SECTION 2.2: FUNCTIONALITY CRITERIA

HESSEQUA MUNICIPALITY		
FUNCTIONALITY POINTS CLAIM FORM		
1. GENERAL CONDITIONS		
1.1. This form is to be used to claim the functionality points used to assess the technical capacity of the bidder to execute the project. 1.2. A prerequisite of 80% must be obtained for functionality, in order to be evaluated on price and preference. 1.3. The functionality points for this bid are allocated as indicated in table below:		
Evaluation Criteria		**Maximum Points Allocated**
Experience of firm in compilation of general/supplementary valuations for municipalities.	2 points for every project completed where more than 15 000 properties have been valued. (**Attach reference letters from municipalities confirming duration and number of properties. Appointment letters will not be accepted.**)	**20**
Number of qualified valuers.	Number of Qualified Valuers permanently employed- 10 Points per valuer (**Attach CV and certified copies of original qualifications and registration as valuer.**)	**30**
Experience of Professional Valuer 1 (Principal Valuer)	1 point for every year of experience, (**Attach CV and certified copies of original qualifications and registration as valuer.**)	**10**
Experience of Professional Valuer 2 (Substitute/Assistant Valuer)	1 point for every year of experience, (**Attach CV and certified copies of original qualifications and registration as valuer.**)	**10**
Experience of Professional Valuer 3 (Assistant Valuer)	1 point for every year of experience, (**Attach CV and certified copies of original qualifications and registration as valuer.**)	**10**
TOTAL POINTS		**80**
2. NOTE:		
2.1. Failure on the part of a bidder to fill in a part of this may be interpreted to mean that the functionality points are not claimed. 2.2. Failure on the part of a bidder to sign this form will disqualify the bidder 2.3. The municipality reserves the right to require of a bidder, either before a bid is adjudicated or at any time subsequently, to substantiate any claim, in any manner required by the municipality.		
3. GENERAL DEFINITIONS		
3.1. **"Experience of Firm"** means the number of similar projects that the firm has been involved with. 3.2. **"Highest relevant qualification"** means the highest qualification relevant to the position as key personnel for who he/she is nominate for. 3.3. **"Key Personnel"** means those personnel, indicated in paragraph 5 (organogram), and that is on site and		

directly involve with the municipality and project. 3.4. **"Relevant experience"** means years' experience in a similar position as indicated in paragraph (organogram), which are in line with the scope. 5 3.5. **"Scope"** means as defined in the Terms of Reference of this particular project.	
3.6. **Details of Bidding Firm**	
3.6.1. Attach a schedule with the description of the project, details of the employer and contact details of the representative of the employer.	
3.7. **Details of key personnel on the Project**	
3.7.1. Bidders must submit details of the key personnel to be seconded to the project. 3.7.2. Experience: Attach a CV concentrating on relevant experience with specific reference to experience in line with the scope of this project. It must clearly state the number of years' experience. 3.7.3. Proof of the Qualification in the form of certified copy must be attached, as well as professional registration, where applicable.	
4. DECLARATION WITH REGARD TO FUNCTIONALITY	
4.1. I/we, the undersigned, who warrants that he/she is duly authorised to do so on behalf of the firm declare that points claimed qualifies the firm for the point(s) shown and I / we acknowledge that:	
4.1.1. The information furnished is true and correct.	
4.1.2. In the event of a contract being awarded as a result of points claimed, the bidder may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct.	
4.1.3. If the claims are found to be incorrect, the Municipality may, in addition to any other remedy it may have – 4.1.3.1. recover all costs, losses or damages it has incurred or suffered as a result of that person's conduct; and 4.1.3.2. 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;	
SIGNATURE(S) OF BIDDER(S)	**DATE**
WITNESS 1: SIGNATURE	**WITNESS 2: SIGNATURE**

WORK EXPERIENCE IN COMPILING MASS MUNICIPAL VALUATIONS				
Name of Municipality	**Contact Person (Name, Tel, Fax, Email)**		**Period of Valuation Roll**	**Number of Properties on Roll**
	Name			
	Tel			
	Fax			
	Email			
	Name			
	Tel			
	Fax			
	Email			
	Name			
	Tel			
	Fax			
	Email			
	Name			
	Tel			
	Fax			
	Email			
	Name			
	Tel			
	Fax			
	Email			
	Name			
	Tel			
	Fax			
	Email			
	Name			
	Tel			
	Fax			
	Email			
Number of sheets appended by the tenderer to this schedule (If nil, enter NIL)				

SIGNATURE		NAME (PRINT)	
CAPACITY		DATE	
NAME OF FIRM			

SCHEDULE 1 (A)

AFFIDAVIT, NOMINATION AND DECLARATION OF MUNICIPAL VALUER

The Tenderer hereby nominates the following person to be designated by the municipality in terms of section 33 (1) as the municipal valuer:

FULL NAMES	
I.D. NUMBER	
PROFESSIONAL QUALIFICATIONS	
PROFESSIONAL REGISTRATION NO (Attach certified copy of certificate)	

Have you ever been disqualified as a valuer? If yes, full details and reasons to be supplied.

