

CHECK LIST FOR ADVERTISED BIDS FOR THE DEPARTMENT OF EMPLOYMENT AND LABOUR:

MMB-2025/NW; KLD-2025/NW; RTB-2025/NW; MFK-2025

CLOSING DATE: 20 JUNE 2025

| NUMBER | DOCUMENT NAME                                                            | CHECKED BY BIDDER<br>(TICK) | CHECKED BY<br>SCM/EVALUATION<br>COMMITTEE |
|--------|--------------------------------------------------------------------------|-----------------------------|-------------------------------------------|
| 1      | SBD 1                                                                    |                             |                                           |
| 2      | SBD 3.3                                                                  |                             |                                           |
| 3      | Own pricing schedule                                                     |                             |                                           |
| 4      | SBD 4                                                                    |                             |                                           |
| 5      | SBD 6.1                                                                  |                             |                                           |
| 6      | CSD REPORT                                                               |                             |                                           |
| 7      | B-BBEE certificate or sworn affidavit                                    |                             |                                           |
| 8      | Certified ID copies of directors not older<br>than six months            |                             |                                           |
| 9      | Company registration documents                                           |                             |                                           |
| 10     | Valid PSIRA Certificates                                                 |                             |                                           |
| 11     | Valid letter of Good standing-COID/letter<br>for tender purpose          |                             |                                           |
| 12     | Proof of liability certificate                                           |                             |                                           |
| 13     | Certified copies of CIPC certificate                                     |                             |                                           |
| 14     | Copy of Administrative Compliance of<br>the BID and returnable documents |                             |                                           |
| 15     | Valid UIF compliance certificate                                         |                             |                                           |
| 16     | Bargaining council membership form                                       |                             |                                           |
|        |                                                                          |                             |                                           |

All forms should be fully completed and signed.

Signature: .....

BIDDER

.....

SCM /EVALUATOR

.....

DATE

.....

DATE

## ADMINISTRATIVE COMPLIANCE OF THE BID AND RETURNABLE DOCUMENTS

- a. The total Bidding price must be written correctly and in full.
- b. Bidders are required to submit original and valid B-BBEE Status Level Verification Certificates or certified copies thereof together with their bids, to substantiate their BBBEE rating claims. The certificate must be SANAS verified or a valid Affidavit as at the date of closure of the bid.
- c. All Standard Bidding Documents forms submitted with the bid must be completed and signed. Failure to do so may invalidate the bid.
- d. Certified ID copies of Company Members and Shareholders, at the point of submission, failure to submit will result in the disqualification of the bidder.
- e. If required as a condition for the bid, the sub-contracting agreement signed by both parties **must** be attached. The agreement **must** clearly state the percentage sub-contracted as per the conditions of the bid.
- f. All company registration documents for the sub-contractor must be submitted
- g. Both the COIDA and UIF certificates must be submitted and be valid at the day of closing.
- h. If required for the bid, valid professional registration certificates must be attached.
- i. Bidders must be registered on the Central Supplier Database (CSD) and provide summary report that has compliant TAX status and valid banking details.
- j. A valid copy of a Tax clearance certificate must be submitted and a valid SARS PIN for verification.
- k. Bidder/s must comply with basic Labour Relations Act/s, E.g. OHS, Basic Conditions of Employment Act and Minimum Wage.
- l. Shortlisted bidders will be subjected to vetting and Inspection on compliance with Labour Law.
- m. No late bids shall be accepted.
- n. Please note that any enquiries must be directed via e-mail or telephone, and they will be responded to within 5 working days
- o. Any proposals received in response to this bid remain the property of the Department of Employment and Labour.
- p. Bids should be held valid for a period of **90 days**.
- q. The Department of Employment and Labour reserves the right to at any given time request additional information for clarification purposes during the evaluation process of this bid.

- r. Due to the unavailability of the tender box, bids will be submitted at Department of Employment and Labour; Supply Chain Management; 2<sup>nd</sup> Floor, Room 213; Provident House; Mmabatho
- s. Emailed and faxed bids will not be accepted.
- t. Site inspections will be conducted by the representatives of the Department on Bidder/s who have proceeded for evaluation: Phase 2 if required for the bid.

