

**MAKHUDUTHAMAGA LOCALMUNICIPALITY**

**LIM473/FORMALISATION/24/25/11**

**FORMALISATION OF MARISHANE GARDENS**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | **ISSUED BY:** | | |  |  | **PREPARED BY:** | |
|  | Supply Chain Management Unit | | |  |  | Budget & Treasury Department | |
|  | Mr KJ Mothapo | |  |  |  | Mr C Mathabathe |  |
|  | Manager SCM | | |  |  | Acting Chief Financial Officer | |
|  | Private Bag X 434 | | |  |  | Private Bag X 434 | |
|  | Jane Furse | | |  |  | Jane Furse | |
| 1085 | |  |  |  | 1085 | |  |
|  | Tel: 013 265 8607 | | |  |  | Tel: 013 265 8625 | |
|  | Email:khalabom@makhuduthamaga.gov.za | | |  |  | Email:Mathabathec@makhuduthamaga.gov.za | |
|  |  | | |  |  | |  |
|  | **NAME OF BIDDER** | | |  | **:** | |  |
|  |  | | |  |  | |  |
|  | **TENDER AMOUNT** | | |  | **:** | |  |
|  | **TEL NUMBER** | | |  | **:** | |  |
|  | **FAX NUMBER** | | |  | **:** | |  |
|  | **EMAIL ADDRESS** | | |  | **:** | |  |

1



**Contents**

**The Bid**

|  |  |  |
| --- | --- | --- |
| **Part 1: Bidding Procedures** | | **Page** |
| 1.1 | Bid Notice and Invitation to Bid | 03 |
| **Part 2: Returnable Documents** | |  |
| 2.1 | procedure for Evaluation | 05 |
| 2.2 | List of Returnable Documents | 07 |
| **Part 3: Agreement and Contract Data** | |  |
| 3.1 | Form of Offer and Acceptance | 17 |

|  |  |  |
| --- | --- | --- |
| **Part 4: Pricing Data** |  |  |
| 4.1 | Pricing Instructions | 19 |
| 4.2 | Scope of work | 19 |
| **Part 5: Declaration** |  | 20 |
| **Part 6: MBD9** |  | 25 |

**2**

**MAKHUDUTHAMAGA LOCAL MUNICIPALITY**

**Bid Notice and Invitation to Bid**

Bidders are hereby invited to bid for the following project:

|  |  |  |  |
| --- | --- | --- | --- |
| **No.** | **Project Number** | **Project Description.** | **Closing Date.** |
| 01 | LIM473/INFORMAL-SECTOR STRATEGY/24/25/09 | Informal Sector Strategy | 03 September 2024 |
| 02 | LIM473/LANDUSE//24/25/10 | Comprehensive Land Use Audit | 03 September 2024 |
| 03 | LIM473/FORMALISATION/24/25/11 | Formalisation Of Marishane Gardens | 03 September 2024 |

The employer is Makhuduthamaga Local Municipality represented by the Municipal Manager.

Bid documents will be obtainable from Makhuduthamaga Local Municipal offices from **20th August 2024 (Mon-Fri from 08:00-16:30)** from the cashiers; at a non-refundable deposit of **R560.00** payable in cash or bank-guaranteed cheque. Bid documents can also be downloaded from an online service **(www.etender.gov.za)** at **no cost.**

Completed and signed tender documents must be sealed in an envelope and marked with the relevant project number and project description and be deposited in the tender box at Makhuduthamaga Local Municipality Offices in Jane Furse before the closing date and time.

The municipality shall evaluate bids in accordance with the Preferential Procurement Policy Framework Act. 5/2000 and revised procurement regulation with effect 16 January 2023 read with amended regulation 14 December 2023 and on 100 points functionality and **80/20 points system where 80 points are for the price and 20 points for municipal specific goals** (according to the said legislation).

The lowest tender will not necessarily be accepted and the municipality reserves the right not to consider any tender not fully completed. Tenderers are required to initial each page of the tender document and sign where necessary.

For enquiries contact:

**Supply Chain Unit : Mr Mothapo K.J - 013 265 8607**

**Economic Development & Planning : Ms Tong K.T- 013 265 8614/13**

**Mr MOGANEDI RM**

**MUNICIPAL MANAGER**

**PRIVATE BAG X 434**

Bid offers will only be accepted if the bidder is free of any common conflict of interest with the Makhuduthamaga Local Municipality.

|  |  |  |
| --- | --- | --- |
| **Part** | **Bid Data** | |
| **Number** |  |  |
| 1.2.1. | The employer is **MAKHUDUTHAMAGA** **LOCAL MUNICIPALITY** | |
| 1.2.2 | The bid documents issued by the employer comprise: | |
|  | 1.1 | Bid notice and invitation to bid |
|  | 1.2 | Bid data |
|  | 2.1 | List of returnable documents |
|  | **Part 1: Agreements and contracts data** | |
|  | C1.1 | Form of offer and acceptance |
|  | **Part 2: Pricing data** | |
|  | C2.1 | Pricing instructions |
|  | C2.2 | Specification |
| 1.2.3 The employer’s agent is: Municipal manager | | |
| Tel: | (013) | 265 8600 |
| Fax: | (013) | 265 1975 |

1.2.4 Only Bidders who are registered with central supplier database (CSD) will be considered.

1.2.5 The arrangements for a compulsory clarification meeting are as stated in the Bid Notice and Invitation to Bid where applicable.

1.2.6 If a bidder wishes to submit an alternative bid offer, the only criteria permitted for such alternative bid offer is that it demonstrably enables the Employer’s objectives for the services as stated in the Scope of Work to be achieved.

1.2.7 All parts of each bid offer communicated on paper shall be submitted as the original.

1.2.8 The employer’s address for delivery of bid offers and identification details to be shown on each bid offer package is:

**BID BOX (TENDER BOX)**

**MAKHUDUTHAMAGALOCALMUNICIPALITY**

**GROBLERSDAL ROAD**

**JANE FURSE**

**4**

1.2.9 The closing time for submission of bid offers is as stated in the Bid Notice and Invitation to Bid.

1.2.10 Telephonic, telegraphic, telex, facsimile or e-mailed bid offers will not be accepted.

1.2.11 The bid offer validity period is ninety (90) days.

1.2.12 The bidder is required to submit with his/her bid all required documents as listed in the list of returnable documents as part of the eligibility criteria.

1.2.13 The Bid/Proposal will be opened immediately after the closing time for bids only to confirm the bidder, at:

**MAKHUDUTHAMAGALOCALMUNICIPALITY**

**GROBLERSDAL ROAD**

**JANE FURSE**

1.2.14 **The procedure for the evaluation of responsive bids will be on 100 points for functionality** **and 80/20 points system, where 80 points are for price and 20 points are for Municipal Specific goals**

1.2.15 Bid offers will only be accepted if:

1.2.15.1 The bidder or any of its directors is not listed on the Register of Bid Defaulters in terms of the Prevention and Combating of Corrupt Activities Act of 2004 as a person prohibited from doing business with the public sector;

1.2.15.2 The bidder has not:

* abused the Employer’s Supply Chain Management System; or
* failed to perform on any previous contract and has been given a written notice to this effect;

1.2.15.3 The bidder has completed the Compulsory Enterprise questionnaire and there are no conflicts of interest which may impact on the bidder’s ability to perform the contract in the best interests of the employer or potentially compromise the bid process; and

1.2.15.3 The bidder or any of its directors is not employed by the state.

**5**

**FUNCTIONALITY**

The quality criteria and maximum score in respect of each of the criteria are as follows:

|  |  |  |
| --- | --- | --- |
| **Quality Criteria** | **Sub-Criteria** | **Weighting** |
| Organization and staffing | Curriculum vitae and qualifications | 15 |
| Experience and qualifications of the project leader (assigned personnel) in relation to the scope of work | Curriculum vitae | 20 |
| Qualifications | 25 |
| Company Experience | -Appointment letters and completion | 40 |
| **Maximum possible score for quality (Ms)** |  | **100 points** |