.....

.....

Have you been summoned to appear at any disciplinary hearing of either the South African Institute of Valuers and/or South African Council for the Property Valuers Profession or other recognised professional bodies relating to the valuation profession? If yes, full details including date of hearing, presiding officer and outcome.

.....

WORK EXPERIENCE IN COMPILING MASS MUNICIPAL VALUATIONS:

NAME OF MUNICIPALITY	PERIOD OF VALUATION ROLL	NO. OF PROPERTIES ON ROLL	REFERENCE	CONTACT NUMBER

Initials of Service Provider's Authority: .....

List properties included in any of the valuation rolls compiled by you of a special nature/requiring specific skills, i.e. airport, mines, quarries, etc.

DESCRIPTION OF PROPERTY	TYPE OF PROPERTY	METHOD OF VALUATION	MUNICIPALITY

Have you compiled any valuation rolls utilizing GIS and/or Aerial Photography? If yes, provide full details:

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

Have you had any experience in reconciling cadastral data with deeds data and thereafter with the municipal valuation roll? If yes, provide full details.

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

VALUATION APPEAL BOARD HEARINGS

Have you appeared in front of a Valuation Appeal Board in terms of the Act?

NAME OF MUNICIPALITY	NAME OF CHAIRPERSON	NAME OF SECRETARY	DATE OF HEARING	No of appeals	No of appeals upheld by the board	What was the % reduction awarded by the board compared to the valuations compiled by you?

I, the undersigned do hereby make oath and say that:
The questionnaire has been completed by me in full. I have not withheld any information in regards the completion of this questionnaire and that all information supplied by me is true and correct.
I do further declare that I have read all the tender requirements including all schedules, forms and other information set out and confirm that I have fully acquainted myself with the terms and conditions thereof and fully understand the content and implication of all such conditions.
I further undertake by my signature hereof (if I am not the Tenderer) to bind myself jointly and severally with Tenderer to fulfil all obligations and requirements of this tender.
Signed by me at _____ this _____ day _____ 2026

SIGNATURE: NOMINATED PERSON AS MUNICIPAL VALUER

JUSTICE OF PEACE/COMMISSIONER OF OATHS	
I hereby certify that the deponent has acknowledged that he/she knows and understands the contents of this affidavit and that it was signed and sworn to before me *at _____ on the .....day of 2026*	*Justice of Peace/Commissioner of Oaths*

Initials of Service Provider's Authority: .....

SCHEDULE 1 (B)
AFFIDAVIT, NOMINATION AND DECLARATION OF SUBSTITUTE MUNICIPAL VALUER

In the event of the nominated person as municipal valuer, not being able to carry out his functions and/or duties in terms of this tender due to accident, death, ill health or insolvency, the person nominated as the substitute municipal valuer shall continue with the functions of the Municipal valuer and shall assume all responsibilities in terms hereof as if he were the Municipal valuer.

FULL NAMES	
I.D. NUMBER	
PROFESSIONAL QUALIFICATIONS	
PROFESSIONAL REGISTRATION NO **(Attach certified copy of certificate)**	

Have you ever been disqualified as a valuer? If yes, full details and reasons to be supplied.

.....

.....

Have you been summoned to appear at any disciplinary hearing of either the South African Institute of Valuers and/or South African Council for the Property Valuers Profession or other recognised professional bodies relating to the valuation profession? If yes, full details including date of hearing, presiding officer and outcome.

No.....

.....

WORK EXPERIENCE IN COMPILING MASS MUNICIPAL VALUATIONS:

NAME OF MUNICIPALITY	PERIOD OF VALUATION ROLL	NO. OF PROPERTIES ON ROLL	REFERENCE	CONTACT NUMBER

List properties included in any of the valuation rolls compiled by you of a special nature/requiring specific skills, i.e. airport, mines, quarries, etc.

