



PROVINCIAL SHARED SERVICE CENTRE: MPUMALANGA  
DIRECTORATE: FINANCE AND SUPPLY CHAIN MANAGEMENT SERVICES  
Private Bag X11305, Nelspruit, 1200; 17 van Rensburg Street, Nelspruit, 1200; Tel: 013 - 754 8000; Website: [www.dlrrd.gov.za](http://www.dlrrd.gov.za)

## ADDENDUM 1

**APPOINTMENT OF A SERVICE PROVIDER TO RENDER CLEANING AND HYGIENE SERVICES FOR THE REGIONAL SHARED SERVICE CENTRE: EHLANZENI FOR A PERIOD OF 36 MONTHS.**

**BID NUMBER: DLRRD-MP0003(2026/2027)**

## ADDENDUM NO. 1

**This Addendum consists of the following amendment to the Bid Document:**

### 1. Amendment to the Pricing Schedule – Table A Cleaners and supervisor wage costs (With reference to page 25 of page 60).

The Pricing Schedule has been amended as follows:

#### Previous Wording:

Total number required for;

Cleaners- 08

Supervisors- 02

#### Replaced With:

**TABLE A: CLEANERS AND SUPERVISOR WAGE COSTS (AS PER THE TERMS OF REFERENCE)**

| DESCRIPTION           | TOTAL NUMBER REQUIRED | MONTHLY COST (AS PER THE ABOVE CALCULATION) | CONTRACT PERIOD | TOTAL COST FOR THE CONTRACT |
|-----------------------|-----------------------|---------------------------------------------|-----------------|-----------------------------|
| CLEANERS              | 05                    | R                                           | 36 MONTHS       | R                           |
| SUPERVISOR            | 01                    | R                                           | 36 MONTHS       | R                           |
| <b>SUB-TOTAL</b>      |                       |                                             |                 | <b>R</b>                    |
| VALUE ADDED TAX (VAT) |                       |                                             |                 | R                           |
| <b>TOTAL COST</b>     |                       |                                             |                 | <b>R</b>                    |





## ADDENDUM 1

This addendum forms part of the tender documents

Each Tenderer/Bidder for this contract shall incorporate the following amendments and additions in his tender.

Each Tenderer/Bidder is required to acknowledge receipt and acceptance of the amendments and additions contained in this addendum to submit the completed and signed addendum with his tenderer.

### FORM FOR RECEIPT OF ADDENDUM NO 1

This form for the receipt of Addendum No 1 must be completed by the Tenderer and returned with the tender document

Department of Land Reform and Rural Development **(Bid Box)**  
6th Floor, 17 Van Rensburg Street  
Bateleur Building  
Nelspruit  
1200  
**Tel: (013) 754 8066/8000**

### DEPARTMENT OF LAND REFORM AND RURAL DEVELOPMENT

**BID NUMBER: DLRRD-MP0003(2026/2027) APPOINTMENT OF A SERVICE PROVIDER TO  
RENDER CLEANING AND HYGIENE SERVICES FOR THE REGIONAL SHARED SERVICE  
CENTRE: EHLANZENI FOR A PERIOD OF 36 MONTHS.**

I/We acknowledge receipt of Addendum No 1 forms part of the tender documents

I/We confirm that I/We

- a) Have noted the contents of this addendum
- b) Have fully considered this addendum
- c) Have fully incorporated the amendments and additions contained in this addendum in my/our Bid/Tender for **BID NUMBER: DLRRD-MP0003(2026/2027)**

Signed on behalf of Tenderer: :

Name of Signatory :

Name and Address of Tenderer :

Tenderer Tel No :

Fax No :





# land reform & rural development

Department:  
Land Reform and Rural Development  
REPUBLIC OF SOUTH AFRICA



Date : .....

Signature of Witness : 1.....

2.....

Name of Witness : 1.....

2.....

Date : .....

**NB: TENDER SHALL BE DEEMED NON-RESPONSIVE IF THE TENDERER FAILS TO COMPLETE AND  
SUBMIT ADDENDUM WITH THE TENDER DOCUMENT.**

## Issued by:

*Supply Chain Management*

*Department of Land Reform and Rural Development*

*Date: 19 August 2026*



**PRICING SCHEDULE FOR THE APPOINTMENT OF A SERVICE PROVIDER TO RENDER CLEANING AND HYGIENE SERVICES FOR THE REGIONAL SHARED SERVICE CENTRE: EHLANZENI FOR A PERIOD OF 36 MONTHS.**

**PRICING SCHEDULE**

**SBD 3.3**

**NAME OF BIDDER.:**  
.....

**BID NO.: DLRRD-MP0003(2026/2027)**

**CLOSING TIME.: 11:00 AM**

**CLOSING DATE.: 04 SEPTEMBER 2026**

(Professional Services)

**OFFER TO BE VALID FOR 90 DAYS FROM THE CLOSING DATE OF BID.**

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

TOTAL BID PRICE: R.....