**1. Organization & Staffing (15)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item** | **Organisational structure** | **Points allocations** | **Tick the applicable one** | **Points by the municipality** |
| 1. | No organizational Structure attached | 0 |  |  |
| 2. | Organizational Structure attached with curriculum vitae of technical staff members without qualifications | 10 |  |  |
| 3. | Organizational Structure attached with cv and qualifications of technical staff | 15 |  |  |
| Curiculum vitae should have a contactable references, failure to disclose references will results zero score | | | | |

**2. Experience of Project Leader in to town planning(attach cv) (20)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item** | **Experience on curriculum vitae** | **Points**  **allocation** | **Tick the applicable one** | **Points by the municipality** |
| 1. | With 10 years | 10 |  |  |
| 2. | With 11 -12 years experience | 15 |  |  |
| 3. | With > 13 years experience | 20 |  |  |
| Curiculum vitae should have a contactable references, failure to disclose references will results zero score | | | | |

**3. Town planning Qualifications– Attach qualifications (25)**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item** | **Qualifications** | **Points**  **allocation** | **Tick the applicable one** | **Points by the municipality** |
| 1. | No qualification attached | 0 |  |  |
| 2. | NQF level 8. | 25 |  |  |
| 3. | NQF level 7 | 20 |  |  |
| 4. | NQF level 6 | 10 |  |  |

**4. Company Experience in relation to town planning : (40)**

-tick the applicable one and attach the previous appointment letters with completion certificates OR Contactable reference letters.

-completion certificates should have the contact details for verification if need be.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Item** | **Experience** | **Points allocation** | **Tick the applicable one** | **Points by the municipality** |
| 1. | No orders, appointment letters and completion certificate attached or contactable reference letters. | 0 |  |  |
| 2. | 2-3 years experience | 10 |  |  |
| 3. | 4-5 years experience | 15 |  |  |
| 4. | 6-9 years experience | 30 |  |  |
|  | > 10 years experience | 40 |  |  |

Note: The Municipality has the right to verify the validity of the supporting documents.

Minimum score for functionality is 60%. Bidders who score 60 points and above, will be evaluated further on 80/20 points system where 80 points will be for price and 20 points will be for Specific goals .

**Price formula**

Np = 80[1 – (Pt – Pmin)]

Pmin

|  |  |  |
| --- | --- | --- |
| Where- | |  |
| Ps | = | Points scored for price of tender under consideration; |
| Pt | = | Price of tender under consideration; and |
| Pmin | = | Price of lowest acceptable tender. |

**7**

**20 points will be for specific goals**

|  |  |  |
| --- | --- | --- |
| **NO** | **DESIGNATED GROUP** | **SPECIFIC** |
|  |  | **GOALS** |
|  |  | **(20 POINTS)** |
|  |  |  |
| 1 | **Black People** | **4** |
|  |  |  |
| 2 | **Youth** | **4** |
|  |  |  |
| 3 | **Women- ownership of more than 50 %** | **2** |
|  |  |  |
| 4 | **Small, Medium and Micro Enterprises (SMMEs)** | **4** |
|  |  |  |
| 5 | **People with disability** | **2** |
|  |  |  |
| 6 | **Enterprises within Makhuduthamaga jurisdiction** | **4** |
|  |  |  |

1. The points scored by a tenderer in respect of the specific goals above must be added to the points scored for price.
2. Only the tender with the highest number of points scored may be selected.

**2.1. Criteria for breaking deadlock in scoring**

1. If two or more tenderers score an equal total number of points, the contract must be awarded to the tenderer that scored the highest points for specific goals.
2. If two or more tenderers score equal total points in all respects, the award must be decided by the drawing of lots.

**2.2. Exemption**

The Minister may, on request, exempt an organ of state from any or all the provisions of this Act if-

1. It is in the interest of national security
2. The likely tenderers are international suppliers; or
3. It is in the public interest

**2.3. AWARD OF CONTRACTS TO TENDERERS NOT SCORING HIGHEST POINTS**

2.3.1. contract may be awarded to a tenderer that did not score the highest points only in accordance with Section 2(1)(f) of the Act.

2.3.2. If the entity intends to apply objective criteria in terms of Section 2(1)(f) of the Act, the entity should stipulate in the tender documents.

**8**

**3.1 List of Returnable Documents**

The bidder must complete the following returnable documents:

**Returnable schedules required for bid evaluation purposes (This Document)**

* Original bid document
* Fully complete and initial all the pages of the tender document
* Company profile
* Proof of company registration
* JV agreement submitted (Where applicable)
* CSD registration documents or provide MAAA number for CSD verification
* In the case of a joint venture/consortium, CSD registration documents or provide MAAA number for CSD verification of each entity constituting the joint venture/consortium, must be submitted with the bid document;
* SARS or TCS PIN Number;
* In the case of a joint venture/consortium, the TCS Pin number of each entity constituting the joint venture/consortium, must be submitted with the bid document;
* Certified ID copies of directors/shareholders/members to be attached
* Valid letter of good standing (Compensation for Occupational Injuries and Disease Act (COIDA) from Department of Labour OR any company accredited by Department of Labour (to be verified)
* Copy of Municipal rates and taxes not older than 3 months to be attached (Both for the company and each of the directors) or a recent affidavit from SAPS must be attached in case of bidders who are not paying rates and taxes e.g. in a rural areas

**3.2.** **Other documents that will be incorporated into the contract**

2.3.1 Original bid document

2.3.2 Addendum – if issued

**NB: All copies must be certified, the certification must not be older than 3 months of the closing date.**

* **Use black pen only.**
* **All correction must be signed by the authorised person.**
* **Use of correction pen (tippex) is prohibited.**
* **Failure to adhere any of the above will lead to automatic disqualification**

**9**

**4. Record of Addendum to Bid Documents**

We confirm that the following communications received from the Employer before the submission of this bid offer, amending the bid documents, have been taken into account in this bid offer:

|  |  |
| --- | --- |
| **Date** | **Title or Details** |

1.

2.

3.

4.

5.

6.

7.

8.

Attached additional pages if more space is required.

Signed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bidder \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**5. Compulsory Enterprise Questionnaire**

The following particulars must be furnished. In the case of a joint venture, **separate** enterprise questionnaires in respect of each partner must be completed and submitted.

|  |  |  |
| --- | --- | --- |
| **Section 1:** | **Name of enterprise: …………………………………………………………………………………..** | |
| **Section 2:** | **VAT Registration number, if any: …………………………………………………………………..** | |
| **Section 3:** | **Particulars of sole proprietors and partners in partnerships** | |
| **Name\*** | **Identity Number\*** | **Personal income tax number\*** |

**\***Complete only if sole proprietor or partnership and attach separate page if more than 3 partners

**Section 5:** **Particulars of companies and close corporations**

**10**

Company registration number ………………………………………………………………………………………………

Close corporation number …………………………………………………………………………………………………..

Tax reference number ……………………………………………………………………………………………………….