**NB: FAILURE TO COMPLY WITH THE ABOVE MAY INVALIDATE YOUR BID**

## PART A INVITATION TO BID

|                                                                                                                                                                                                                     |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF DEPARTMENT/PUBLIC ENTITY)</b>                                                                                                                     |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| BID NUMBER:                                                                                                                                                                                                         | RTB-2025/NW                                                                                      | CLOSING DATE: | 20 JUNE 2025                                                      | CLOSING TIME:                                            | 11:00                                                                                                |
| DESCRIPTION                                                                                                                                                                                                         | REQUEST FOR SECURITY SERVICES FOR A PERIOD OF THIRTY SIX (36) MONTHS AT RUSTENBURG LABOUR CENTRE |               |                                                                   |                                                          |                                                                                                      |
| BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)                                                                                                                                 |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| DEPARTMENT OF EMPLOYMENT AND LABOUR                                                                                                                                                                                 |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| UNIVERSITY DRIVE                                                                                                                                                                                                    |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| SECOND FLOOR, OFFICE 213                                                                                                                                                                                            |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| PROVIDENT HOUSE, MMABATHO                                                                                                                                                                                           |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO                                                                                                                                                                      |                                                                                                  |               | TECHNICAL ENQUIRIES MAY BE DIRECTED TO:                           |                                                          |                                                                                                      |
| CONTACT PERSON                                                                                                                                                                                                      | NKOSAZANA BLAAI                                                                                  |               | CONTACT PERSON                                                    | THABO MAKHOTHI                                           |                                                                                                      |
| TELEPHONE NUMBER                                                                                                                                                                                                    | 018 387 9210 / 066 115 2062                                                                      |               | TELEPHONE NUMBER                                                  | 018 387 8179/082 414 7513                                |                                                                                                      |
| FACSIMILE NUMBER                                                                                                                                                                                                    | N/A                                                                                              |               | FACSIMILE NUMBER                                                  | N/A                                                      |                                                                                                      |
| E-MAIL ADDRESS                                                                                                                                                                                                      | Nkosazana.blaai@labour.gov.za                                                                    |               | E-MAIL ADDRESS                                                    | Thabo.makhothi@labour.gov.za                             |                                                                                                      |
| SUPPLIER INFORMATION                                                                                                                                                                                                |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| NAME OF BIDDER                                                                                                                                                                                                      |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| POSTAL ADDRESS                                                                                                                                                                                                      |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                      |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| TELEPHONE NUMBER                                                                                                                                                                                                    | CODE                                                                                             |               | NUMBER                                                            |                                                          |                                                                                                      |
| CELLPHONE NUMBER                                                                                                                                                                                                    |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| FACSIMILE NUMBER                                                                                                                                                                                                    | CODE                                                                                             |               | NUMBER                                                            |                                                          |                                                                                                      |
| E-MAIL ADDRESS                                                                                                                                                                                                      |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| VAT REGISTRATION NUMBER                                                                                                                                                                                             |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| SUPPLIER COMPLIANCE STATUS                                                                                                                                                                                          | TAX COMPLIANCE SYSTEM PIN:                                                                       |               | OR                                                                | CENTRAL SUPPLIER DATABASE No:                            | MAAA                                                                                                 |
| ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES OFFERED?                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF]               |               | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES OFFERED? |                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES, ANSWER THE QUESTIONNAIRE BELOW] |
| QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS                                                                                                                                                                          |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |
| IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?                                                                                                                                                     |                                                                                                  |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A BRANCH IN THE RSA?                                                                                                                                                                           |                                                                                                  |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?                                                                                                                                                          |                                                                                                  |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?                                                                                                                                                               |                                                                                                  |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?                                                                                                                                                           |                                                                                                  |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| 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 BELOW. |                                                                                                  |               |                                                                   |                                                          |                                                                                                      |

## PART B TERMS AND CONDITIONS FOR BIDDING

|                                       |                                                                                                                                                                                                                                     |
|---------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. BID SUBMISSION:</b>             |                                                                                                                                                                                                                                     |
| 1.1.                                  | BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.                                                                                                             |
| 1.2.                                  | ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED (NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.                                                                                                     |
| 1.3.                                  | THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT. |
| 1.4.                                  | THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).                                                                                                                                          |
| <b>2. TAX COMPLIANCE REQUIREMENTS</b> |                                                                                                                                                                                                                                     |
| 2.1                                   | BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.                                                                                                                                                                          |
| 2.2                                   | BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS.                                                       |
| 2.3                                   | APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE WWW.SARS.GOV.ZA.                                                                                                                  |
| 2.4                                   | BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.                                                                                                                                                            |
| 2.5                                   | IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED; EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.                                                                                      |
| 2.6                                   | WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.                                                                                                   |
| 2.7                                   | NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE."                 |

**NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**

SIGNATURE OF BIDDER:

.....

