

|                                                                                                                                                        |  |                                                         |  |                                                 |  |                                                                                                                                                                                      |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------|--|-------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------|--|--------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------|--|----------------|-------------------------|-------------------------------------------------|---------------------|---------------------------------------------|
| <div>Turbine Hall<br/>65 Ntengi Piliso<br/>Newtown<br/><br/>P O Box 61542<br/>Marshalltown 2107<br/>Tel : (011) 688-1460<br/>Fax: (011) 688-1556</div> |  | <div>INITIATING DEPARTMENT<br/><b>Zandfontein</b></div> |  | <div>INITIATOR<br/><b>Takalani Ramaru</b></div> |  | <div>QUOTATION REFERENCE<br/><b>RFQJW0200DM24</b></div>                                                                                                                              |  | <div>COLLECTIVE NO.</div>             |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
| <div><b>RFQJW0200DM24 SUPPLY AND REPLACEMENT OF CAR SHADES NET</b></div>                                                                               |  |                                                         |  |                                                 |  | <div>QUOTATION REQUESTED FROM</div>                                                                                                                                                  |  | <div>QUOTATION DATE<br/>60 DAYS</div> |  | <div>VALIDITY<br/>7 DAYS</div> |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
| <div>ITEM NO.</div>                                                                                                                                    |  |                                                         |  |                                                 |  | <div>DESCRIPTION</div>                                                                                                                                                               |  |                                       |  |                                |  | <div>DESCRIPTION OF ITEM OFFERED</div>                                                                                                    |  | <div>UOM</div> | <div>QTY REQUIRED</div> | <div>PRICE QUOTED<br/>EXCL. OF<br/>V.A.T.</div> | <div>DISCOUNT</div> | <div>PRICE QUOTED<br/>INCL. OF V.A.T.</div> |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>SUPPLY AND REPLACEMENT OF CAR SHADES NET @ ZANDFONTEIN NORTH &amp; SOUTH DEPOT OFFICE PARKING LOT</b></div>                                                                  |  |                                       |  |                                |  |                                                                                                                                           |  | <div>29</div>  |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>LABOUR TO REMOVE OLD CARPORT /SHED SAFETY FILE</b></div>                                                                                                                     |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div>It is estimated that tenderers should have a cidb contractor grading of 1GB or higher</div>                                                                                     |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>QUOTE TO BE VALID FOR 60 DAYS</b></div>                                                                                                                                      |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>PLEASE NOTE THAT A COMPULSORY SITE BRIEFING WILL BE HELD ON THE 03 OCTOBER 2024 AT 10H00</b></div>                                                                           |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>Zandfontein regional offices - 5 commerce crescent, kramerville</b></div>                                                                                                    |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>FOR MORE INFORMATION Contact Takalani Ramaru /011386-1040</b></div>                                                                                                          |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>SPECIFIC GOALS</b></div>                                                                                                                                                     |  |                                       |  |                                |  | <div><b>POINTS</b></div>                                                                                                                  |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div>People with Disabilities - Business owned by 51% or more-Black People with Disabilities</div>                                                                                   |  |                                       |  |                                |  | <div>10</div>                                                                                                                             |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div>EME - Businesses owned by Black People - 51% or more</div>                                                                                                                      |  |                                       |  |                                |  | <div>10</div>                                                                                                                             |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>QUOTATION REF AS ABOVE: RFQJW .....&amp; COMPANY NAME ON THE EMAIL SUBJECT LINE</b></div>                                                                                    |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>NB: All suppliers responding to RFQs should use their own company letter head not JW RFQ Template AND MAKE SURE THEIR EMAIL ADDRESS IS VISIBLE ON THEIR QUOTATION.</b></div> |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>NB: A copy of valid lease agreement and municipal account(not older than 3 months)should be submitted with a quote</b></div>                                                 |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>NB: MBD forms attached should be completed and submitted with the quote</b></div>                                                                                            |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>NB: All Quotes should be on PDF (MS WORD, MS EXCEL, PICTURES ARE NOT ALLOWED)</b></div>                                                                                      |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>NB: Copy of valid BBBEE CERTIFICATE or SWORN AFFIDAVIT to be submitted with the quote</b></div>                                                                              |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>Send All quotations to: SUBMISSIONS MUST BE MADE ON THE E-TENDER PORTAL(https://www.etenders.gov.za/) NO EMAIL SUBMISSIONS.</b></div>                                        |  |                                       |  |                                |  |                                                                                                                                           |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>OFFICIAL STAMP</b></div>                                                                                                                                                     |  |                                       |  |                                |  | <div><b>AUTHORISED BY:.....</b></div>                                                                                                     |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>SIGNATURE:.....</b></div>                                                                                                                                                    |  |                                       |  |                                |  | <div><b>DATE:.....</b></div>                                                                                                              |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>1. QUOTATIONS RECEIVED AFTER CLOSE OF BUSINESS ON THE CLOSING DATE WILL NOT BE ACCEPTED.</b></div>                                                                           |  |                                       |  |                                |  | <div><b>2. QUOTATIONS WITHOUT BRAND NAMES WHERE REQUIRED WILL NOT BE ACCEPTED.</b></div>                                                  |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>3. PRICES QUOTED MUST BE AS PER THE UNIT INDICATED AND BE EXCLUDED OF VAT</b></div>                                                                                          |  |                                       |  |                                |  | <div><b>4. QUOTATIONS WITHOUT THE SUPPLIER'S AUTHORISED SIGNATURE WILL NOT BE ACCEPTED. (ONLY IF QUOTED ON THE JW RFQ TEMPLATE)</b></div> |  |                |                         |                                                 |                     |                                             |
|                                                                                                                                                        |  |                                                         |  |                                                 |  | <div><b>5. ACCEPTANCE OF A QUOTATION WILL BE SUBJECT TO JOHANNESBURG WATER'S SUPPLY CHAIN POLICY</b></div>                                                                           |  |                                       |  |                                |  | <div><b>6. TOTAL QUOTATION VALUE TO INCLUDE V.A.T WHERE APPLICABLE</b></div>                                                              |  |                |                         |                                                 |                     |                                             |



