

**SECTION 2.3: MBD 3.1 PRICING SCHEDULE – FIRM PRICES**

MBD 6.1 regulation will be applied at the RFQ stage.

Pricing shall not be applicable for evaluation of this bid. Functionality will be used as a basis to appoint a panel of service provider to follow the quotation process after approval of funding per project.

The implementation of the tender will be as follows:

- a. Once the panel of service providers (5 per services or project) is selected based on the highest functionality score, each bidder on the panel per project will be given an opportunity per project to provide a quotation based on our scope, budget, and criteria.
- b. The Technical Department will determine the scope of works, BOQ and criteria for the quotation that will be provided to the bidders.
- c. Quotations amongst framework contractors invited: Invite quotations from all framework contractors participating in the agreement, receive and evaluate submissions and prepare evaluation report.
- d. Bidder must provide a quotation that is valid for 90 days and must provide the formal quotation within seven (7) days after receipt of request for Quotation (RFQ).
- e. The Municipality will authorize the issuing of the order.
- f. Administer orders in accordance with contract and confirm compliance with requirements.

**A contractor is not permitted to start work until the order is received and is required to complete the work associated with an order before the completion date stated on the order. A site handover meeting will be scheduled with the successful bidder per project after issue of order.**

**NB! Only five (5) Professional Service Providers per Category will be appointed based on a request for quotation (RFQ) basis according to the procurement process under section 2.1.D. Bidders can only bid for up to a maximum of two (2) categories, as indicated on page 8.**

DECLARATION,

I, THE UNDERSIGNED NAME).....  
CERTIFY THAT THE INFORMATION FURNISHED ABOVE IS CORRECT. I ACCEPT THAT THE MUNICIPALITY MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

AUTHORISED SIGNATURE: .....

NAME: .....

CAPACITY: ..... DATE: .....

Initials of Service Provider's Authority: .....