CAPACITY UNDER WHICH THIS BID IS SIGNED:

(Proof of authority must be submitted e.g. company resolution)

.....

DATE:

.....

## PART A INVITATION TO BID

|                                                                                                                                                                                                                     |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF DEPARTMENT/ PUBLIC ENTITY)</b>                                                                                                                    |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| BID NUMBER:                                                                                                                                                                                                         | MFK-2025/NW                                                                                    | CLOSING DATE: | 20 JUNE 2025                                                      | CLOSING TIME:                                            | 11:00                                                                                                |
| DESCRIPTION                                                                                                                                                                                                         | REQUEST FOR SECURITY SERVICES FOR A PERIOD OF THIRTY SIX (36) MONTHS AT MAFIKENG LABOUR CENTRE |               |                                                                   |                                                          |                                                                                                      |
| BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)                                                                                                                                 |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| DEPARTMENT OF EMPLOYMENT AND LABOUR                                                                                                                                                                                 |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| UNIVERSITY DRIVE                                                                                                                                                                                                    |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| SECOND FLOOR, OFFICE 213                                                                                                                                                                                            |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| PROVIDENT HOUSE, MMABATHO                                                                                                                                                                                           |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO                                                                                                                                                                      |                                                                                                |               | TECHNICAL ENQUIRIES MAY BE DIRECTED TO:                           |                                                          |                                                                                                      |
| CONTACT PERSON                                                                                                                                                                                                      | NKOSAZANA BLAAI                                                                                |               | CONTACT PERSON                                                    | THABO MAKHOTHI                                           |                                                                                                      |
| TELEPHONE NUMBER                                                                                                                                                                                                    | 018 387 9210 / 066 115 2062                                                                    |               | TELEPHONE NUMBER                                                  | 018 387 8179/082 414 7513                                |                                                                                                      |
| FACSIMILE NUMBER                                                                                                                                                                                                    | N/A                                                                                            |               | FACSIMILE NUMBER                                                  | N/A                                                      |                                                                                                      |
| E-MAIL ADDRESS                                                                                                                                                                                                      | Nkosazana.blaai@labour.gov.za                                                                  |               | E-MAIL ADDRESS                                                    | Thabo.makhothi@labour.gov.za                             |                                                                                                      |
| SUPPLIER INFORMATION                                                                                                                                                                                                |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| NAME OF BIDDER                                                                                                                                                                                                      |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| POSTAL ADDRESS                                                                                                                                                                                                      |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                      |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| TELEPHONE NUMBER                                                                                                                                                                                                    | CODE                                                                                           |               | NUMBER                                                            |                                                          |                                                                                                      |
| CELLPHONE NUMBER                                                                                                                                                                                                    |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| FACSIMILE NUMBER                                                                                                                                                                                                    | CODE                                                                                           |               | NUMBER                                                            |                                                          |                                                                                                      |
| E-MAIL ADDRESS                                                                                                                                                                                                      |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| VAT REGISTRATION NUMBER                                                                                                                                                                                             |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| SUPPLIER COMPLIANCE STATUS                                                                                                                                                                                          | TAX COMPLIANCE SYSTEM PIN:                                                                     |               | OR                                                                | CENTRAL SUPPLIER DATABASE No:                            | MAAA                                                                                                 |
| ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES OFFERED?                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF]             |               | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES OFFERED? |                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES, ANSWER THE QUESTIONNAIRE BELOW] |
| QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS                                                                                                                                                                          |                                                                                                |               |                                                                   |                                                          |                                                                                                      |
| IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?                                                                                                                                                     |                                                                                                |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A BRANCH IN THE RSA?                                                                                                                                                                           |                                                                                                |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?                                                                                                                                                          |                                                                                                |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?                                                                                                                                                               |                                                                                                |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?                                                                                                                                                           |                                                                                                |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| 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 BELOW. |                                                                                                |               |                                                                   |                                                          |                                                                                                      |

## PART B

### TERMS AND CONDITIONS FOR BIDDING

|                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. BID SUBMISSION:</b>                                                                                                                                                                                                                |
| 1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.                                                                                                             |
| 1.2. ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED (NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.                                                                                                     |
| 1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT. |
| 1.4. THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).                                                                                                                                          |
| <b>2. TAX COMPLIANCE REQUIREMENTS</b>                                                                                                                                                                                                    |
| 2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.                                                                                                                                                                           |
| 2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS.                                                        |
| 2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE WWW.SARS.GOV.ZA.                                                                                                                   |
| 2.4 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.                                                                                                                                                             |
| 2.5 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED; EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.                                                                                       |
| 2.6 WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.                                                                                                    |
| 2.7 NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE."                  |

**NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**

SIGNATURE OF BIDDER: .....