## HEALTH, SAFETY & ENVIRONMENTAL (SHE) SPECIFICATION: BASELINE RISK ASSESSMENT

|                   |                                                                    |
|-------------------|--------------------------------------------------------------------|
| PROJECT NUMBER:   | RFQ                                                                |
| PROJECT LOCATION: | Zandfontein Depot                                                  |
| PROJECT DESCR:    | REMOVE DAMAGED CARPOTS SHADES, SUPPLY AND ERECT NEW CARPOTS SHADES |

### POSSIBLE RISKS FOR THIS PROJECT

| Task                                        | Hazard                                                                                                                                                                                                                                                                                               | Risk                                                                                                                                                                             | Consequence                                                                                      | Rating   | Controls                                                                                                                                                                                                                                                                                   |
|---------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ <b>Transportation of material to site</b> | <ul style="list-style-type: none"> <li>✓ Unsafe road conditions</li> <li>✓ Un-road worthy vehicles</li> <li>✓ Equipment and material not safely secured</li> <li>✓ Incompetent drivers</li> <li>✓ Driving under the influence of alcohol</li> <li>✓ Inclement weather</li> <li>✓ Speeding</li> </ul> | <ul style="list-style-type: none"> <li>✓ Accident</li> </ul>                                                                                                                     | <ul style="list-style-type: none"> <li>✓ Personal injuries</li> <li>✓ Property damage</li> </ul> | <b>M</b> | <ul style="list-style-type: none"> <li>✓ Adherence to the speed limit</li> <li>✓ Only competent/ authorised drivers should operate the vehicle</li> <li>✓ Inspection of vehicles</li> <li>✓ Equipment and material to be properly secured</li> <li>✓ Alcohol testing to be done</li> </ul> |
| ✓ <b>Offloading of material and loading</b> | <ul style="list-style-type: none"> <li>✓ Faulty machinery</li> <li>✓ Poor ergonomics</li> <li>✓ Equipments (suspended load) falling on employees</li> <li>✓ Unsafe slings and guide ropes</li> <li>✓ uneven surface</li> </ul>                                                                       | <ul style="list-style-type: none"> <li>✓ Hands can be caught in between materials</li> <li>✓ Obstructed walkways by materials</li> <li>✓ Unsafe stacking of materials</li> </ul> | <ul style="list-style-type: none"> <li>✓ Injuries</li> <li>✓ Back sprain</li> </ul>              | <b>L</b> | <ul style="list-style-type: none"> <li>✓ The correct PPE must be worn</li> <li>✓ Designate the stacking areas and put signs</li> <li>✓ Stacking and storage inspector must be appointed and in charge</li> </ul>                                                                           |

