>        | <b>A project plan outlining the process, activities, timeframes, project dependencies and how the service provider will meet the deadline to achieve this project.</b><br><br><b>a) Clear and realistic timeframes, the schedule of activities for implementing the project, cost projections for the project, including</b> | <b>35</b>                   |

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| CRITERIA<br>APPLICABLE | GUIDELINES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | ALLOCATION<br>OF POINTS |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
|                        | <p>milestones and project deliverables, distribution of resources, and clear completion date with project <b>(35)</b></p> <p><b>b)</b> Clear and realistic timeframes, the schedule of activities for implementing the project, cost projections for the project, including milestones and project deliverables, distribution of resources <b>(20)</b></p> <p><b>c)</b> Clear and realistic timeframes, the schedule of activities for implementing the project, cost projections for the project including milestones and project deliverables <b>(15)</b></p> <p><b>d)</b> Clear and realistic timeframes, the schedule of activities for implementing the project <b>(10)</b></p> <p><b>e)</b> Clear and realistic timeframes <b>(5)</b></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                         |
| <b>Experience</b>      | <p><b>Service provider must demonstrate that the project team has the requisite qualification(s), to participate in the Basic Life Support and First Aid procedures training by providing their South African Nursing Council current registration.</b></p> <ul style="list-style-type: none"> <li>• Anyone assessing a learner against this unit standard must be registered as an assessor with the relevant ETQA the relevant ETQA or with an ETQA that has a memorandum of understanding with the relevant ETQA.</li> <li>• Any institution offering learning that will enable achievement of this unit standard must be accredited as a provider through the relevant ETQA the relevant ETQA or with an ETQA that has a memorandum of understanding with the relevant ETQA.</li> <li>• Moderation of assessment will be overseen by the relevant ETQA the relevant ETQA or with an ETQA that has a memorandum of understanding with the relevant ETQA, according to the moderation guidelines in the relevant qualification and the agreed ETQA procedures. Service provider to provide proof of accreditation by the SETA and Resuscitation Council Of South Africa (RCSA).</li> </ul> <p>The service provider to provide proof of unit standard ID. Provide proof of accredited and experienced facilitator.</p> | <b>40</b>               |

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| CRITERIA<br>APPLICABLE | GUIDELINES                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | ALLOCATION<br>OF POINTS |
|------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
|                        | <p>Service provider must demonstrate experience in conducting Training and must be subject matter expert, understand the course.</p> <p>Provide Curriculum Vitae and proof of qualifications (i.e, certified copies):</p> <p><b>Relevant qualification (10 points)</b></p> <p>a) BA Degree or Equivalent to = 4 points</p> <p>b) Honors Degree = 6 points</p> <p>c) Master's degree = 8 points</p> <p>d) PHD =10 points</p> <p><b>Training experience (30 points)</b></p> <p>a) Less than 2 years of experience = 0 points</p> <p>b) Minimum of 2 years of experience = 10 points</p> <p>c) Minimum 3 years of experience = 15 points</p> <p>d) Minimum of 5+ and above years of experience = 30 points</p> |                         |
| b)                     | <p><b><u>Technical and material Resources</u></b></p> <p><b>A sample of a well-developed learning material on Basic Life Support and First Aid Procedures.</b></p> <p>1x Training Manual unit standard.</p> <p>1x Facilitator Guide (PowerPoint Presentation) activities.</p> <p>1x Learner Workbook with activities.</p> <p>1x Learner assessment guide.</p>                                                                                                                                                                                                                                                                                                                                               | 15                      |
| Contactable references | <p><b>Submission of a letter on a company letterhead signed by the organisation of reference from contactable referees:</b></p> <p>Three (3) contactable and signed references with letters on a letterhead.</p> <ul style="list-style-type: none"> <li>3 references = 10 (points)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                               | 10                      |