DESCRIPTION OF PROPERTY	TYPE OF PROPERTY	METHOD OF VALUATION	MUNICIPALITY

Have you compiled any valuation rolls utilizing GIS and/or Aerial Photography? If yes, provide full details:

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

Have you had any experience in reconciling cadastral data with deeds data and thereafter with the municipal valuation roll? If yes, provide full details.

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

Initials of Service Provider's Authority: .....

VALUATION APPEAL BOARD HEARINGS

Have you appeared in front of a Valuation Appeal Board in terms of the Act?

NAME OF MUNICIPALITY	NAME OF CHAIRPERSON	NAME OF SECRETARY	DATE OF HEARING	No of appeals	No of appeals upheld by the board	What was the % reduction awarded by the board compared to the valuations compiled by you?

I, the undersigned do hereby make oath and say that:
The questionnaire has been completed by me in full. I have not withheld any information in regards the completion of this questionnaire and that all information supplied by me is true and correct.
I further undertake by my signature hereof that in the event of the nominated Municipal valuer in terms of **Schedule 1(A)** hereof not being able to carry out his duties as a result of accident, death, ill health or insolvency, I hereby bind myself jointly and severally with Tenderer and/or the Municipal valuer to fulfil all obligations and requirements of this tender. I do further declare that I have read all the tender requirements including all schedules, forms and other information set out and confirm that I have fully acquainted myself with the terms and conditions thereof and fully understand the content and implication of all such conditions.
Signed by me at _____ this _____ day _____ 2026

_____
SIGNATURE: NOMINATED PERSON AS SUBSTITUTE MUNICIPAL VALUER

JUSTICE OF PEACE/COMMISSIONER OF OATHS	
I hereby certify that the deponent has acknowledged that he/she knows and understands the contents of this affidavit and that it was signed and sworn to before me *at _____ on the .....day of 2026*	_____ *Justice of Peace/Commissioner of Oaths*

SCHEDULE 2(A)

AFFIDAVIT, NOMINATION AND DECLARATION OF ASSISTANT MUNICIPAL VALUER

In the case of nomination for assistant municipal valuer a minimum of two persons must be nominated. This is necessary to provide for succession in the event of one of the nominated assistant municipal valuers not being able to perform his duties as a result of accident, death, ill health or insolvency provided that they accept the appointment jointly and severally.

FULL NAMES	
I.D. NUMBER	
PROFESSIONAL QUALIFICATIONS	
PROFESSIONAL REGISTRATION NO **(Attach certified copy of certificate)**	

Have you ever been disqualified as a valuer? If yes, full details and reasons to be supplied.

.....

.....

Have you been summoned to appear at any disciplinary hearing of either the South African Institute of Valuers and/or South African Council for the Property Valuers Profession or other recognised professional bodies relating to the valuation profession? If yes, full details including date of hearing, presiding officer and outcome.

.....

.....

WORK EXPERIENCE IN COMPILING MASS MUNICIPAL VALUATIONS:

NAME OF MUNICIPALITY	PERIOD OF VALUATION ROLL	NO. OF PROPERTIES ON ROLL	REFERENCE	CONTACT NUMBER

Initials of Service Provider's Authority: .....

List properties included in any of the valuation rolls compiled by you of a special nature/requiring specific skills, i.e. airport, mines, quarries, etc.

DESCRIPTION OF PROPERTY	TYPE OF PROPERTY	METHOD OF VALUATION	MUNICIPALITY

Have you compiled any valuation rolls utilizing GIS and/or Aerial Photography? If yes, provide full details:

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

Have you had any experience in reconciling cadastral data with deeds data and thereafter with the municipal valuation roll? If yes, provide full details.

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

VALUATION APPEAL BOARD HEARINGS

Have you appeared in front of a Valuation Appeal Board in terms of previous legislation or the Act? If yes:

NAME OF MUNICIPALITY	NAME OF CHAIRPERSON	NAME OF SECRETARY	DATE OF HEARING	No of appeals	No of appeals upheld by the board	What was the % reduction awarded by the board compared to the valuations compiled by you?

I, The undersigned do hereby make oath and say that :
The questionnaire has been completed by me in full. I have not withheld any information in regards the completion of this questionnaire and that all information supplied by me is true and correct. I do further declare that I have read all the tender requirements including all schedules, forms and other information set out and confirm that I have fully acquainted myself with the terms and conditions thereof and fully understand the content and implication of all such conditions.
I further undertake by my signature hereof (if I am not the Tenderer) to bind myself jointly and severally with Tenderer to fulfil all obligations and requirements of this tender.
Signed by me at _____ this _____ day _____ 2026

SIGNATURE: ASSISTANT NOMINATED MUNICIPAL VALUER NO. 1

JUSTICE OF PEACE/COMMISSIONER OF OATHS	
I hereby certify that the deponent has acknowledged that he/she knows and understands the contents of this affidavit and that it was signed and sworn to before me *at _____ on the .....day of 2026*	_____ *Justice of Peace/Commissioner of Oaths*

Initials of Service Provider's Authority: .....