|                                         |                                                                                                                                                                                             |                                                                                                                                                                                         |                                                                                                          |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ✓ <b>access control /entry and exit</b> | ✓ Unsafe camping site                                                                                                                                                                       | Inadequate security / no security                                                                                                                                                       | ✓ Injuries, theft / criminal activities                                                                  | <b>M</b> | ✓ Appoint PSIRA accredited security guard                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| ✓ <b>Working at heights</b>             | <ul style="list-style-type: none"> <li>✓ Use of a step ladder</li> <li>✓ Lack of the correct or PPE not worn correctly, accessing facilities, coupled to unplanned work methods.</li> </ul> | <ul style="list-style-type: none"> <li>✓ Employees falling from heights which could result in a fatality</li> <li>✓ Personal injuries</li> <li>✓ Unsafe erection of scaffold</li> </ul> | <ul style="list-style-type: none"> <li>✓ Fatality, disability</li> <li>✓ Injuries</li> </ul>             | <b>H</b> | <ul style="list-style-type: none"> <li>✓ Wear task specific PPE</li> <li>✓ Adhere to correct safe work procedure</li> <li>✓ Provide proper training for employees working at heights</li> <li>✓ Only employees that are fit to work at heights are permitted to conduct this task</li> <li>✓ Compile fall protection plan, developed by a competent person</li> <li>✓ Inspect the scaffold whenever weather conditions changes (winds, storms)</li> <li>✓ Inspect fall protection and fall prevention equipment</li> <li>✓ Appoint scaffold inspector</li> <li>✓ Use tag system to notify employees of the safety of the scaffold</li> </ul> <p>Display proper signages</p> |
| ✓ <b>Remove and Install carports</b>    | <ul style="list-style-type: none"> <li>✓ Hand tools</li> <li>✓ Angle grinder</li> </ul>                                                                                                     | <ul style="list-style-type: none"> <li>✓ Loss control over hand tools</li> <li>✓ Exposure to disks moving at high speed</li> <li>✓ Exposure to high noise levels above 58DB</li> </ul>  | <ul style="list-style-type: none"> <li>✓ Injuries</li> <li>✓ Injuries</li> <li>✓ Hearing loss</li> </ul> | <b>M</b> | <ul style="list-style-type: none"> <li>✓ PPE to be worn all the times</li> <li>✓ Machine guards</li> <li>✓ PPE to be worn all the times</li> <li>✓ Hearing protection to be used (earplugs)</li> </ul>                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |

|  |                                                                                                                                                                          |                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                               |          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|  | <ul style="list-style-type: none"> <li>✓ Manual handling</li> <li>✓ Lifting equipment</li> <li>✓ Working at Heights</li> <li>✓ Ladders</li> <li>✓ Electricity</li> </ul> | <ul style="list-style-type: none"> <li>✓ Handling Heavy Objects</li> <li>✓ Using defective cranes</li> <li>✓ Incompetent operators</li> <li>✓ Falling</li> <li>✓ Falling from the ladder</li> <li>✓ Using wrong sizes</li> <li>✓ Contact with live electricity</li> </ul> | <ul style="list-style-type: none"> <li>✓ Back pain</li> <li>✓ Injuries</li> <li>✓ Property damage</li> <li>✓ Injuries</li> <li>✓ Injuries</li> <li>✓ Injuries</li> <li>✓ Property damage</li> <li>✓ Electric shock</li> </ul> | <b>M</b> | <ul style="list-style-type: none"> <li>✓ Training of employees on proper lifting techniques</li> <li>✓ Heavy equipment has to be lifted, as teams were not possible lifting equipment has to be used.</li> <li>✓ Servicing and pre-inspections</li> <li>✓ Load testing</li> <li>✓ Training</li> <li>✓ Always follow procedures when working at heights</li> <li>✓ SOP when using ladder must always be followed</li> <li>✓ Training</li> <li>✓ Only competent person to connect electricity</li> </ul> |
|  | <ul style="list-style-type: none"> <li>✓ Drilling machine</li> <li>✓ Debris</li> <li>✓ Poor house keeping</li> </ul>                                                     | <ul style="list-style-type: none"> <li>✓ Inhaling of dust</li> <li>✓ Eye penetration</li> <li>✓ Slip/ Trip/ Fall</li> </ul>                                                                                                                                               | <ul style="list-style-type: none"> <li>✓ Ill health</li> <li>✓ Blindness</li> <li>✓ Injuries</li> </ul>                                                                                                                       | <b>L</b> | <ul style="list-style-type: none"> <li>✓ Dust mask must always be used</li> <li>✓ Correct eye protection PPE must be used</li> <li>✓ Good housekeeping must always be maintained</li> </ul>                                                                                                                                                                                                                                                                                                            |
|  | <ul style="list-style-type: none"> <li>✓ Welding Arch</li> <li>✓ Ladders</li> </ul>                                                                                      | <ul style="list-style-type: none"> <li>Starring welding arc</li> <li>✓ Falling</li> </ul>                                                                                                                                                                                 | <ul style="list-style-type: none"> <li>✓ Eye irritation</li> <li>✓ Injuries</li> </ul>                                                                                                                                        | <b>M</b> | <ul style="list-style-type: none"> <li>✓ Safety glasses to be worn</li> <li>✓ Inspections</li> <li>✓ Buddy system</li> </ul>                                                                                                                                                                                                                                                                                                                                                                           |