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| CRITERIA<br>APPLICABLE | GUIDELINES                                                                                                                                           | ALLOCATION<br>OF POINTS |
|------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|
|                        | <ul style="list-style-type: none"> <li>• 2 references = 8 (points)</li> <li>• 1 reference = 4 (points)</li> <li>• 0 reference = 0 (point)</li> </ul> |                         |
| <b>TOTAL</b>           |                                                                                                                                                      | <b>100</b>              |
| <b>Threshold</b>       |                                                                                                                                                      | <b>65</b>               |

| DISQUALIFYING CRITERIA                                                                     |
|--------------------------------------------------------------------------------------------|
| Failure to complete and sign the form of bid in full.                                      |
| Failure to complete the pricing schedule in full.                                          |
| Failure to submit proof of a valid Accreditation with LGSETA and RCSA.                     |
| Failure to attach a signed letter confirming errors or alteration in the pricing schedule. |

#### 4 Contact Information

For any queries kindly contact the following employee directly:

Nokwazi Bovungana

Skills Development

Email: [NokwaziB@joburg.org.za](mailto:NokwaziB@joburg.org.za)

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**FORM C****RFQ NR:** \_\_\_\_\_

FORM B: FORM OF QUOTATION AND FORM OF ACCEPTANCE

Will the quoted price remain firm for a period of 30 days? (YES/NO)

If not: State, the validity period \_\_\_\_\_

Is/Are the price/s quoted subject to the 2,5% settlement discount (YES/NO) \_\_\_\_\_

Is/Are the tender price firm until completion of order/work? (YES/NO)

If not:

- (a) Submit the cost factors which will be taken into account in the event of price increase/decrease, as well as the compilation of the tender price/s, i.e. cost price, transport cost, margin of profit, etc (clause of the Specification and Additional Conditions of Tender, Form A, refers)

|           | %   | INDEX FIGURE AND BASE DATE (EG. SEIFSA TABLE E1 JUNE 1992) |
|-----------|-----|------------------------------------------------------------|
| Material  |     |                                                            |
| Labour    |     |                                                            |
| Transport |     |                                                            |
| Profit    |     |                                                            |
| OTHER     |     |                                                            |
| 1         |     |                                                            |
| 2         |     |                                                            |
| 3         |     |                                                            |
| TOTAL     | 100 |                                                            |

NB. If prices are variable due to fluctuation in the exchange rate, the acceptance of any order will be subject to forward cover taken out by yourselves.

SIGNATURE OF TENDERER.....

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FORM OF QUOTATION AND FORM OF ACCEPTANCE (contd)

Group Head: SSCM City  
of Johannesburg

Sir/Mam,

I/We the undersigned, having examined the specification, hereby offer to supply and deliver the items in accordance therewith, at the following price:

The pricing must be in this format as indicated in the table below:

| No                  | Item                                              | Quantity                                               | Unit Price | Total price |
|---------------------|---------------------------------------------------|--------------------------------------------------------|------------|-------------|
| 1.                  | Basic Life Support and First Aid Programme Course | 3-days per person, per session (Total of 14 employees) |            |             |
| 2.                  | Training Manual                                   | 14                                                     |            |             |
| 3.                  | Facilitator Guide                                 | 1                                                      |            |             |
| 4.                  | Learner Workbook                                  | 14                                                     |            |             |
| 5.                  | Portfolio of Evidence (PoE) guide                 | 14                                                     |            |             |
| 6.                  | Statements of Result.                             | 14 (1 per learner)                                     |            |             |
| 7.                  | Practical Examination                             | End of training                                        |            |             |
| 8.                  | Close Out Report                                  | 1                                                      |            |             |
| Total Excluding Vat |                                                   |                                                        |            | <b>R</b>    |

Is the Company VAT Registered? (YES/NO): \_\_\_\_\_

VAT Number: \_\_\_\_\_

VENDOR NUMBER \_\_\_\_\_

VENDOR SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

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FORM OF QUOTATION AND FORM OF ACCEPTANCE (contd)  
SIGNATURE OF PERSON/S AUTHORISED TO SIGN QUOTATIONS:

| NAME | ID NUMBER | CAPACITY | SIGNATURE |
|------|-----------|----------|-----------|
|      |           |          |           |
|      |           |          |           |
|      |           |          |           |

DATED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 2026.