SCHEDULE 2(B)

AFFIDAVIT, NOMINATION AND DECLARATION OF ASSISTANT MUNICIPAL VALUER

In the case of nomination for assistant municipal valuer a minimum of two persons must be nominated. This is necessary to provide for succession in the event of one of the nominated assistant municipal valuers not being able to perform his duties as a result of accident, death, ill health or insolvency provided that they accept the appointment jointly and severally.

FULL NAMES	
I.D. NUMBER	
PROFESSIONAL QUALIFICATIONS	
PROFESSIONAL REGISTRATION NO (Attach certified copy of certificate)	

Have you ever been disqualified as a valuer? If yes, full details and reasons to be supplied.

.....

.....

Have you been summoned to appear at any disciplinary hearing of either the South African Institute of Valuers and/or South African Council for the Property Valuers Profession or other recognised professional bodies relating to the valuation profession? If yes, full details including date of hearing, presiding officer and outcome.

.....

.....

WORK EXPERIENCE IN COMPILING MASS MUNICIPAL VALUATIONS:

NAME OF MUNICIPALITY	PERIOD OF VALUATION ROLL	NO. OF PROPERTIES ON ROLL	REFERENCE	CONTACT NUMBER

List properties included in any of the valuation rolls compiled by you of special nature/requiring specific skills, i.e. airport, mines, quarries, etc.

DESCRIPTION OF PROPERTY	TYPE OF PROPERTY	METHOD OF VALUATION	MUNICIPALITY

Initials of Service Provider's Authority: .....

Have you compiled any valuation rolls utilizing GIS and/or Aerial Photography? If yes, provide full details:

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

Have you had any experience in reconciling cadastral data with deeds data and thereafter with the municipal valuation roll? If yes, provide full details.

NAME OF MUNICIPALITY	DATE OF VALUATION ROLL	CONTACT PERSON	PHONE NO

VALUATION APPEAL BOARD HEARINGS

Have you appeared in front of a Valuation Appeal Board in terms of previous legislation or the Act? If yes:

NAME OF MUNICIPALITY	NAME OF CHAIRPERSON	NAME OF SECRETARY	DATE OF HEARING	No of appeals	No of appeals upheld by the board	What was the % reduction awarded by the board compared to the valuations compiled by you?

I, the undersigned _____ do hereby make oath and say that:

The questionnaire has been completed by me in full. I have not withheld any information in regards the completion of this questionnaire and that all information supplied by me is true and correct.

I do further declare that I have read all the tender requirements including all schedules, forms and other information set out and confirm that I have fully acquainted myself with the terms and conditions thereof and fully understand the content and implication of all such conditions.

I further undertake by my signature hereof (if I am not the Tenderer) to bind myself jointly and severally with Tenderer to fulfil all obligations and requirements of this tender.

Signed by me at _____ this _____ day _____ 2026

_____

SIGNATURE: ASSISTANT NOMINATED MUNICIPAL VALUER NO. 2

JUSTICE OF PEACE/COMMISSIONER OF OATHS	
I hereby certify that the deponent has acknowledged that he/she knows and understands the contents of this affidavit and that it was signed and sworn to before me at _____ on the .....day of 2026	

SCHEDULE 3

HUMAN RESOURCES

Tenderer and/or nominated person/s to complete the following schedule:

Schedule 4 must be accompanied by a human resources organogram of Tenderer and nominated person/s, refer pre-qualification criteria for definition of an organogram.

NAME OF PERSON	EXPERIENCE	YEARS OF EXPERIENCE	FULL TIME OR PART TIME ON PROJECT	PROFESSIONAL QUALIFICATIONS

Failure to provide the information as stated above, will result in your tender being declared non-responsive.

DECLARATION,

I, THE UNDERSIGNED (NAME) .....

CERTIFY THAT THE INFORMATION FURNISHED ABOVE IS CORRECT. I ACCEPT THAT THE MUNICIPALITY MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

AUTHORISED SIGNATURE: .....

NAME: .....

CAPACITY: ..... DATE: .....

Initials of Service Provider's Authority: .....