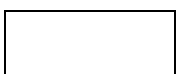


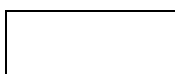
C1.2 CONTRACT DATA

DATA PROVIDED BY THE EMPLOYER

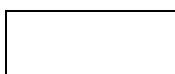
	Data
1	<p>The Name of the Employer is Thembisile Hani Local Municipality</p> <p>The address of the Employer is: Stand no. 24, Opposite Police Station Kwaggafontein C Mpumalanga 0458</p> <p>Private Bag X4041 Kwaggafontein C Mpumalanga 0458</p> <p>Telephone: 013 986 9100 Facsimile: 013 986 0995</p>
2	The project is for the provision, installation and maintenance of security systems to THLM for a period of 36 months.
3	The Period of Performance is as per the letter of appointment and the SLA.
4	The Service Provider may not release public or media statements or publish material related to the Services or Project without the written approval of the Employer.
5	APPOINTMENT OF A SERVICE PROVIDER FOR THE PROVISION, INSTALLATION, AND MAINTENANCE OF SECURITY SYSTEMS TO THLM FOR A PERIOD OF 36 MONTHS.
6	The client shall not be responsible for any overtime worked or overtime payments made to the personnel of the Service Provider.
7	Copyright of documents prepared for the project shall be vested with the Thembisile Hani Local Municipality
8	Settlement of dispute is to be in terms of the Supply Chain Management Policy of the Thembisile Hani Local Municipality, not excluding the provisions provided for in terms of rules / laws governing dispute resolution and employing services of the courts to remedy any dispute that may arise.
9	Service Providers will be paid in accordance with the Thembisile Hani Local Municipality Supply Chain Management Policy.
10	A Service Provider may not subcontract any work not approved by the employer the Thembisile Hani Local Municipality



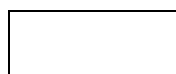
Tenderer



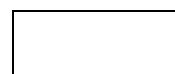
Witness 1



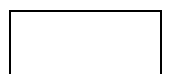
Witness 2



Employer



Witness 1



Witness 2

PART 1: DATA PROVIDED BY THE SERVICE PROVIDER

1.	The Service Provider is Address: Telephone: Facsimile:																		
2	The authorised and designated representative of the Service Provider is: Name: The address for receipt of communications is: Telephone: Facsimile: Address:																		
3	The Key Persons and their jobs / functions in relation to the services are: <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="width: 10%;">No</th> <th style="width: 50%;">Name</th> <th style="width: 40%;">Specific Duties</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>	No	Name	Specific Duties															
No	Name	Specific Duties																	

Tenderer

Witness 1

Witness 2

Employer

Witness 1

Witness 2