### RISK ASSESSMENT MATRIX

| Likelihood                  | Consequences                                                                |                                                             |                                                                               |                                                                 |                                                                        |
|-----------------------------|-----------------------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------------------------|-----------------------------------------------------------------|------------------------------------------------------------------------|
|                             | Insignificant (minor problem easily handled by normal day to day processes) | Minor (Some disruption possible e.g. Damage equal to R150k) | Moderate (significant time / resources required. E.g., damage equal to R500k) | Major (Operations severely damaged. E.g., damages equal to R1m) | Catastrophic (business survival is at risk. Damage equal to R5m – 10m) |
| Almost certain (90% chance) | High                                                                        | High                                                        | Extreme                                                                       | Extreme                                                         | Extreme                                                                |
| Likely (between 50-90%)     | Medium                                                                      | High                                                        | High                                                                          | Extreme                                                         | Extreme                                                                |
| Moderate (between 10-50%)   | Low                                                                         | Medium                                                      | High                                                                          | Extreme                                                         | Extreme                                                                |
| Unlikely (between 3-10%)    | Low                                                                         | Low                                                         | Medium                                                                        | High                                                            | Extreme                                                                |
| Rare (<3%)                  | Low                                                                         | Low                                                         | Medium                                                                        | High                                                            | High                                                                   |

|                                                                                                         |                  |                                                                       |         |               |
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| <br>Johannesburg Water | Document title : | <b>Minimum SHE Requirements for Construction Related RFQ projects</b> |         |               |
|                                                                                                         | Revision         | 00                                                                    | Author: | OHS: Projects |
|                                                                                                         | Effective Date   | January 2017                                                          | Pages:  | 01            |

## 1. SCOPE OF WORK

***Remove damaged carports shades, supply, and erect new carports.***

## 2. PURPOSE

The aim of the SHE specification is to ensure that any contractor which is appointed by Johannesburg Water to conduct any work complies with the SHE requirements of the SHE specification and any other legislative requirement applicable to the contract scope.

## 3. APPLICABILITY

This document is applicable to all contractors and suppliers conducting contractual activities for and on behalf of Johannesburg Water.

## 4. APPOINTMENTS

The contractor and its appointed sub-contractor must make the relevant legislative and non-statutory appointments, which must be maintained valid for the entire contract duration.

All appointees shall be suitably trained and found to be competent for the responsibilities there are assigned for.

Copies of all relevant appointments and the relevant competence certificates must be kept in the relevant SHE file.

## 5. INSURANCE

The contractor and all its appointed sub-contractor(s) shall be registered with an appropriate compensation commissioner and have a valid letter of good standing from commissioner. The contractor is responsible for ensuring the Letter of Good Standing is valid for the entire duration of the project/contract. A copy of the letter of Good Standing must be kept in the SHE file.

## 6. COSTING FOR SHE REQUIREMENTS

The contractor is responsible for ensuring that SHE costing is taken into consideration for the entire project/contract as this will ensure they comply with the SHE legislative requirements

## 7. INDUCTION

An initial induction shall be done with key personnel to familiarize them with the requirements on site and for compiling the SHE file.

Once labourers are appointed JW will conduct an induction on SHE requirements, and the contractor is also required to conduct their company specific induction

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|---------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------|---------------|
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|                                                                                                         | Effective Date   | January 2017                                                          | Pages:  | 01            |

## **8. SUBMISSION OF SAFETY FILE**

- Once appointed the contractor can submit their safety file for approval.
- Approval will be granted when the critical items have been sufficiently addressed.

## **9. RISK ASSESSMENT**

- Every Contractor who has been appointed contractually to conduct work for Johannesburg water shall do compile a baseline risk assessment prior to starting with work, subject to the approval of the Client.
- Thereafter the task based risk assessments will be done daily with every task being done.