**THE APPOINTMENT OF A SERVICE PROVIDER TO RENDER CLEANING AND HYGIENE SERVICES FOR THE REGIONAL SHARED SERVICE CENTRE: EHLANZENI FOR A PERIOD OF 36 MONTHS.**

1. The services outlines in the attached terms of reference must consider when formulating the prices for this bid.
2. Cleaners and Supervisor Wages must be inclusive if all hidden costs and /or benefits i.e. UIF Contributions, Bonus Provision, COIDA Contribution, Skills Development Levy Contributions and Provident Fund Contribution.
3. All Cleaning Equipment, Hygiene Dispensers, Consumables and Detergents must be provided by the Bidder.
4. Price must be fixed and firm for the duration of the Contract: Only the cleaners and Supervisor Wage Increment based on Department of Employment and Labour Sectoral Wage Determination will be considered.

**CLEANERS WAGE CALCULATION**

| ITEM NO.  | DESCRIPTION                                                                                                                                                    | COST PER CLEANER |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
|           | Hourly Rate (Must not be less than the Minimum Rate prescribed by the Department of Employment and Labour, Sectoral Determination 1: Contract Cleaning Sector) | R                |
|           | Daily Wage (8 Hours Per Day)                                                                                                                                   | R                |
|           | Weekly Wage (5 Days Per Week)                                                                                                                                  | R                |
| <b>1.</b> | <b>Basic Monthly Wage (4.333 Weeks Per Month)</b>                                                                                                              | <b>R</b>         |
|           | <b>ADDITIONAL COSTS AND BENEFITS</b>                                                                                                                           |                  |
| 2.        | Monthly Provision for Annual Leave at a Rate of 1.25 Days Per Month                                                                                            | R                |
| 3.        | Monthly Provision for Sick Leave at a Rate of 1 Day Per Month                                                                                                  | R                |
| 4.        | Provision for Family Responsibility Leave at a Rate of 0.82% (3/365) Per Month                                                                                 | R                |
| 5.        | Monthly Contribution for Provident Fund (5.25% of Basic Monthly Wage)                                                                                          | R                |
| 6.        | Bonus (Provision at a Rate of Basic Monthly Wage Divided by 12)                                                                                                | R                |

|                                                                 |                                                                      |          |
|-----------------------------------------------------------------|----------------------------------------------------------------------|----------|
| 7.                                                              | UIF (1% of Basic Monthly Wage)                                       | R        |
| 8.                                                              | Skills Development Levy (1% of Basic Monthly Wage)                   | R        |
| 9.                                                              | Personal Protective Clothing (Uniform, etc.) - Monthly Rate          | R        |
| 10.                                                             | Other Provisions at a Monthly Rate (e.g., COIDA, Maternity, etc....) | R        |
| <b>TOTAL MONTHLY WAGE PER CLEANER (SUM OF ITEMS NO. 1 – 10)</b> |                                                                      | <b>R</b> |

#### SUPERVISOR WAGE CALCULATION

| ITEM NO.                                                           | DESCRIPTION                                                                                                                                                    | COST PER SUPERVISOR |
|--------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|
|                                                                    | Hourly Rate (Must not be less than the Minimum Rate prescribed by the Department of Employment and Labour, Sectoral Determination 1: Contract Cleaning Sector) | R                   |
|                                                                    | Daily Wage (8 Hours Per Day)                                                                                                                                   | R                   |
|                                                                    | Weekly Wage (5 Days Per Week)                                                                                                                                  | R                   |
| <b>1.</b>                                                          | <b>Basic Monthly Wage (4.333 Weeks Per Month)</b>                                                                                                              | <b>R</b>            |
|                                                                    | <b>ADDITIONAL COSTS AND BENEFITS</b>                                                                                                                           |                     |
| 2.                                                                 | Monthly Provision for Annual Leave at a Rate of 1.25 Days Per Month                                                                                            | R                   |
| 3.                                                                 | Monthly Provision for Sick Leave at a Rate of 1 Day Per Month                                                                                                  | R                   |
| 4.                                                                 | Provision for Family Responsibility Leave at a Rate of 0.82% (3/365) Per Month                                                                                 | R                   |
| 5.                                                                 | Monthly Contribution for Provident Fund (5.25% of Basic Monthly Wage)                                                                                          | R                   |
| 6.                                                                 | Bonus (Provision at a Rate of Basic Monthly Wage Divided by 12)                                                                                                | R                   |
| 7.                                                                 | UIF (1% of Basic Monthly Wage)                                                                                                                                 | R                   |
| 8.                                                                 | Skills Development Levy (1% of Basic Monthly Wage)                                                                                                             | R                   |
| 9.                                                                 | Personal Protective Clothing (Uniform, etc.) - Monthly Rate                                                                                                    | R                   |
| 10.                                                                | Other Provisions at a Monthly Rate (e.g., COIDA, Maternity, etc....)                                                                                           | R                   |
| <b>TOTAL MONTHLY WAGE PER SUPERVISOR (SUM OF ITEMS NO. 1 – 10)</b> |                                                                                                                                                                | <b>R</b>            |