REGISTERED NAME OF TENDERING COMPANY/SUPPLIER: - (IN BLOCK LETTERS)

\_\_\_\_\_

COMPANY REGISTRATION NUMBER: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

FAX NUMBER:

\_\_\_\_\_

AS WITNESSES:

1 \_\_\_\_\_

(NAME & SURNAME IN BLOCK LETTERS)

2 \_\_\_\_\_

(NAME & SURNAME IN BLOCK LETTERS)

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**STATEMENT OF AUTHORISATION**

IF THE TENDERER IS A COMPANY OR FIRM, STATE ON WHAT AUTHORITY THE UNDERSIGNED HAS THE AUTHORIZATION TO SIGN THE TENDER DOCUMENTS, FOR EXAMPLE: COMPANY'S RESOLUTION OR PROCURATION OR STATUTES OF PARTNERSHIP, ETC.

I/We the undersigned is/are authorized to enter into this contract on behalf of

.....  
.....  
.....  
...

..... by authority of .....

dated ..... a certified copy of which may be attached to this tender.

**SIGNATURE:**

1. \_\_\_\_\_ ID NR \_\_\_\_\_ DATE: \_\_\_\_\_

2 \_\_\_\_\_ ID NR \_\_\_\_\_ DATE: \_\_\_\_\_

**WITNESSES:**

1. \_\_\_\_\_ ID NR \_\_\_\_\_ DATE: \_\_\_\_\_

2 \_\_\_\_\_ ID NR \_\_\_\_\_ DATE: \_\_\_\_\_

**NB:**

**PROOF IS REQUIRED THAT THE COMPANY HAS BEEN REGISTERED AND DOES IN FACT EXIST, AND THAT THE PERSONS WHO HAVE SIGNED THE TENDER DOCUMENT HAVE INDEED BEEN SO AUTHORIZED**

**Initials**

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**MBD 4: DECLARATION OF INTEREST**

1. No bid will be accepted from persons in the service of the state<sup>1</sup>.
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.
3. In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

3.1 Full Name of bidder or his or her representative:.....

3.2 Identity Number: .....

3.3 Position occupied in the Company (director, trustee, shareholder<sup>2</sup>):.....

3.4 Company Registration Number: .....

3.5 Tax Reference Number:.....

3.6 VAT Registration Number: .....

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

3.8 Are you presently in the service of the state? **YES / NO**

3.8.1 If yes, furnish particulars. ....

.....

<sup>1</sup>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.

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

**Initials**

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3.9 Have you been in the service of the state for the past twelve months? ..... **YES / NO**

3.9.1 If yes, furnish particulars.....

.....

3.10 Do you have any 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**

3.10.1 If yes, furnish particulars.

.....  
.....

3.11 Are you, aware of any relationship (family, friend, other) between any other 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**

3.11.1 If yes, furnish particulars

.....  
.....

3.12 Are any of the company's directors, trustees, managers, principle shareholders or stakeholders in service of the state? **YES / NO**

3.12.1 If yes, furnish particulars.

.....  
.....

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

3.13.1 If yes, furnish particulars.

.....  
.....

3.14 Do you or any of the directors, trustees, managers, principle shareholders, or stakeholders of this company have any interest in any other related companies or business whether or not they are bidding for this contract. **YES /**

**NO**

3.14.1 If yes, furnish particulars:

.....  
.....