## **10. SAFE WORKING PROCEDURES / METHOD STATEMENTS**

The following method statements / safe working procedures must be compiled:

- Incident investigation, emergency plan, waste management plan, PPE procedure, hand tool procedure, hazardous chemical substance procedure.

## **11. WORKING IN ELEVATED POSITIONS**

- JW shall not require or permit any person to work in an elevated position, and no person shall work in an elevated position, unless such work is performed safely from a ladder or scaffolding, or from a position where such person has been made as safe as if he were working from scaffolding.

## **12 WORKING AT AN ELEVATED POSITION**

- An employer shall ensure that every ladder is constructed of sound material and is suitable for the purpose for which it is used, and is fitted with non-skid devices at the bottom ends and hooks or similar devices at the upper ends or of the stiles which shall ensure the stability of the ladder during normal use; or is so lashed, held or secured whilst being used as to ensure the stability of the ladder under all conditions and at all times.

## **13. WELDING, FLAME, CUTTING, SOLDERING AND SIMILAR OPERATIONS (If applicable)**

- JW shall not require or permit welding or flame cutting operations to be undertaken, unless the contractor operating the equipment has been fully instructed in the safe operation and use of such equipment and in the hazards which may arise from its use and effective protection is provided and used for the eyes and respiratory system and, where necessary, for the face, hands, feet, legs, body and clothing of persons performing such operations, as well as against heat, incandescent or flying particles or dangerous radiation;

|                                                                                                         |                  |                                                                       |         |               |
|---------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------|---------------|
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|                                                                                                         | Revision         | 00                                                                    | Author: | OHS: Projects |
|                                                                                                         | Effective Date   | January 2017                                                          | Pages:  | 01            |

- The Contractor must ensure that the workplace is effectively partitioned off where practicable and where not practicable all other persons exposed to the hazards are warned and provided with suitable protective equipment

#### **14 MEDICAL SCREENING REQUIREMENTS**

- The contractor shall ensure that a medical surveillance programme is implemented for all employees.
- The medical examination shall be conducted in line with the employee job profile/job description.
- A valid medical fitness certificate must be submitted together with the SHE File for approval for all employees who will be doing work for Johannesburg Water.
- Any employee(s) who are declared conditionally fit must be provided with employment which does not aggravate their medical condition as to endanger themselves or other employees.
- The following tests shall be done:
  - Audiograms.
  - A cardio-respiratory examination
  - Lung function tests.
  - Eye/ sight tests.
  - A general physical examination.
  - A review of previous medical history.
  - Blood pressure tests
  - Glucose tests
  - Vaccinations (Hepatitis A & Typhoid)

#### **15 TOOLBOX TALKS**

- The contractor shall ensure they conduct toolbox talks with their employees on a weekly basis and records of these must be kept in the SHE file.
- The objective of toolbox talks should be to communicate relevant site information to assist in improvement of occupational health and safety performance.
- Employees must acknowledge the receipt of toolbox talks and this record must also be kept in the SHE file.

#### **16. PERSONAL PROTECTIVE EQUIPMENT (PPE)**

- Contractor must issue their employees SABS approved PPE. A copy of the PPE issue register signed by the employee issued with the PPE must be kept in the SHE file.

|                                                                                                         |                  |                                                                       |         |               |
|---------------------------------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------|---------------|
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|                                                                                                         | Revision         | 00                                                                    | Author: | OHS: Projects |
|                                                                                                         | Effective Date   | January 2017                                                          | Pages:  | 01            |

- Contractor supervisor are required to conduct continuous inspections of the PPE issued to their employees to ensure that they are still in good condition to be used by the employee or they still comply with manufacture requirements.
- The contractor is responsible for ensuring that employees are trained on the safe use of the PPE issued to them, how to maintain it and the limitations of the PPE.
- NO SHORTS OR DRESSES WILL BE ALLOWED ON SITE

#### **17. WORKPLACE SIGNAGE**

- Appropriate symbolic signage must be displayed where it is required by legislation.
- Appropriate warning, mandatory and information signs must be placed where required.
- All signs must comply to SANS/SABS requirements.
- Contractors shall use mandatory and prescribed symbolic safety signs at their lay down and site areas.

#### **18. INCIDENT REPORTING AND INVESTIGATION**

- All incidents shall be reported to the Client before the end of the shift or within 24hrs of occurrence.
- Section 24 incidents shall be reported to DOL using the prescribed format.
- The contractor shall develop an incident management procedure and communicate with all employees.

#### **19. NOTIFICATION OF CONSTRUCTION WORK**

- The contractor shall notify the DOL in the prescribed format of the intended work prior to work.