**Section 6:** **Record in the service of the state**

Indicate by marking the relevant boxes with a cross, if any sole proprietor, partner in a partnership or director, manger, principal shareholder or stakeholder in a company or close corporation is currently or has been within the last 12 months in the service of any of the following:

 a member of any municipal council

a member of any provincial legislature,

the

a member of the National Assembly or the of 1999)

National Council of Province

 a member of the board of directors of any municipal entity

an official of any municipality or municipal entity

an employee of any provincial department, national or provincial public entity or constitutional institution within

meaning of the Public Finance Management Act, (Act 1

a member of an accounting authority of any national or provincial public entity

an employee of parliament or a provincial legislature

**If any of the above boxes are marked, disclose the following:**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name** | **of** | **sole** | **proprietor,** | | **Name of institution, public office, board or** | **Status of** | **service** | **(tick** |
| **partner,** | **director,** | | **manager,** | | **organ of state and position held** | **appropriate column)** | | |
| **principal** | | **shareholder** | | **or** |  | **Current** | **Within** | |
| **stakeholder** | |  |  |  |  |  | **last** | **12** |
|  |  |  |  |  |  |  | **months** | |
|  |  |  |  |  |  |  |  |  |
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|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |

**\*insert separate page if necessary**

**Section 7:** **Record of spouses, children and parents in the service of the state**

Indicate by marking the relevant boxes with a cross, if any spouse, child or parent of a sole proprietor, partner in a partnership or director, manager, principal stakeholder or stakeholder in a company or close corporation is currently or has been within the last 12 months been in the service of any of the following:

 a member of any municipal council

a member of any provincial legislature,

the

a member of the National Assembly or the of 1999)

National Council of Province

 a member of the board of directors of any municipal entity

an official of any municipality or municipal entity

an employee of any provincial department, national or provincial public entity or constitutional institution within

meaning of the Public Finance Management Act, (Act 1

a member of an accounting authority of any national or provincial public entity

an employee of parliament or a provincial legislature

**11**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of spouse, child or parent** | **Name of institution, public office, board or** | **Status of service** | | **(tick** |
|  | **organ of state and position held** | **appropriate column)** | |  |
|  |  |  | **Within** | |
|  |  |  | **last** | **12** |
|  |  |  | **months** | |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**\*insert separate page if necessary**

The undersigned, who warrants that he / she is duly authorised to do so on behalf of the enterprise:

1. authorizes the Employer to obtain a tax clearance certificate from the South African Revenue Services that my / our tax matters are in order;
2. confirms that the neither the name of the enterprise or the name of any partner, manager, director or other person, who wholly or partly exercises, or may exercise, control over the enterprise appears on the Register of Bid Defaulters established in terms of the Prevention and Combating of Corrupt Activities Act of 2004;
3. confirms that no partner, member, director or other person, who wholly or partly excercises, or may exercise, control over the enterprise appears, has within the last five years been convicted of fraud or corruption;
4. confirms that I / we are not associated, linked or involved with any other biding entitities submitting bid offers and have no other relationship with any of the bidders or those responsible for compiling the scope of work that could cause or be interpreted as a conflict of interest; and
5. confirms that the contents of this questionnare are witin my personal knowledge and are to the best of my belief both true and correct.

Signed

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Position\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Enterprise Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**12**

**6. Certificate of Authority**

Indicate the status of the tenderer by ticking the appropriate box hereunder. The tenderer must complete the certificate set out below for the relevant category.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| A | B | C | D | E |  |
| Close |  |
| Company | Partnership | Joint Venture | Sole Proprietor |  |
| Corporation |  |
|  |  |  |  |  |
|  |  |  |  |  |  |

1. **Certificate for company**

I,………………………………………………., chairperson of the board of directors of

…………………………………………………, hereby confirm that by resolution of the board (copy

attached) taken on ……………….20…., Mr/Mrs……………………….acting in the capacity

of………………………………………………….,was authorised to sign all documents in connection with

this tender and any contract resulting from it on behalf of the company.

As witness

1…………………………………….

.

………………………………………

Chairman

2…………………………………….

………………………………………..

Date

1. **Certificate of partnership**

We, the undersigned, being the key partners in the business trading as ………………………………

hereby authorise Mr/Mrs……………………………………………………, acting in the capacity

of…………………………………………to sign all documents in connection with the tender for

Contract……………………………………………………………and any contract resulting from it on our

behalf.

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME** | **ADDRESS** | **SIGNATURE** | **DATE** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**13**

NOTE: This certificate is to be completed and signed by all of the key partners upon whom rests the direction of the affairs of the Partnership as a whole.

1. **Certificate for Joint Venture**

We, the undersigned, are submitting this tender offer in Joint Venture and hereby authorise Mr/Mrs………………………….., authorised signatory of the company …………………………,

Acting in the capacity of lead partner, to sign all documents in connection with the tender offer for Contract…………………………………………and any other contract resulting from it on our behalf.

This authorisation is evidenced by the attached power of attorney signed by legally authorised signatories of all the partners to the Joint Venture.

|  |  |  |
| --- | --- | --- |
| **NAME OF FIRM** | **ADDRESS** | **AUTHORISING SIGNATURE,** |
|  |  | **NAME & CAPACITY** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

1. **Certificate for sole proprietor**

I, ………………………………………………., hereby confirm that I am the sole owner of the business

trading as…………………………………………………………………………………...

As Witness:

1………………………………………………….. ………………………………

Signature: Sole owner

2…………………………………………………. ……………………………….

Date

**14**

1. **Certificate for Close Corporation**

We, the undersigned, being the key members in the business trading as………………………………………hereby authorise Mr/Mrs……………………………………

Acting in the capacity of……………………………………………………, to sign all documents in

connection with the tender for Contract……………………………………………and any contract resulting

from it on our behalf.

|  |  |  |  |
| --- | --- | --- | --- |
| **NAME** | **ADDRESS** | **SIGNATURE** | **DATE** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

NOTE: This certificate is to be completed and signed by all key members upon who rests the direction of the affairs of the Close Corporation as a whole.

**15**

1. **CERTIFICATE FOR MUNICIPAL SERVICES AND PAYMENTS**

TO: MUNICIPAL MANAGER, MAKHUDUTHAMAGA LOCAL MUNICIPALITY

FROM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of Bidder)

FURTHER DETAILS OF BIDDER(S); DIRECTORS/SHAREHOLDERS/PARTNERS, ETC.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Directors/shareholder | Physical address of | Municipal | Physical | residential | | Municipal |
| s/Partner | the Business | Account | address | of | the | Account |
|  |  | No. | Director/Shareholder/Pa | | | No. |
|  |  |  | rtner |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

**NB: Please attach certified copy (ies) of ID document(s) and proof of payment not older than 3 months**

|  |  |  |
| --- | --- | --- |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signatory |  | Date |
| **Witnesses** |  |  |
| 1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Full Names | Signature | Date |
| 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Full Names | Signature | Date |

**16**

**7. AUTHORISATION FOR DEDUCTION OF OUTSTANDING AMOUNTS OWED TO COUNCIL**

TO: MUNICIPAL MANAGER, MAKHUDUTHAMAGA LOCAL MUNICIPALITY

FROM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of the Bidder or Consortium)

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the undersigned, hereby authorise the

Makhuduthamaga Local Municipality to deduct the full amount outstanding by the business organisation/Director/Shareholder/Partner, etc. from the payment that will be made to me.

Signed at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_ Month \_\_\_\_\_\_\_ 20\_\_\_\_\_\_\_

Print Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Thus done and signed for and on behalf of the bidder

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signatory

Date

**Witnesses**

|  |  |  |  |
| --- | --- | --- | --- |
| 1. | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Full Names | Signature | Date |
| 2. | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  | Full Names | Signature | Date |

**17**

**8. FORMALISATION OF MARISHANE GARDENS**

**Form of Offer and Acceptance**

**Offer**

The employer, identified in the acceptance signature block, has solicited offers for

**FORMALISATION OF MARISHANE GARDENS**

The bidder, identified in the offer signature block, has examined the documents listed in the bid data and addenda thereto as listed in the returnable schedules, and by submitting this offer has accepted the conditions of bid.

By the representative of the bidder, deemed to be duly authorized, signing this part of this form of offer and acceptance, the bidder offers to perform all of the obligations and liabilities of the service provider under the contract including compliance with all its terms and conditions according to their true intent and meaning for an amount to be determined in accordance with the conditions of contract identified in the contract data.

**THE OFFERED TOTAL OF THE PRICES INCLUSIVE OF VALUE ADDED TAX IS: ------------------**

**------------------------------------------------------------ (Rands VAT Inclusive / exclusive)**

**....................................................................................................................................................................**

**....................................................................................................................................................................**

**........................................................................................................ (Amount In words)**

This offer may be accepted by the employer by signing the acceptance part of this form of offer and acceptance and returning one copy of this document to the bidder before the end of the period of validity stated in the bid data, whereupon the bidder becomes the party named as the Service Provider in the conditions of contract identified in the contract data.

