

METSIMAHOLO REFERENCE FORM-1

TO: METSIMAHOLO LOCAL MUNICIPALITY

I, the undersigned being duly authorized to do so, hereby furnish a reference to Metsimaholo Local Municipality relative to bid MLM 19/2024/25 for the: **Appointment of a 7 PE or higher cidb registered contractor for the Construction of Mooidraai Bulk Electrical Supply Full Phase (Leitrim Substation Upgrade).**

Name of the client	
Name of the company tendering	
Project Name	
Project Contract/Tender Number	
Contract Value	
Description of Scope of work (Fully complete the right side of the column with relevant information as per the scope completed)	Sub-station size: _____ Value: _____ Overhead line size: _____ Value: _____ Switching station: _____ Value: _____

Below questioner to be completed in full by the client only

1. Was their project completed satisfactory?	Yes / No
<i>If No, please furnish details:</i>	
2. Was the project constructed as per the approved scope of work?	Yes / No
<i>If No, please furnish details:</i>	
3. Was the project completed within the approved timeframe?	Yes / No
4. Would you recommend this contractor for similar work	Yes / No

Name of authorized person: **Signature:**

Position

Telephone: **E-mail:**

Date:

Completed on behalf of (Name of Institution)

NB: This document must be completed in full by the referee and it to be included in the bid submission. Failure to adhere to this requirement will result in the bidder not being allocated points

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METSIMAHOLO REFERENCE FORM-2

TO: METSIMAHOLO LOCAL MUNICIPALITY

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Name of the client	
Name of the company tendering	
Project Name	
Project Contract/Tender Number	
Contract Value	
Description of Scope of work (Fully complete the right side of the column with relevant information as per the scope completed)	Sub-station size: _____ Value: _____ Overhead line size: _____ Value: _____ Switching station: _____ Value: _____

Below questioner to be completed in full by the client only

1. Was their project completed satisfactory?	Yes / No
<i>If No, please furnish details:</i>	
2. Was the project constructed as per the approved scope of work?	Yes / No
<i>If No, please furnish details:</i>	
3. Was the project completed within the approved timeframe?	Yes / No
4. Would you recommend this contractor for similar work	Yes / No

Name of authorized person: Signature:

Position

Telephone: E-mail:

Date:

Completed on behalf of (Name of Institution)

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METSIMAHOLO REFERENCE FORM-3

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Name of the client	
Name of the company tendering	
Project Name	
Project Contract/Tender Number	
Contract Value	
Description of Scope of work (Fully complete the right side of the column with relevant information as per the scope completed)	Sub-station size: _____ Value: _____ Overhead line size: _____ Value: _____ Switching station: _____ Value: _____

Below questioner to be completed in full by the client only

1. Was their project completed satisfactory?	Yes / No
<i>If No, please furnish details:</i>	
2. Was the project constructed as per the approved scope of work?	Yes / No
<i>If No, please furnish details:</i>	
3. Was the project completed within the approved timeframe?	Yes / No
4. Would you recommend this contractor for similar work	Yes / No

Name of authorized person: **Signature:**

Position

Telephone: **E-mail:**

Date:

Completed on behalf of (Name of Institution)

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METSIMAHOLO REFERENCE FORM-4

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Name of the client	
Name of the company tendering	
Project Name	
Project Contract/Tender Number	
Contract Value	
Description of Scope of work (Fully complete the right side of the column with relevant information as per the scope completed)	Sub-station size: _____ Value: _____ Overhead line size: _____ Value: _____ Switching station: _____ Value: _____

Below questioner to be completed in full by the client only

1. Was their project completed satisfactory?	Yes / No
<i>If No, please furnish details:</i>	
2. Was the project constructed as per the approved scope of work?	Yes / No
<i>If No, please furnish details:</i>	
3. Was the project completed within the approved timeframe?	Yes / No
4. Would you recommend this contractor for similar work	Yes / No

Name of authorized person: **Signature:**

Position

Telephone: **E-mail:**

Date:

Completed on behalf of (Name of Institution)

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METSIMAHOLO REFERENCE FORM-5

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Name of the client	
Name of the company tendering	
Project Name	
Project Contract/Tender Number	
Contract Value	
Description of Scope of work (Fully complete the right side of the column with relevant information as per the scope completed)	Sub-station size: _____ Value: _____ Overhead line size: _____ Value: _____ Switching station: _____ Value: _____

Below questioner to be completed in full by the client only

1. Was their project completed satisfactory?	Yes / No
<i>If No, please furnish details:</i>	
2. Was the project constructed as per the approved scope of work?	Yes / No
<i>If No, please furnish details:</i>	
3. Was the project completed within the approved timeframe?	Yes / No
4. Would you recommend this contractor for similar work	Yes / No

Name of authorized person: **Signature:**

Position

Telephone: **E-mail:**

Date:

Completed on behalf of (Name of Institution)

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