#### **20. COMPLIANCE MONITORING**

- Weekly inspections and monthly audits will be conducted on site.

#### **21. PROJECT COMPLETION**

- Upon completion of the project the SHE file shall be returned to the Client for retention and close out.



|                  |                                                                       |         |               |
|------------------|-----------------------------------------------------------------------|---------|---------------|
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| Revision         | 00                                                                    | Author: | OHS: Projects |
| Effective Date   | January 2017                                                          | Pages:  | 01            |

| Project details                                                                                    |     |                                     |    |                                                                  |
|----------------------------------------------------------------------------------------------------|-----|-------------------------------------|----|------------------------------------------------------------------|
| <b>Project Scope : Remove damaged carports shades, supply and erect new carports</b>               |     |                                     |    |                                                                  |
| <b>Depot / Site / Department: Zandfontein Depot</b>                                                |     |                                     |    |                                                                  |
| <b>Estimated duration: TBC</b>                                                                     |     |                                     |    |                                                                  |
| Documents required                                                                                 |     |                                     |    |                                                                  |
| Letter of Good Standing                                                                            | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| SHE plan                                                                                           | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Risk Assessment                                                                                    | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Safe working Procedures                                                                            | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Notification of Construction work                                                                  | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Inspection registers                                                                               | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Items required before starting                                                                     |     |                                     |    |                                                                  |
| Medicals                                                                                           | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Vaccinations                                                                                       | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| PPE (boots, hard hats, overall)                                                                    | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Induction                                                                                          | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| Approval from OHS                                                                                  | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| APPOINTMENTS AND COMPETENCIES                                                                      |     |                                     |    |                                                                  |
| <u><b>Construction Supervisor</b></u>                                                              |     |                                     |    |                                                                  |
| Appointment                                                                                        | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| CV (and/ certificates)                                                                             | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> N/A <input type="checkbox"/>            |
| <u><b>Safety Officer</b></u>                                                                       |     |                                     |    |                                                                  |
| Appointment                                                                                        | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| CV (and/ certificates)                                                                             | Yes | <input type="checkbox"/>            | No | <input checked="" type="checkbox"/> N/A <input type="checkbox"/> |
| <b>NB* Other appointments will be based on the number of employees on site as required by law.</b> |     |                                     |    |                                                                  |

|                                                                                   |                  |                                                                       |         |               |
|-----------------------------------------------------------------------------------|------------------|-----------------------------------------------------------------------|---------|---------------|
|  | Document title : | <b>Minimum SHE Requirements for Construction Related RFQ projects</b> |         |               |
|                                                                                   | Revision         | 00                                                                    | Author: | OHS: Projects |
|                                                                                   | Effective Date   | January 2017                                                          | Pages:  | 01            |

## RETURNABLE ANNEXURE A: ACKNOWLEDGEMENT OF SHE SPECIFICATION & ANNEXURES

CONTRACTOR:

I, the undersigned, hereby acknowledge that I have obtained copies of the following listed documentation and confirm that I fully understand the contents thereof and the consequences of non-compliance. The Contractor furthermore reiterates its commitment to compliance of the requirements contained within the following provided documentation:

- Johannesburg Water SOC Ltd, Safety, Health & Environmental (SHE) Specification, Annexure 1: Baseline risk assessment conducted for or on behalf of Johannesburg Water SOC Ltd;

Signed at ..... on this ..... Day of ..... 20.....

| CONTRACT MANAGER    |             |      |           |
|---------------------|-------------|------|-----------|
| NAME                | DESIGNATION | DATE | SIGNATURE |
| CONTRACT SUPERVISOR |             |      |           |
| NAME                | DESIGNATION | DATE | SIGNATURE |
| WITNESS (1)         |             |      |           |
| NAME                | DESIGNATION | DATE | SIGNATURE |
| WITNESS (2)         |             |      |           |
| NAME                | DESIGNATION | DATE | SIGNATURE |

## MBD 4

### DECLARATION OF INTEREST

1. No bid will be accepted from persons in the service of the state<sup>1</sup>.
2. Any person, having a kinship with persons in the service of the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid. In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons connected with or related to persons in service of the state, it is required that the bidder or their authorised representative declare their position in relation to the evaluating/adjudicating authority.
- 3 **In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.**

3.1 Full Name of bidder or his or her representative:.....

3.2 Identity Number: .....

3.3 Position occupied in the Company (director, trustee, shareholder<sup>2</sup>):.....

3.4 Company Registration Number: .....

3.5 Tax Reference Number:.....

3.6 VAT Registration Number: .....

3.7 The names of all directors / trustees / shareholders members, their individual identity numbers and state employee numbers must be indicated in paragraph 4 below.