**for the bidder**

|  |  |  |
| --- | --- | --- |
| Signature | ………………………………………….. | Date …………………………………… |
| Name | ………………………………………….. |  |
| Capacity | ………………………………………….. |  |
| (Name and | ………………………………………………………………………………………………… | |
| address of |  |  |
| organization) | ………………………………………………………………………………………………… | |
|  | ………………………………………………………………………………………………… | |
| Name and |  |  |
| signature |  |  |
| of witness | ………………………………………….. | ……………………………………. |

**18**

**Acceptance**

By signing this part of this form of offer and acceptance, the employer identified below accepts the bidder’s offer. In consideration thereof, the employer shall pay the service provider the amount due in accordance with the conditions of contract identified in the contract data. Acceptance of the bidder’s offer shall form an agreement between the employer and the bidder upon the terms and conditions contained in this agreement and in the contract that is the subject of this agreement.

Notwithstanding anything contained herein, this agreement comes into effect on the date when the bidder receives on fully completed original copy of this document. Unless the bidder (now service provider) within five working days of the data of such receipt notifies the employer in writing of any reason why he cannot accept the contents of this agreement, this agreement shall constitute a binding contract between the parties.

|  |  |  |  |
| --- | --- | --- | --- |
| Signature | …………………………………………… | Date | ……………………………………. |
| Name | …………………………………………… |  |  |
| Capacity | …………………………………………… |  |  |
| for the Makhuduthamaga Local Municipality | |  |  |
| ……………………………………. | |  |  |
| ……………………………….…… | |  |  |
| ……………………………………. | |  |  |
| Name and | …………………………………………… | Date | ……………………………………. |
| signature |  |  |  |
| of witness | …………………………………………… |  |  |

**19**

**9. Data Provided by the Service Provider**

|  |  |  |
| --- | --- | --- |
| **Clause** |  |  |
|  | The Service Provider is …………………………………………………………. | |
| 7.1 |  |  |
|  | Address: | ………………………………………….. |
|  | Telephone: | ………………………………………….. |
|  | Fax simile: | ………………………………………….. |
| 7.2 | The authorized and designated representative of the Service Provider is: | |
|  | Name: | …………………………………………. |
|  | The address for receipt of communication is: | |
| 7.3 | Telephone: | ………………………………………….. |
|  | Fax simile: | ………………………………………….. |
|  | Address: | …………………………………………. |

**10.** **Pricing Instructions**

The Service Provider is required to provide the services in accordance with the Scope of Work.

This embraces all things necessary and incidental to complete the work.

**20**

**SCOPE/TERMS OF REFERENCE: FORMALISATION OF MARISHANE GARDENS**

**APPOINTMENT OF QUALIFIED TOWN PLANNING PROFESSIONALS TO PROVIDE PROFESSIONAL SERVICES TO MAKHDUTHAMAGA LOCAL MUNICIPALITY**

1. **STUDY AREA**

The formalization shall take place on a portion of the Farm Mooifontein 806KS, measuring ±116ha in extent, as shown on the picture below:



Map 1: Marishane Gardens Locality

1. **SCOPE OF WORK & DELIVERABLES**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **No** | **Key Activity** | **Scope of Work and Deliverables** | **Outputs** | **%Payment** |
| **1.** | **Project Inception** | ❖ Project Inception Meeting with the full project team  ❖ Introductory meeting with the community  ❖ Confirmation of project area boundary  ❖ Preparation of Project inception Report  ❖ Finalization and Submission of Inception Report | Inception report and community  Meeting  Signed Service Level Agreement (SLA)  Project Work Plan  Project Steering Committee | 10% |
| **2.** | **Site Analysis and**  **Preparation of Base**  **Plan** | ❖ Preparation of base map  ❖ Taking new aerial photographs  ❖ Development of contour line  ❖ Topographical survey  ❖ Finalization of base map | Various spatial plans of the study area | 20% |
| **3.** | **Feasibility & Specialist**  **Studies** | **Conduct the following site analyses and**  **Specialist Studies and/or:**  ❖ Environmental Impact Assessment  ❖ Geotechnical Investigation  ❖ Topographical Survey  ❖ Traffic Impact Assessment (TIA)  ❖ Engineering Services Report | Specialist studies  (Environmental Authorization  Geotech Report  TIA Report  Engineering Services Report) | 20% |
| **4.** | **Prepare a layout plan**  **compliant with**  **legislation, standards**  **of the relevant**  **authorities and**  **municipal by laws** | **Prepare a layout plan compliant**  **with legislation, standards of the relevant**  **Authorities and municipal by laws. The**  **Town Planner will be required to:**  ❖ Assess all previous development  applications and approval in the study area  ❖ Comply with planning legislations and  processes  ❖ Preparation of draft layout Plan  ❖ Preparation of a Town Establishment  Planning Application  ❖ Lodging of the development  Application  ❖ Getting plan approval and finalization  of the layout plan | Approved Township Establishment Application and Layout Plan | 20% |
| **5** | **General Plan** | **Prepare and lodge the General Plan (GP) for**  **approval with the Surveyor General (SG)**  **The Land Surveyor will be**  **required to:**  ❖ Prepare a Sub-divisional plan  ❖ Pegging of individual Erven  ❖ Lodgment of the draft General Plan (GP) for  approval with the Surveyor General (SG)  . | Approved GP | 20% |
| **6.** | **Project Close out Report** | **Prepare project closeout report** | Close out report | 10% |
| **Total** | | | | 100% |