CAPACITY UNDER WHICH THIS BID IS SIGNED: .....  
(Proof of authority must be submitted e.g. company resolution)

DATE: .....

## PART A INVITATION TO BID

|                                                                                                                                                                                                                     |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|------------------|-------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF DEPARTMENT/ PUBLIC ENTITY)</b>                                                                                                                    |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| BID NUMBER:                                                                                                                                                                                                         | KLD-2025/NW                                                                                      | CLOSING DATE:    | 20 JUNE 2025                                                      | CLOSING TIME:                                            | 11:00                                                                                                |
| DESCRIPTION                                                                                                                                                                                                         | REQUEST FOR SECURITY SERVICES FOR A PERIOD OF THIRTY SIX (36) MONTHS AT KLERKSDORP LABOUR CENTRE |                  |                                                                   |                                                          |                                                                                                      |
| BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)                                                                                                                                 |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| DEPARTMENT OF EMPLOYMENT AND LABOUR                                                                                                                                                                                 |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| UNIVERSITY DRIVE                                                                                                                                                                                                    |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| SECOND FLOOR, OFFICE 213                                                                                                                                                                                            |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| PROVIDENT HOUSE, MMABATHO                                                                                                                                                                                           |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO                                                                                                                                                                      |                                                                                                  |                  | TECHNICAL ENQUIRIES MAY BE DIRECTED TO:                           |                                                          |                                                                                                      |
| CONTACT PERSON                                                                                                                                                                                                      | NKOSAZANA BLAAI                                                                                  | CONTACT PERSON   | THABO MAKHOTHU                                                    |                                                          |                                                                                                      |
| TELEPHONE NUMBER                                                                                                                                                                                                    | 018 387 9210 / 066 115 2062                                                                      | TELEPHONE NUMBER | 018 387 8179/082 414 7513                                         |                                                          |                                                                                                      |
| FACSIMILE NUMBER                                                                                                                                                                                                    | N/A                                                                                              | FACSIMILE NUMBER | N/A                                                               |                                                          |                                                                                                      |
| E-MAIL ADDRESS                                                                                                                                                                                                      | Nkosazana.blaai@labour.gov.za                                                                    | E-MAIL ADDRESS   | Thabo.makhothi@labour.gov.za                                      |                                                          |                                                                                                      |
| SUPPLIER INFORMATION                                                                                                                                                                                                |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| NAME OF BIDDER                                                                                                                                                                                                      |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| POSTAL ADDRESS                                                                                                                                                                                                      |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| STREET ADDRESS                                                                                                                                                                                                      |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| TELEPHONE NUMBER                                                                                                                                                                                                    | CODE                                                                                             |                  | NUMBER                                                            |                                                          |                                                                                                      |
| CELLPHONE NUMBER                                                                                                                                                                                                    |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| FACSIMILE NUMBER                                                                                                                                                                                                    | CODE                                                                                             |                  | NUMBER                                                            |                                                          |                                                                                                      |
| E-MAIL ADDRESS                                                                                                                                                                                                      |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| VAT REGISTRATION NUMBER                                                                                                                                                                                             |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| SUPPLIER COMPLIANCE STATUS                                                                                                                                                                                          | TAX COMPLIANCE SYSTEM PIN:                                                                       |                  | OR                                                                | CENTRAL SUPPLIER DATABASE No:                            | MAAA                                                                                                 |
| ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES OFFERED?                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF]               |                  | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES OFFERED? |                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES, ANSWER THE QUESTIONNAIRE BELOW] |
| QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS                                                                                                                                                                          |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |
| IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?                                                                                                                                                     |                                                                                                  |                  |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A BRANCH IN THE RSA?                                                                                                                                                                           |                                                                                                  |                  |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?                                                                                                                                                          |                                                                                                  |                  |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?                                                                                                                                                               |                                                                                                  |                  |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?                                                                                                                                                           |                                                                                                  |                  |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| 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 BELOW. |                                                                                                  |                  |                                                                   |                                                          |                                                                                                      |