**Initials**

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

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

.....  
**Signature**

.....  
**Date**

.....  
**Capacity**

.....  
**Name of Bidder**

**Initials**

**MBD 8: DECLARATION OF TENDERER PAST SUPPLY  
CHAIN MANAGEMENT PRACTICES**

1. This Municipal Tender Document must form part of all tenders/quotations invited.
2. It serves as a declaration to be used by Municipalities and Municipal entities in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
3. The tender of any tenderer may be rejected if that tenderer, or any of its directors have:
  - a. abused the Municipality's / Municipal entity'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. willfully 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 tender:**

| Item  | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Yes                             | No                             |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------|
| 4.1   | Is the tenderer any of its directors listed on the National Treasury's database as a company or persons prohibited from doing business with the public sector?<br><b>(Companies for persons who are listed on this database were informed in writing of this restriction by the National Treasury after the <i>audi alteram partem</i> (listen to the other side) rule was applied).</b>                                                                                           | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.1.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 |                                |
| 4.2   | Is the tenderer 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)?<br><b>(To access this Register enter the National Treasury's website, <a href="http://www.treasury.gov.za">www.treasury.gov.za</a>, click on the icon "Register for Tender Defaulters" or submit your written request for a hard copy of the Register to facsimile number (012)3265445)</b> | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.2.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 |                                |
| 4.3   | Was the tenderer or any of its directors convicted by a court of law (including a court of law outside the Republic of South Africa) for fraud or corruption during the past five years?                                                                                                                                                                                                                                                                                           | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.3.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 |                                |

2/...

Initials

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|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------|
|       |                                                                                                                                                                                                                                          |                                 |                                |
| 4.4   | Does the tenderer 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? | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.4.1 | If so, furnish particulars:                                                                                                                                                                                                              |                                 |                                |
| 4.5   | Was any contract between the tenderer and the Municipality / Municipal entity or any other organ of state terminated during the past five years on account of failure to perform on or to 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.**

.....  
**SIGNATURE**

.....  
**DATE**

.....  
**POSITION**

.....  
**NAME OF TENDERER**

**Initials**

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**MBD9: CERTIFICATE OF INDEPENDENT BID DETERMINATION**

- 1 This Municipal Bidding Document (MBD) must form part of all bids<sup>1</sup> invited.
- 2 Section 4 (1) (b) (iii) of the Competition Act No. 89 of 1998, as amended, prohibits an agreement between, or concerted practice by, firms, or a decision by an association of firms, if it is between parties in a horizontal relationship and if it involves collusive bidding (or bid rigging).<sup>2</sup> Collusive bidding is a *pe se* prohibition meaning that it cannot be justified under any grounds.
- 3 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.
- 4 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.
- 5 In order to give effect to the above, the attached Certificate of Bid Determination (MBD 9) must be completed and submitted with the bid:

<sup>1</sup> Includes price quotations, advertised competitive bids, limited bids and proposals.

<sup>2</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.

Initials

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## CERTIFICATE OF INDEPENDENT BID DETERMINATION

I, the undersigned, in submitting the accompanying bid:

\_\_\_\_\_  
(Bid Number and Description)

in response to the invitation for the bid made by:

\_\_\_\_\_  
(Name of Municipality / Municipal Entity)

do hereby make the following statements that I certify to be true and complete in every respect:

I certify, on behalf of: \_\_\_\_\_ that:  
(Name of 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<sup>3</sup> will not be construed as collusive bidding.

Initials

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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.

**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.**

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.

.....  
Signature

.....  
Date

.....  
Position

.....  
Name of Bidder

**Initials**

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**CITY OF JOHANNESBURG  
FINANCE DEPARTMENT: SUPPLY CHAIN MANAGEMENT UNIT**

**DECLARATION ON STATE OF MUNICIPAL ACCOUNTS**

- A Any bid will be rejected if:  
Any municipal rates and taxes or municipal service charges owed by the bidder or any of the directors to the municipality or a municipal entity, or to any other municipality or municipal entity, are in arrears for more than three months.