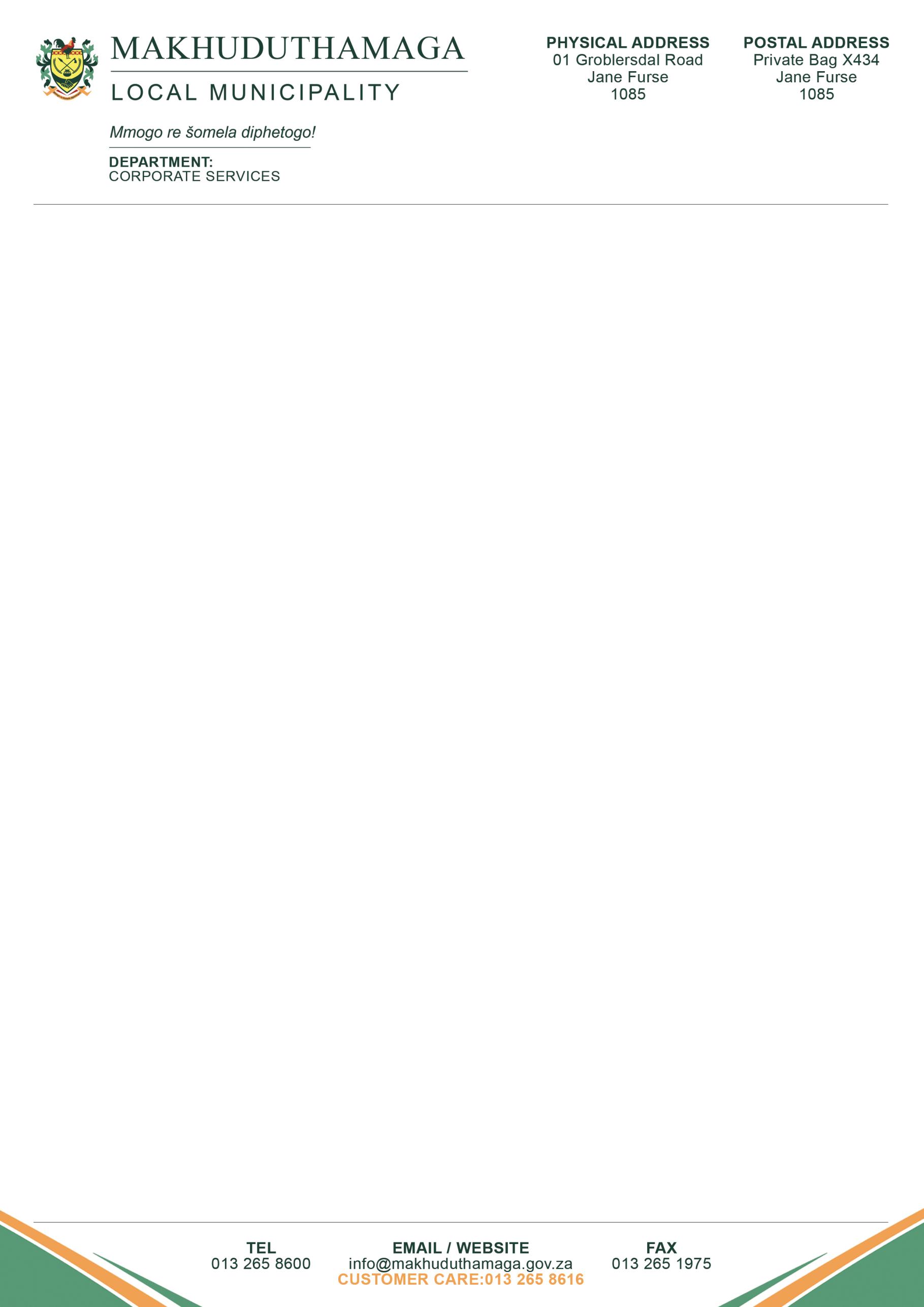
1. **Anticipated Deliverables**

* Detail Inception Report, Work Plan
* Detailed Status Quo Report
* Detailed Specialist studies
* Approved land use applications
* Approved A0 Sized Layout Plan
* Approved General plan
* A DXF file of a General Plan & Layout Plan on the CD (Compact Disk).
* GIS Shape file
* A copy (A0) of the approved General plan
* Project close out report

1. **Key Notes and Functionality**

* The project must be considered as a whole, as breaking up project into isolated activities and subcontracting is risky.
* The **Project Manager must be a Town Planner** that will be involved in all project levels from start to finish. The town planner must have experience working on local government and formalization of settlements
* The Multi- Disciplinary Team, the technical members must be registered with their respective professional bodies. The technical members all need to have a **minimum of 7 years’ experience**
* The Land/Legal specialist must be either a Professional Land Surveyor and/or Attorney/Conveyancer. This specialist must have extensive experience (10 years or more) in all aspects of the built environment which includes but is not limited to:
  + Development of Land.
  + The legal framework governing the development of land, definition of historical land rights and the creation of ‘new’ land rights pursuant to the development of the land;
  + A thorough knowledge and evidence of extensive work relating to the ‘apartheid era legislation’ and related land rights granted thereunder.
  + Extensive experience in dealing with tenure conflict, competing rights and informal rights protected by the relevant laws; and
  + Extensive knowledge of the Land Survey Act and Regulations and the Deeds Office Act**.**

**4. The Professional Service Provider** needs to have worked on demarcation/formalization and land development related projects. Be able to work and display a track record of working with local communities and have conducted various household/ socio-economic survey. Must be familiar with the area of Makhuduthamaga Local Municipality. Working experience in the area with be added advantage.



**PRICING AS PER THE ABOVE SPECIFICATION:**

|  |  |
| --- | --- |
| **Description** | **Amount**  **( Rands )** |
| Town Planning | R |
| Vat amount if applicable (15%) | R |
| Sub total | R |
| N.B. ONLY FIRM PRICES WILL BE ACCEPTABLE, NON FIRM PRICES IN A FORM OF RATES WILL NOT BE CONSIDERED.THE COST SHOULD INCLUDE PROFFESSIONAL FEES , TRAVELING AND ACCOMMODATION OF THE PERSONEL. | R |

**30**

Vendor.

**MAAA NO -----------------------------------------**

**10. DURATION OF CONTRACT**

This is a 3 (three) years project and work will be done as and when instructed by the municipality represented by the user department in the form of official municipal order document .

**11. Payments**

Payments will be made within thirty days of submission of (Tax) invoice.

**31**

**SBD 4.**

**DECLARATION OF INTEREST**

1. Any legal person, including persons employed by the state1, or persons having a kinship

with persons employed by the state, including a blood relationship, may make an ofor offers in terms of this invitation to bid (includes a price quotation, advertised competitive bid, limited bid or proposal). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorized representative declare his/her position in relation to the evaluating/adjudicating authority where-

* + The bidder is employed by the state; and/or
  + The legal person on whose behalf the bidding document is signed, has a relationship with persons/ a person who are/is involved in the evaluation and or adjudication of the bid(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the bid.

1. In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

2.1. Full Name of bidder or his or her

representative:……………………………………………………………………………

………..

2.2. Identity

Number:…………………………………………………………………………….......

2.3. Position occupied in the Company

(director,trustee.shareholder2):……………………………………………………………

.

2.4. Company registration

number:………………………………………………………………

2.5. Tax Reference

Number:………………………………………………………………………….

2.6. VAT Registration

Number:……………………………………………………………………..

2.6.1 The names of all directors/ trustees/ shareholders/ members, their individual identity numbers, tax reference numbers and, if applicable, employee/ persal numbers must be indicated in paragraph 3 below.

1“State” means –

**32**

1. Any national or provincial department, national or provincial public entity or constitution within the meaning of Public Finance Management Act, 1999 (Act No. 1 of 1999);
2. Any municipality or municipal entity;
3. Provincial legislature;
4. National Assembly or the national Council of provinces; or
5. Parliament.

2”shareholder” means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.



2.7. Are you or any person connected with them bidder NO

YES

NO

presently employed by the state?

2.7.1. If so, furnish the following particulars:

Name of person / director / trustee/ shareholder/ member:

………………………………………………

Name of state institution at which you or person

connected to the bidder is employed:

………………………………………………..

Position occupied in the public institution:

………………………………………………...

Any other particulars:

……………………………………………………………………………………

……………………………………………………………………………………

……………………………………………………………………………………



2.7.2. If you are presently employed by the state, did you obtain

NO

the appropriate authority to undertake remunerative

work outside employment in the public sector?

YES

2.7.2.1. If yes, did you attached proof of such authority to the bid

NO

document?

 YES



(Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the bid.

2.7.2.2. If no, furnish reasons for non-submission of such proof:

……………………………………………………………………………………..

……………………………………………………………………………………

…

**33**

……………………………………………………………………………………

…



2.8. Did you or your spouse, or any of the company’s directors/ trustees/ YES NO

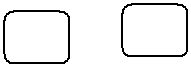
shareholders/ members or their spouses conduct business with the state in the previous twelve months?

2.8.1. If so, furnish particulars:

…………………………………………………………………………………………….

…………………………………………………………………………………………….

……………………………………………………………………………………………..



2.9. Do you, or any person connected with the bidder, have any relationship YES NO

(family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this bid?

2.9.1. If so, furnish particulars:

……………………………………………………………………………………………

……

……………………………………………………………………………………………

…..

……………………………………………………………………………………………

…..



2.10. Are you, or any person connected with the bidder, aware of any YES NO

relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjustment of this bid?

2.10.1. If so, furnish particulars:

…………………………………………………………………………………………

…….

…………………………………………………………………………………………

…….

…………………………………………………………………………………………

…….

**34**

2.11. Do you or any of the directors/ trustees/ shareholders/ members of the company have any interest in any other related companies whether or not they are bidding for this contract?

2.11.1. If so, furnish particulars:

…………………………………………………………………………………………

…..

…………………………………………………………………………………………

…..

…………………………………………………………………………………………

…..

**3.Full details of directors/ trustees/ members/ shareholders.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Names** | **Identity Number** | **Personal Tax** | **State Employee** |
|  |  | **Reference Number** | **Number/ Persal** |
|  |  |  | **Number** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**35**

**3. DECLARATION**

I, THE UNDERSIGNED

(NAME)…………………………………………………………………………………………………

CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPH 2 and 3 ABOVE IS CORRECT.

I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 23 OF THE GENERAL CONDITIONS OF CONTRACT SHOULD THIS DECLARATION PROVE TO BE FALSE.

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

Signature

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

Date

…………………………………....