3.8 Are you presently in the service of the state? YES / NO

3.8.1 If yes, furnish particulars. ....

.....

<sup>1</sup>MSCM Regulations: "in the service of the state" means to be –

(a) a member of –

- (i) any municipal council;
- (ii) any provincial legislature; or
- (iii) the national Assembly or the national Council of provinces;

(b) a member of the board of directors of any municipal entity;

(c) an official of any municipality or municipal entity;

(d) an employee of any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No.1 of 1999);

(e) a member of the accounting authority of any national or provincial public entity; or

(f) an employee of Parliament or a provincial legislature.

<sup>2</sup> Shareholder" means a person who owns shares in the company and is actively involved in the management of the company or business and exercises control over the company.

3.9 Have you been in the service of the state for the past twelve months? .....YES / NO

3.9.1 If yes, furnish particulars.....

3.10 Do you have any relationship (family, friend, other) with persons in the service of the state and who may be involved with the evaluation and or adjudication of this bid? ..... YES / NO

3.10.1 If yes, furnish particulars.

3.11 Are you, aware of any relationship (family, friend, other) between any other bidder and any persons in the service of the state who may be involved with the evaluation and or adjudication of this bid? ..... YES / NO

3.11.1 If yes, furnish particulars

3.12 Are any of the company's directors, trustees, managers, principle shareholders or stakeholders in service of the state? ..... YES / NO

3.12.1 If yes, furnish particulars.

3.13 Are any spouse, child or parent of the company's directors trustees, managers, principle shareholders or stakeholders in service of the state? ..... YES / NO

3.13.1 If yes, furnish particulars.

3.14 Do you or any of the directors, trustees, managers, principle shareholders, or stakeholders of this company have any interest in any other related companies or business whether or not they are bidding for this contract. .... YES / NO

3.14.1 If yes, furnish particulars:

4. Full details of directors / trustees / members / shareholders.

| Full Name | Identity Number | State Employee Number |
|-----------|-----------------|-----------------------|
|           |                 |                       |
|           |                 |                       |
|           |                 |                       |

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|  |  |  |
|  |  |  |

.....  
**Signature**

.....  
**Date**

.....  
**Capacity**

.....  
**Name of Bidder**

## DECLARATION OF BIDDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES

- 1 This Municipal Bidding Document must form part of all bids invited.
- 2 It serves as a declaration to be used by municipalities and municipal entities 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 rejected if that bidder, or any of its directors have:
  - a. abused the municipality's / municipal entity's supply chain management system or committed any improper conduct in relation to such system;
  - b. been convicted for fraud or corruption during the past five years;
  - c. willfully neglected, reneged on or failed to comply with any government, municipal or other public sector contract during the past five years; or
  - d. been listed in the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004).
- 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 National Treasury's database as a company or person prohibited from doing business with the public sector?<br><b>(Companies or persons who are listed on this database were informed in writing of this restriction by the National Treasury after the <i>audi alteram partem</i> rule was applied).</b>                                                                                                                       | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.1.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 |                                |
| 4.2   | Is the bidder or any of its directors listed on the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004)?<br><b>(To access this Register enter the National Treasury's website, <a href="http://www.treasury.gov.za">www.treasury.gov.za</a>, click on the icon "Register for Tender Defaulters" or submit your written request for a hard copy of the Register to facsimile number (012) 3265445).</b> | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 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 court of law outside the Republic of South Africa) for fraud or corruption during the past five years?                                                                                                                                                                                                                                                                                             | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |

|             |                                                                                                                                                                                                                                        |                                 |                                |
|-------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------|
| 4.3.1       | If so, furnish particulars:                                                                                                                                                                                                            |                                 |                                |
| <b>Item</b> | <b>Question</b>                                                                                                                                                                                                                        | <b>Yes</b>                      | <b>No</b>                      |
| 4.4         | Does the bidder or any of its directors owe any municipal rates and taxes or municipal charges to the municipality / municipal entity, or to any other municipality / municipal entity, that is in arrears for more than three months? | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.4.1       | If so, furnish particulars:                                                                                                                                                                                                            |                                 |                                |
| 4.5         | Was any contract between the bidder and the municipality / municipal entity or any other organ of state terminated during the past five years on account of failure to perform on or comply with the contract?                         | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.7.1       | If so, furnish particulars:                                                                                                                                                                                                            |                                 |                                |

### CERTIFICATION

**I, THE UNDERSIGNED (FULL NAME).....  
CERTIFY THAT THE INFORMATION FURNISHED ON THIS  
DECLARATION FORM 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**

Js367bW

## CERTIFICATE OF INDEPENDENT BID DETERMINATION

- 1 This Municipal Bidding Document (MBD) must form part of all bids<sup>1</sup> invited.
  