B Bid Information

1. Name of bidder ..... ii.  
Registration Number .....
- iii. Municipality where business is situated  
.....
- iv. Municipal account number for rates .....
- v. Municipal account number for water and electricity .....
- vi. Names of all directors, their ID numbers and municipal account number.
1. ....
2. ....
3. ....
4. ....
5. ....
6. ....
7. ....

C Documents to be attached.

1. A copy of municipal account mentioned in B (iv) & (v) (Not older than 3 months)  
2. A copy of municipal accounts of all directors mentioned in B(vi) (Not older than 3 months)
3. Proof of directors

***I/We declare that the abovementioned information is true and correct and that the following documents are attached to this form:***

.....  
.....

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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ARTICLE OF AGREEMENT IN TERMS OF THE OCCUPATIONAL SAFETY ACT, 1993  
BETWEEN

**The CITY OF JOHANNESBURG**  
(Hereinafter referred to as the  
"EMPLOYER")

AND

.....  
.....  
.....  
.....

Herein represented by ..... in his/her capacity as .....

duly authorised as per Form D , Attached hereto,(herein after referred to as the (CONTRACTOR")  
WHEREAS the CONTRACTOR is the mandatory of the EMPLOYER as contemplated in an

agreement in respect of .....

.....  
.....(RFQ Description)

RFQ number.....

AND WHEREAS the Occupational Health and Safety act, 1993 (Act 85 of 1993, hereinafter referred to as the "ACT"), imposes certain powers and duties upon the EMPLOYER.

AND WHEREAS the parties have agreed to enter into an agreement in terms of the ACT. NOW THEREFORE the parties agree as follows:

- (a) The CONTRACTOR undertakes to acquaint the appropriate officials and employees of the CONTRACTOR with all relevant provisions of the ACT and the regulations promulgated in terms thereof.
- (b) The CONTRACTOR undertakes that all relevant duties, obligations and prohibitions imposed in terms of the ACT and Regulations will be fully complied with. Provided that should the EMPLOYER prescribe certain arrangements and procedures, that same shall be observed and adhered to by the CONTRACTOR, his officials and employees. The CONTRACTOR shall bear the onus of acquainting himself/herself/itself with such arrangements and procedures.
- (c) The CONTRACTOR hereby accepts sole liability for such due compliance with the relevant duties, obligations, prohibitions, arrangements and procedure, if any, imposed by the ACT and Regulations and the EMPLOYER expressly absolves the EMPLOYER from itself being obliged to comply with any of the aforesaid duties, obligations, prohibitions, arrangements and procedure as the case may be.
- (d) The CONTRACTOR agrees that any duly authorised officials of the EMPLOYER shall be entitled, although not obliged, to take such steps as may be necessary to ensure that the CONTRACTOR has complied with the undertakings as more fully set out in paragraphs (a) and (b) above, which steps may include, but shall not be limited to, the right to inspect any appropriate site or premises occupied by the CONTRACTOR, or to inspect any appropriate records held by the CONTRACTOR or to take such steps it may deem necessary to remedy the default of the CONTRACTOR at the cost of the CONTRACTOR.

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- (e) The CONTRACTOR shall be obliged to report forthwith to the EMPLOYER any investigations, complaint or criminal charge which may arise as a consequence of the provisions of the ACT and Regulations, pursuant to work performed in terms of this agreement, and shall, on written demand, provide full details in writing of such an investigation, complaint or criminal charge as the case may be.

Thus signed at JOHANNESBURG for and on behalf of the EMPLOYER on this the

..... day of .....20.....

AS WITNESSES:

1. ....

2. ....

SIGNATURE .....

NAME AND SURNAME.....

CAPACITY.....

Thus signed at ..... for and on the behalf of the CONTRACTOR on this  
the..... day of.....2023

AS WITNESSES:

1. ....

2. ....

SIGNATURE.....

NAME AND SURNAME.....

CAPACITY.....

**Initials**

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**MBD 6.1: 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

1.2 The applicable preference point system for this tender is the 80/20 preference point system.

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 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.