Position

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

Name Of Bidder

**36**

**MBD 9.**

**CERTIFICATE OF INDEPENDENT BID DETERMINATION**

I, the undersigned, in submitting the accompanying bid:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Bid Number and Description)

in response to the invitation for the bid made by:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Municipality / Municipal Entity)

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

1. certify, on behalf of:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_that: (Name of Bidder)
2. I have read and I understand the contents of this Certificate;
3. I understand that the accompanying bid will be disqualified if this Certificate is found

not

to be true and complete in every respect;

1. I am authorized by the bidder to sign this Certificate, and to submit the accompanying bid, on behalf of the bidder;
2. Each person whose signature appears on the accompanying bid has been authorized

by

the bidder to determine the terms of, and to sign, the bid, on behalf of the bidder;

1. For the purposes of this Certificate and the accompanying bid, I understand that the word “competitor” shall include any individual or organization, other than the bidder, whether or not affiliated with the bidder, who:
   1. has been requested to submit a bid in response to this bid invitation;
   2. could potentially submit a bid in response to this bid invitation, based on their qualifications, abilities or experience; and
   3. provides the same goods and services as the bidder and/or is in the same line of business as the bidder
2. The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However

communication between partners in a joint venture or consortium³ will not be construed as collusive bidding.

**MBD 9.**

1. In particular, without limiting the generality of paragraphs 6 above, there has been no consultation, communication, agreement or arrangement with any competitor regarding:
   1. prices;
   2. geographical area where product or service will be rendered (market allocation)
   3. methods, factors or formulas used to calculate prices;
   4. the intention or decision to submit or not to submit, a bid;
   5. the submission of a bid which does not meet the specifications and conditions of the bid; or
   6. bidding with the intention not to win the bid.
2. In addition, there have been no consultations, communications, agreements or

**37**

arrangements with any competitor regarding the quality, quantity, specifications and conditions or delivery particulars of the products or services to which this bid invitation relates.

1. The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official

bid opening or of the awarding of the contract.

* **Joint venture or Consortium means an association of persons for the purpose of combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.**

**MBD 9**

1. I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act No. 89 of 1998 and or may be reported to the National Prosecuting Authority (NPA) for criminal investigation and or may be restricted from conducting business with the public sector for a period not exceeding ten (10) years in terms of the Prevention and Combating of Corrupt Activities Act No. 12 of 2004 or any other applicable legislation.

……………………………………

Signature

…………………………………………….

Date

…………………………………

Position

………………………………………..

Name of Bidder

**38**

**MBD1**

**PART A**

**INVITATION TO BID**



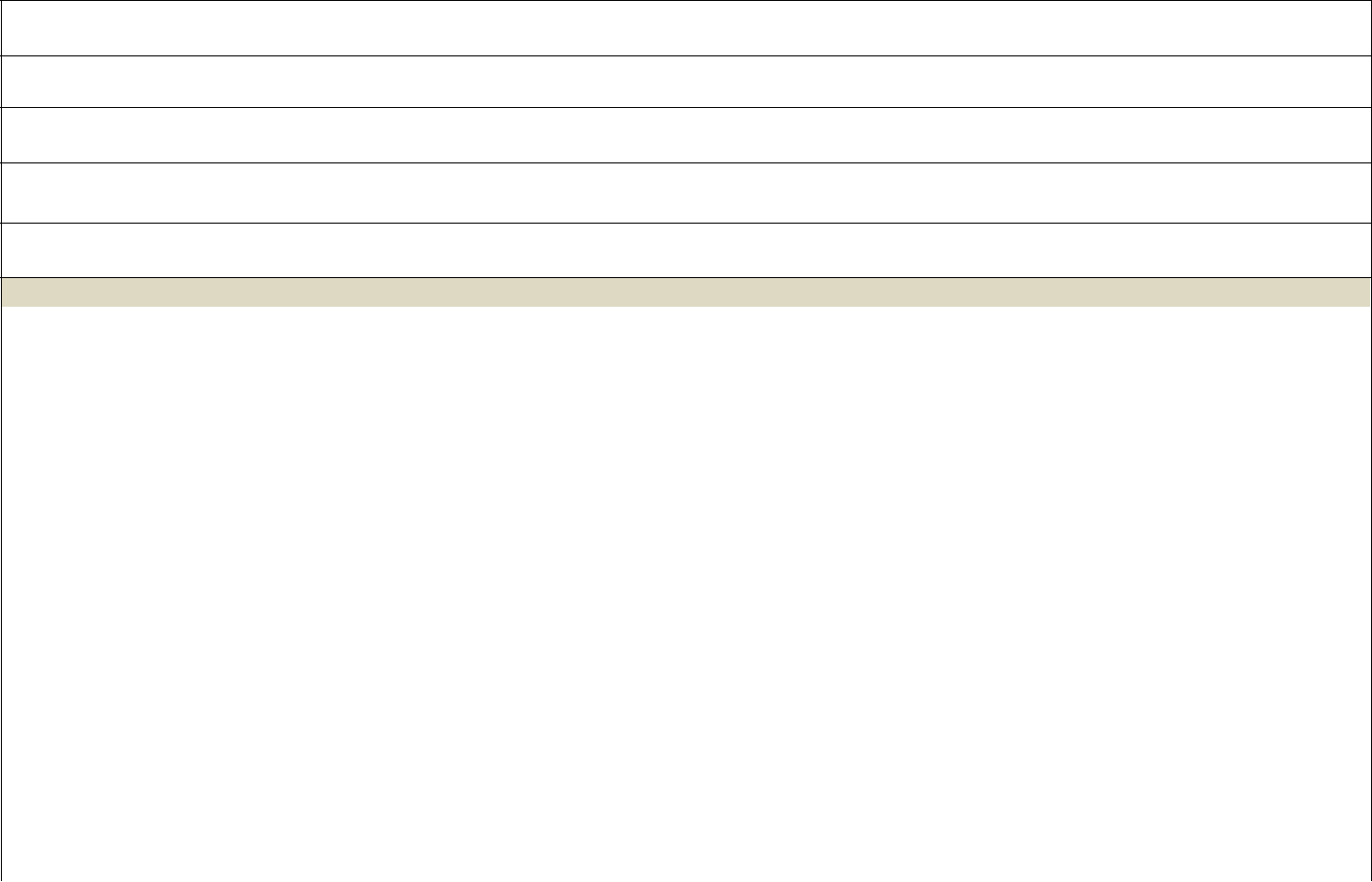
**YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (***NAME OF MUNICIPALITY/ MUNICIPAL**ENTITY***)**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| BID NUMBER: |  | CLOSING DATE: |  | CLOSING TIME: |  |
| DESCRIPTION |  |  |  |  |  |

**THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7).**

BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN

THE BID BOX SITUATED AT *(STREET ADDRESS*



**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 |  |  |  |  |  |  |  |
| TAX COMPLIANCE STATUS | TCS PIN: |  | **OR** | | CSD No: |  |  |
| B-BBEE STATUS LEVEL |  |  | B-BBEE | | |  |  |
| Yes |  | STATUS LEVEL | | | Yes |  |
| VERIFICATION CERTIFICATE |  |  |
|  |  | SWORN | | |  |  |
| [TICK APPLICABLE BOX] |  |  |  |  |
| No |  | AFFIDAVIT | | | No |  |
|  |  |  |



***[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/ SWORN AFFIDAVIT (FOR EMES & QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]***

**39**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  |  |  | ARE YOU A | |  |  |
|  |  |  | FOREIGN BASED | |  |  |
| ARE YOU THE ACCREDITED |  |  | SUPPLIER FOR | |  |  |
| REPRESENTATIVE **IN SOUTH** |  |  | **THE GOODS** | | Yes | No |
| **AFRICA FOR THE GOODS** | Yes | No | **/SERVICES** | |  |  |
| **/SERVICES /WORKS OFFERED?** |  |  | **/WORKS** | | [IF YES, ANSWER |  |
|  | [IF YES ENCLOSE PROOF] | | **OFFERED?** | | PART B:3 ] |  |
|  |  |  |  |  |  |  |
| **TOTAL NUMBER OF ITEMS** |  |  |  |  |  |  |
| **OFFERED** |  |  | **TOTAL BID PRICE** | | **R** |  |
| **SIGNATURE OF BIDDER** |  |  |  |  |  |  |
|  | ……………………………… | | **DATE** | |  |  |
| **CAPACITY UNDER WHICH THIS** |  |  |  |  |  |  |
| **BID IS SIGNED** |  |  |  |  |  |  |
| **BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED** | |  |  |  |  |  |
| **TO:** |  | **TECHNICAL INFORMATION MAY BE DIRECTED TO:** | | | | |
| DEPARTMENT |  | CONTACT PERSON | |  |  |  |
| CONTACT PERSON |  | TELEPHONE NUMBER | |  |  |  |
| TELEPHONE NUMBER |  | FACSIMILE NUMBER | |  |  |  |
| FACSIMILE NUMBER |  | E-MAIL ADDRESS | |  |  |  |
| E-MAIL ADDRESS |  |  |  |  |  |  |



Where the recommended bidder is not tax compliant, the bidder should be notified of their non-compliant status and the bidder must be requested to submit to the municipality or municipal entity, within 7 working days, written proof from SARS of their tax compliance status or proof from SARS that they have made an arrangement to meet their outstanding tax obligations. The proof of tax compliance status submitted by the bidder to the municipality or municipal entity must be verified via the CSD or e-Filing.