## PART B TERMS AND CONDITIONS FOR BIDDING

|                                                                                                                                                                                                                                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. BID SUBMISSION:</b>                                                                                                                                                                                                                |
| 1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.                                                                                                             |
| 1.2. ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED (NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.                                                                                                     |
| 1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT. |
| 1.4. THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).                                                                                                                                          |
| <b>2. TAX COMPLIANCE REQUIREMENTS</b>                                                                                                                                                                                                    |
| 2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.                                                                                                                                                                           |
| 2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS.                                                        |
| 2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE WWW.SARS.GOV.ZA.                                                                                                                   |
| 2.4 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.                                                                                                                                                             |
| 2.5 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED; EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.                                                                                       |
| 2.6 WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.                                                                                                    |
| 2.7 NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE."                  |

**NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**

SIGNATURE OF BIDDER:

.....

CAPACITY UNDER WHICH THIS BID IS SIGNED:

(Proof of authority must be submitted e.g. company resolution)

.....

DATE:

.....

## PART A INVITATION TO BID

|                                                                                                                                                                                                                     |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|---------------|-------------------------------------------------------------------|----------------------------------------------------------|------------------------------------------------------------------------------------------------------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF DEPARTMENT/ PUBLIC ENTITY)</b>                                                                                                                    |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| BID NUMBER:                                                                                                                                                                                                         | MMB-2025/NW                                                                                        | CLOSING DATE: | 20 JUNE 2025                                                      | CLOSING TIME:                                            | 11:00                                                                                                |
| DESCRIPTION                                                                                                                                                                                                         | REQUEST FOR SECURITY SERVICES FOR A PERIOD OF THIRTY SIX (36) MONTHS AT MMABATHO PROVINCIAL OFFICE |               |                                                                   |                                                          |                                                                                                      |
| BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)                                                                                                                                 |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| DEPARTMENT OF EMPLOYMENT AND LABOUR                                                                                                                                                                                 |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| UNIVERSITY DRIVE                                                                                                                                                                                                    |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| SECOND FLOOR, OFFICE 213                                                                                                                                                                                            |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| PROVIDENT HOUSE, MMABATHO                                                                                                                                                                                           |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO                                                                                                                                                                      |                                                                                                    |               | TECHNICAL ENQUIRIES MAY BE DIRECTED TO:                           |                                                          |                                                                                                      |
| CONTACT PERSON                                                                                                                                                                                                      | NKOSAZANA BLAAI                                                                                    |               | CONTACT PERSON                                                    | THABO MAKHOTHU                                           |                                                                                                      |
| TELEPHONE NUMBER                                                                                                                                                                                                    | 018 387 9210 / 066 115 2062                                                                        |               | TELEPHONE NUMBER                                                  | 018 387 8179/082 414 7513                                |                                                                                                      |
| FACSIMILE NUMBER                                                                                                                                                                                                    | N/A                                                                                                |               | FACSIMILE NUMBER                                                  | N/A                                                      |                                                                                                      |
| E-MAIL ADDRESS                                                                                                                                                                                                      | Nkosazana.blaai@labour.gov.za                                                                      |               | E-MAIL ADDRESS                                                    | Thabo.makhothi@labour.gov.za                             |                                                                                                      |
| <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                                                                                                                                                                                             |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| SUPPLIER COMPLIANCE STATUS                                                                                                                                                                                          | TAX COMPLIANCE SYSTEM PIN:                                                                         |               | OR                                                                | CENTRAL SUPPLIER DATABASE No:                            | MAAA                                                                                                 |
| ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES OFFERED?                                                                                                                              | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF]                 |               | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES OFFERED? |                                                          | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES, ANSWER THE QUESTIONNAIRE BELOW] |
| <b>QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS</b>                                                                                                                                                                   |                                                                                                    |               |                                                                   |                                                          |                                                                                                      |
| IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?                                                                                                                                                     |                                                                                                    |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A BRANCH IN THE RSA?                                                                                                                                                                           |                                                                                                    |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?                                                                                                                                                          |                                                                                                    |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?                                                                                                                                                               |                                                                                                    |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
| IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?                                                                                                                                                           |                                                                                                    |               |                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |                                                                                                      |
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