**Initials**

- 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

- (a) “**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;
- (b) “**price**” means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;
- (c) “**rand value**” means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;
- (d) “**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
- (e) “**the Act**” means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

## 3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

### 6.1. POINTS AWARDED FOR PRICE

#### 6.1.1. THE 80/20 PREFERENCE POINT SYSTEMS

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

**80/20**

$$Ps = 80 \left( 1 - \frac{Pt - Pmin}{Pmin} \right)$$

Where

Ps = Points scored for price of tender under consideration

Pt = Price of tender under consideration

Pmin = Price of lowest acceptable tender

### 6.2. FORMULAE FOR DISPOSAL OR LEASING OF STATE ASSETS AND INCOME

Initials

## GENERATING PROCUREMENT

### 6.2.1. POINTS AWARDED FOR PRICE

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

**80/20**

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

Where

Ps = Points scored for price of tender under consideration

Pt = Price of tender under consideration

Pmax = Price of highest acceptable tender

## 7. POINTS AWARDED FOR SPECIFIC GOALS

7.1. 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:

7.2. 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.**

**Initials**

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| THE SPECIFIC GOALS<br>ALLOCATED POINTS IN TERMS<br>OF THIS TENDER                                                                                                                | MEANS OF<br>VERIFICATION<br>DOCUMENTS<br>REQUIRED                                                                                                            | NUMBER OF<br>POINTS<br>ALLOCATED<br>(80/20<br>SYSTEM) | NUMBER OF<br>POINTS CLAIMED<br>(80/20 SYSTEM)<br>(TO BE<br>COMPLETED BY<br>THE TENDERER) |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------------------|
| <b>GOAL 1: DESIGNATED GROUP</b>                                                                                                                                                  |                                                                                                                                                              |                                                       |                                                                                          |
| Business owned by 51% or more<br><b>Black People</b>                                                                                                                             | CSD Report,<br>Valid BBBEE<br>Certificate /<br>Affidavit Sworn<br>under oath,<br>ID copy of owner/s<br>of the business<br>and<br>Shareholders<br>certificate | <b>5</b>                                              |                                                                                          |
| Cooperative which is at least<br>51% owned by <b>Black people</b>                                                                                                                | CSD, Valid BBBEE<br>Certificate/ affidavit<br>Sworn under oath,<br>and ID copy of<br>owner/s of the<br>business and CIPC<br>registration<br>document         | <b>5</b>                                              |                                                                                          |
| <b>GOAL 2: SPECIFIC GOAL</b>                                                                                                                                                     |                                                                                                                                                              |                                                       |                                                                                          |
| Enterprises located in a specific<br>region within the City of<br>Johannesburg Metropolitan<br>Municipality for work to be done or<br>services to be rendered in that<br>region. | CSD Report and<br>proof of municipal<br>account / letter<br>from the Ward<br>Council confirming<br>the business<br>address.                                  | <b>5</b>                                              |                                                                                          |
| SMMEs (An EME or QSE)                                                                                                                                                            | CSD Report and<br>BBBEE certificate/<br>Affidavit Sworn<br>under oath                                                                                        | <b>5</b>                                              |                                                                                          |

#### DECLARATION WITH REGARD TO COMPANY/FIRM

- 7.3. Name of company / firm .....
- 7.4. Company registration number: .....
- 7.5. TYPE OF COMPANY/ FIRM
- ☐ Partnership/Joint Venture / Consortium
  - ☐ One-person business/sole propriety
  - ☐ Close corporation

Initials

- ☐ Public Company
- ☐ Personal Liability Company
- ☐ (Pty) Limited
- ☐ Non-Profit Company
- ☐ State Owned Company

[TICK APPLICABLE BOX]

7.6. 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:

- a) The information furnished is true and correct;
- b) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- c) In the event of a contract being awarded as a result of points claimed as shown in 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;
- d) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may –
  - (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:** .....

**Initials**