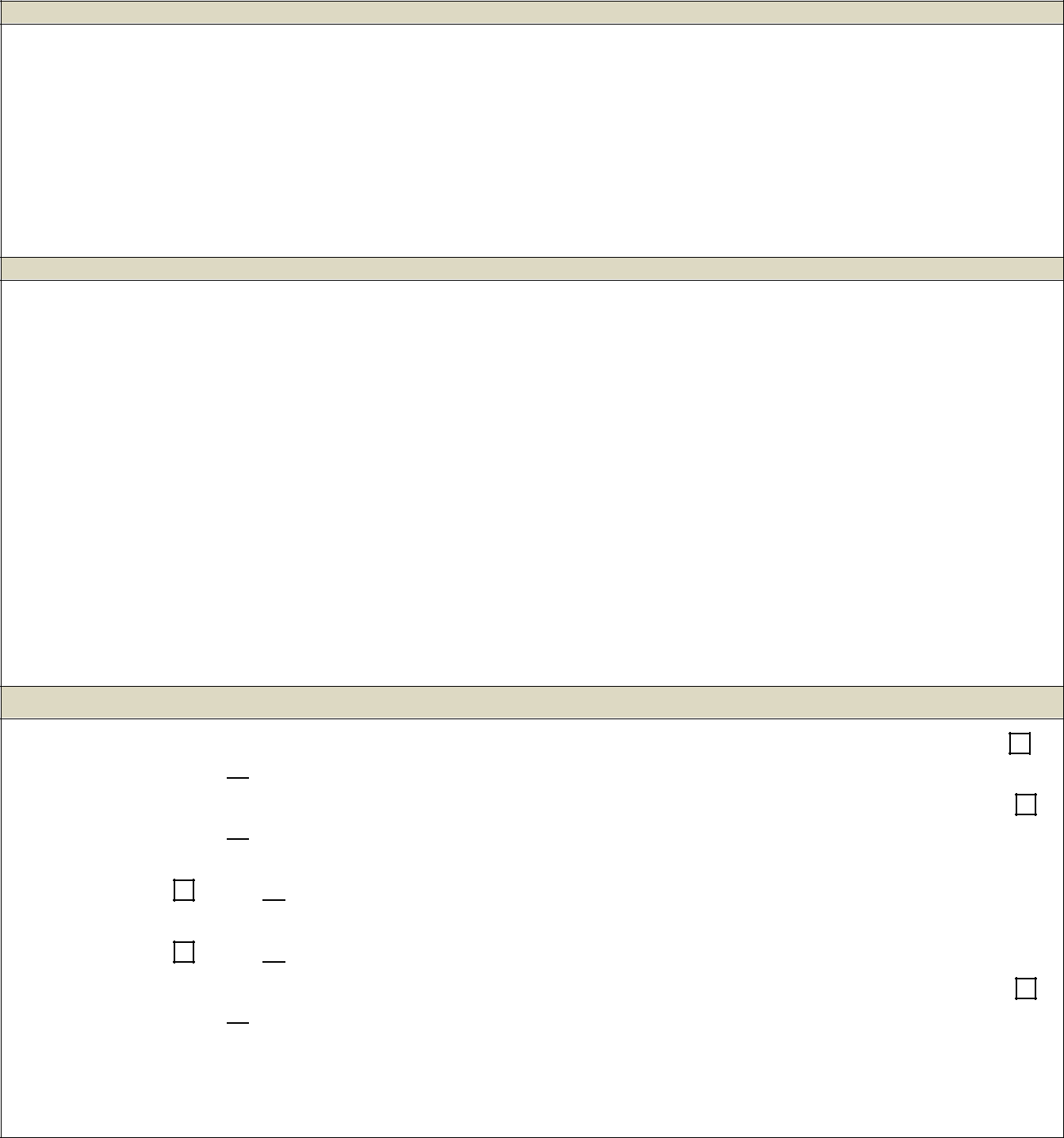
**The accounting officer should reject a bid submitted by the bidder if such a bidder fails to provide proof of tax compliance status within the timeframe stated above.**

**40**

**PART B**

**TERMS AND CONDITIONS FOR BIDDING**

**1. BID SUBMISSION:**



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**

**ONLINE**

1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.

**2. TAX COMPLIANCE REQUIREMENTS**

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 VIEW THE TAXPAYER’S PROFILE AND TAX STATUS.

2.3 APPLICATION FOR THE TAX COMPLIANCE STATUS (TCS) CERTIFICATE OR PIN MAY ALSO BE MADE VIA E-FILING. IN ORDER TO USE THIS PROVISION, TAXPAYERS WILL NEED TO REGISTER WITH SARS AS E-FILERS THROUGH THE WEBSITE WWW.SARS.GOV.ZA.

2.4 FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B:3.

2.5 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.

2.6 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MU02ST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.

2.7 WHERE NO TCS IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST E PROVIDED.

**3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS**

3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?

YES  NO

3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA?

YES  NO

3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?

YES  NO

3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?

YES  NO

3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?

YES  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 ABOVE.**

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

**NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE**.

SIGNATURE OF BIDDER: ……………………………………………

CAPACITY UNDER WHICH THIS BID IS SIGNED: ……………………………………………

DATE: …………………………………………...

**41**

**MBD 6.1**

**PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022**

**This preference form must form part of all tenders invited. It contains general information and serves as a claim form for preference points for specific goals.**

**NB: BEFORE COMPLETING THIS FORM, TENDERERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF THE TENDER AND PREFERENTIAL PROCUREMENT REGULATIONS, 2022**

1. **GENERAL CONDITIONS**

1.1 **The following preference point systems are applicable to invitations to tender:**

* **the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and**

1.2 **To be completed by the organ of state**

**(*delete whichever is not applicable for this tender*)**

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

1.3 **Points for this tender shall be awarded for:**

1. **Price; and**
2. **Specific Goals.**

1.4 **To be completed by the organ of state:**

**The maximum points for this tender are allocated as follows:**

|  |  |
| --- | --- |
|  | **POINTS** |
|  |  |
| **PRICE** | **80** |
|  |  |
| **SPECIFIC GOALS** | **20** |
|  |  |
| **Total points for Price and SPECIFIC GOALS** | **100** |
|  |  |

**42**

1.5 **Failure on the part of a tenderer to submit proof or documentation required in terms of**

**this tender to claim points for specific goals with the tender, will be interpreted to mean that preference points for specific goals are not claimed.**

1.6 **The organ of state reserves the right to require of a tenderer, either before a tender is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the organ of state.**

1. **DEFINITIONS**
   1. **“tender” means a written offer in the form determined by an organ of state in response to an invitation to provide goods or services through price quotations, competitive tendering process or any other method envisaged in legislation;**
   2. **“price” means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;**
   3. **“rand value” means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;**
   4. **“tender for income-generating contracts” means a written offer in the form determined by an organ of state in response to an invitation for the origination of income-generating contracts through any method envisaged in legislation that will result in a legal agreement between the organ of state and a third party that produces revenue for the organ of state, and includes, but is not limited to, leasing and disposal of assets and concession contracts, excluding direct sales and disposal of assets through public auctions; and**
   5. **“the Act” means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).**
2. **FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES** 3.1. **POINTS AWARDED FOR PRICE**