**TABLE A: CLEANERS AND SUPERVISOR WAGE COSTS (AS PER THE TERMS OF REFERENCE)**

| DESCRIPTION           | TOTAL NUMBER REQUIRED | MONTHLY COST (AS PER THE ABOVE CALCULATION) | CONTRACT PERIOD | TOTAL COST FOR THE CONTRACT |
|-----------------------|-----------------------|---------------------------------------------|-----------------|-----------------------------|
| CLEANERS              | 05                    | R                                           | 36 MONTHS       | R                           |
| SUPERVISOR            | 01                    | R                                           | 36 MONTHS       | R                           |
| <b>SUB-TOTAL</b>      |                       |                                             |                 | <b>R</b>                    |
| VALUE ADDED TAX (VAT) |                       |                                             |                 | R                           |
| <b>TOTAL COST</b>     |                       |                                             |                 | <b>R</b>                    |

**TABLE B: CLEANING AND HYGIENE EQUIPMENT COSTS (TOTAL COSTS SHOULD INCLUDE ALL ITEMS UNDER THE TERMS OF REFERENCE)**

| DESCRIPTION                 | MONTHLY COST | CONTRACT PERIOD | TOTAL COST FOR THE CONTRACT |
|-----------------------------|--------------|-----------------|-----------------------------|
| ONCE-OFF INSTALLATION       | ONCE-OFF     | ONCE-OFF        | R                           |
| LEASE OF CLEANING EQUIPMENT | R            | 36 MONTHS       | R                           |
| LEASE OF HYGIENE EQUIPMENT  | R            | 36 MONTHS       | R                           |
| <b>SUB-TOTAL</b>            |              |                 | <b>R</b>                    |
| VALUE ADDED TAX (VAT)       |              |                 | R                           |
| <b>TOTAL COST</b>           |              |                 | <b>R</b>                    |

**TABLE C: CLEANING AND HYGIENE CONSUMABLES COSTS (TOTAL COSTS SHOULD INCLUDE ALL ITEMS INDICATED IN THE TERMS OF REFERENCE UNDER HYGIENE AND TASK DESCRIPTIONS)**

| DESCRIPTION                    | MONTHLY COST | CONTRACT PERIOD | TOTAL COST FOR THE CONTRACT |
|--------------------------------|--------------|-----------------|-----------------------------|
| SUPPLY OF CLEANING CONSUMABLES | R            | 36 MONTHS       | R                           |
| SUPPLY OF HYGIENE CONSUMABLES  | R            | 36 MONTHS       | R                           |
| <b>SUB-TOTAL</b>               |              |                 | <b>R</b>                    |
| VALUE ADDED TAX (VAT)          |              |                 | R                           |
| <b>TOTAL COST</b>              |              |                 | <b>R</b>                    |

**TABLE D: OTHER COSTS**

| DESCRIPTION                                                                                                                                 | MONTHLY/<br>QUARTERLY<br>COST | CONTRACT<br>PERIOD | TOTAL COST FOR THE<br>CONTRACT |
|---------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|--------------------|--------------------------------|
| OPERATIONAL AND SERVICES COST NOT CATERED FOR ABOVE - Please Specify Below, e.g., Cleaning and hygiene services and, Operational Costs etc. |                               |                    |                                |
| D.1.                                                                                                                                        | R                             | 36 MONTHS          | R                              |
| D.2.                                                                                                                                        | R                             | 36 MONTHS          | R                              |
| D.3.                                                                                                                                        | R                             | 36 MONTHS          | R                              |
| <b>SUB-TOTAL</b>                                                                                                                            |                               |                    | <b>R</b>                       |
| VALUE ADDED TAX (VAT)                                                                                                                       |                               |                    | R                              |
| <b>TOTAL COST</b>                                                                                                                           |                               |                    | <b>R</b>                       |

**SUMMARY OF COSTS**

| DESCRIPTION                                                  |                                        | TOTAL COST FOR THE CONTRACT |
|--------------------------------------------------------------|----------------------------------------|-----------------------------|
| TABLE A                                                      | CLEANERS AND SUPERVISOR WAGE COSTS     | R                           |
| TABLE B                                                      | CLEANING AND HYGIENE EQUIPMENT COSTS   | R                           |
| TABLE C                                                      | CLEANING AND HYGIENE CONSUMABLES COSTS | R                           |
| TABLE D                                                      | OTHER COSTS                            | R                           |
| GRAND TOTAL (TOTAL BID PRICE INCLUDING ALL APPLICABLE TAXES) |                                        | R                           |

1. Period required for commencement with project after acceptance of bid.....

Bid Initials .....  
Bid's Signature.....  
Date:.....