**3.1.1** **THE 80/20 PREFERENCE POINT SYSTEMS**

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

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **80/20** |  |  |  |  |
| = ( − | |  | − | ) |  |
|  |  |  |
|  |  |  |  | |  |
| **Where** | |  |  |  |  |
| **Ps** | **=** | **Points scored for price of tender under consideration** | | |  |
| **Pt** | **=** | **Price of tender under consideration** | | |  |
| **Pmin** | **=** | **Price of lowest acceptable tender** | | |  |

**43**

**4. POINTS AWARDED FOR SPECIFIC GOALS**

4.1. **In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential**

**Procurement Regulations, preference points must be awarded for specific goals stated in the tender. For the purposes of this tender the tenderer will be allocated points based on the goals stated in table 1 below as may be supported by proof/ documentation stated in the conditions of this tender:**

**Table 1: Specific goals for the tender and points claimed are indicated per the table below.**

***(Note to organs of state: Where either the 90/10 or 80/20 preference point system is applicable, corresponding points must also be indicated as such.***

***Note to tenderers: The tenderer must indicate how they claim points for each preference point system.*)**

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  | **Number of points** |  |  | **Number of points claimed** |  |  |
|  | **The specific goals** |  |  |  | **allocated** |  |  | **(80/20 system)** |  |  |
|  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | **(To be completed by the** |  |  |
|  | **allocated points in terms** | |  |  | **(80/20 system)** |  |  |  |  |
|  |  |  |  |  | **tenderer)** |  |  |
|  | **of this tender** |  |  |  |  |  |
|  |  |  |  | **(To be completed by the** |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | **organ of state)** |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  | **Black People** |  |  | **4** | |  |  |  |  |  |
|  |  |  |  |  | |  |  |  |  |  |
|  | **Youth** |  |  | **4** | |  |  |  |  |  |
|  |  | | |  | |  |  |  |  |  |
|  | **Women- ownership of** | | | **2** | |  |  |  |  |  |
|  | **more than 50 %** |  |  |  |  |  |  |  |  |  |
|  |  | | |  | |  |  |  |  |  |
|  | **Small, Medium and Micro** | | | **4** | |  |  |  |  |  |
|  | **Enterprises (SMMEs)** | | |  |  |  |  |  |  |  |
|  |  | | |  | |  |  |  |  |  |
|  | **People with disability** | | | **2** | |  |  |  |  |  |
|  |  |  | |  | |  |  |  |  |  |
|  | **Enterprises** | **within** | | **4** | |  |  |  |  |  |
|  | **Makhuduthamaga** |  |  |  |  |  |  |  |  |  |
|  | **juristiction** |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | |  |  |  |  |  |
|  | **Total** |  |  |  | **20** |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |

**44**

**DECLARATION WITH REGARD TO COMPANY/FIRM**

4.2. **Name of company / firm …………………………………………………….**

4.3. **Company registration number: ……………………………………………...**

4.4. **TYPE OF COMPANY/ FIRM**

* **Partnership/Joint Venture / Consortium**
* **One-person business/sole propriety**
* **Close corporation**
* **Public Company**
* **Personal Liability Company**
* **(Pty) Limited**
* **Non-Profit Company**
* **State Owned Company**

**[Tick applicable box]**

4.5. **I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I acknowledge that:**

1. **The information furnished is true and correct;**
2. **The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;**
3. **In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;**
4. **If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may have –**
   1. **disqualify the person from the tendering process;**
   2. **recover costs, losses or damages it has incurred or suffered as a result of that person’s conduct;**
   3. **cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;**
   4. **recommend that the tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted from obtaining business from any organ of state for a period not exceeding 10 years, after the *audi alteram partem* (hear the other side) rule has been applied; and**

**45**

1. **forward the matter for criminal prosecution, if deemed necessary**

……………………………………….

**SIGNATURE(S) OF TENDERER(S)**

**SURNAME AND NAME**: ……………………………………………………….

**DATE:** ………………………………………………………

**ADDRESS**: ………………………………………………………

………………………………………………………

………………………………………………………

………………………………………………………

**46**

SBD 8

**DECLARATION OF BIDDER’S PAST SUPPLY CHAIN MANAGEMENT PRACTICES**

1. This Standard Bidding Document must form part of all bids invited.
2. It serves as a declaration to be used by institutions in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
3. The bid of any bidder may be disregarded if that bidder, or any of its directors have-
   1. abused the institution’s supply chain management system;
   2. committed fraud or any other improper conduct in relation to such system; or
   3. failed to perform on any previous contract.
4. **In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | **Item** |  |  | **Question** | | | | |  |  | **Yes** |  |  | **No** |  |  |
|  |  |  |  |  |  |  |  |  |
| 4.1 | |  |  |  | Is the bidder or any of its directors listed on the | | | | |  | Yes | |  | No | |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  | National Treasury’s Database of Restricted Suppliers | | | | |  |  |  |  |  |  |  |
|  |  |  |  |  | as companies or persons prohibited from doing | | | | |  |  |  |  |  |  |  |
|  |  |  |  |  | business with the public sector? | | | | |  |  |  |  |  |  |  |
|  |  |  |  | (Companies or persons who are listed on this Database were | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | informed in writing of this restriction by the Accounting | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | Officer/Authority of the institution that imposed the restriction | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | after the *audi alteram partem* rule was applied). | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | **The Database of Restricted Suppliers now resides on the** | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | **National Treasury’s website(**www.treasury.gov.za**) and can** | | | | | |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | |  |  |  |  |  |  |  |
|  |  |  |  | **be accessed by clicking on its link at the bottom of the** | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | **home page.** | | | | | |  |  |  |  |  |  |  |
|  | |  |  | |  |  | | | |  |  |  |  |  |  |  |
| 4.1.1 | |  | If so, furnish particulars: | | | | | | |  |  |  |  |  |  |  |
|  | |  |  | | | | | | |  |  | |  |  | |  |
| 4.2 | |  | Is the bidder or any of its directors listed on the Register for Tender Defaulters | | | | | | |  | Yes | |  | No | |  |
|  |  |  | in terms of section 29 of the Prevention and Combating of Corrupt Activities | | | | | | |  |  |  |  |  |  |  |
|  |  |  | Act (No 12 of 2004)? | | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | **The Register for Tender Defaulters can be accessed on the National** | | | | | |  |  |  |  |  |  |  |
|  |  |  |  | **Treasury’s website (www.treasury.gov.za) by clicking on its link at the** | | | | | |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  | | | |  |  |  |  |  |  |  |
|  |  |  |  | **bottom of the home page.** | | | | | |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |



**47**

|  |  |  |  |
| --- | --- | --- | --- |
| 4.2.1 | If so, furnish particulars: |  |  |
|  |  |  |  |
| 4.3 | Was the bidder or any of its directors convicted by a court of law (including a | Yes | No |
|  | court outside of the Republic of South Africa) for fraud or corruption during the |  |  |
|  | past five years? |  |  |
|  |  |  |  |
| 4.3.1 | If so, furnish particulars: |  |  |
|  |  |  |  |
| 4.4 | Was any contract between the bidder and any organ of state terminated | Yes | No |
|  | during the past five years on account of failure to perform on or comply with |  |  |
|  | the contract? |  |  |
|  |  |  |  |
| 4.4.1 | If so, furnish particulars: |  |  |
|  |  |  |  |



**SBD 8**

**CERTIFICATION**

**I, THE UNDERSIGNED (FULL NAME)…………………………………………………**

**CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS TRUE AND CORRECT.**

**I ACCEPT THAT, IN ADDITION TO CANCELLATION OF A CONTRACT, ACTION MAY BE TAKEN AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.**

**………………………………………...**

**…………………………..**

**Signature**

**Date**

**……………………………………….**

**…………………………..**

**Position**

**Name of Bidder**

**48**