- 2 Section 4 (1) (b) (iii) of the Competition Act No. 89 of 1998, as amended, prohibits an agreement between, or concerted practice by, firms, or a decision by an association of firms, if it is between parties in a horizontal relationship and if it involves collusive bidding (or bid rigging).<sup>2</sup> Collusive bidding is a *pe se* prohibition meaning that it cannot be justified under any grounds.
  
- 3 Municipal Supply Regulation 38 (1) prescribes that a supply chain management policy must provide measures for the combating of abuse of the supply chain management system, and must enable the accounting officer, among others, to:
  - a. take all reasonable steps to prevent such abuse;
  - b. reject the bid of any bidder if that bidder or any of its directors has abused the supply chain management system of the municipality or municipal entity or has committed any improper conduct in relation to such system; and
  - c. cancel a contract awarded to a person if the person committed any corrupt or fraudulent act during the bidding process or the execution of the contract.
  
- 4 This MBD serves as a certificate of declaration that would be used by institutions to ensure that, when bids are considered, reasonable steps are taken to prevent any form of bid-rigging.
  
- 5 In order to give effect to the above, the attached Certificate of Bid Determination (MBD 9) must be completed and submitted with the bid:

<sup>1</sup> Includes price quotations, advertised competitive bids, limited bids and proposals.

<sup>2</sup> Bid rigging (or collusive bidding) occurs when businesses, that would otherwise be expected to compete, secretly conspire to raise prices or lower the quality of goods and / or services for purchasers who wish to acquire goods and / or services through a bidding process. Bid rigging is, therefore, an agreement between competitors not to compete.

**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:

I certify, on behalf of: \_\_\_\_\_ that:

(Name of Bidder)

1. I have read and I understand the contents of this Certificate;
2. I understand that the accompanying bid will be disqualified if this Certificate is found not to be true and complete in every respect;
3. I am authorized by the bidder to sign this Certificate, and to submit the accompanying bid, on behalf of the bidder;
4. 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;
5. 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:
  - (a) has been requested to submit a bid in response to this bid invitation;
  - (b) could potentially submit a bid in response to this bid invitation, based on their qualifications, abilities or experience; and
  - (c) provides the same goods and services as the bidder and/or is in the same line of business as the bidder

6. 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 consortium<sup>3</sup> will not be construed as collusive bidding.
7. In particular, without limiting the generality of paragraphs 6 above, there has been no consultation, communication, agreement or arrangement with any competitor regarding:
  - (a) prices;
  - (b) geographical area where product or service will be rendered (market allocation)
  - (c) methods, factors or formulas used to calculate prices;
  - (d) the intention or decision to submit or not to submit, a bid;
  - (e) the submission of a bid which does not meet the specifications and conditions of the bid; or
  - (f) bidding with the intention not to win the bid.
8. In addition, there have been no consultations, communications, agreements or 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.
9. 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.

<sup>3</sup> 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.

10. 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

## 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.

### 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**

a) The applicable preference point system for this tender is the 80/20 preference point system.

1.3 Points for this tender (even in the case of a tender for income-generating contracts) shall be awarded for:

- (a) Price; and
- (b) 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         |
| <b>Total points for Price and SPECIFIC GOALS</b> | <b>100</b> |

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.

### 2. DEFINITIONS

- (a) **“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;

- (b) **“price”** means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;
- (c) **“rand value”** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;
- (d) **“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
- (e) **“the Act”** means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

### 3. 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**

$$Ps = 80 \left( 1 - \frac{Pt - P_{min}}{P_{min}} \right)$$

Where

- Ps = Points scored for price of tender under consideration
- Pt = Price of tender under consideration
- Pmin = Price of lowest acceptable tender

##### 3.1.1. POINTS AWARDED FOR PRICE

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

**80/20**

$$Ps = 80 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right) 0$$

Where

- Ps = Points scored for price of tender under consideration
- Pt = Price of tender under consideration
- Pmax = Price of highest acceptable tender

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

| The specific goals allocated points in terms of this tender                                    | Number of points allocated (80/20 system) | Number of points claimed (80/20 system) | Proof of documents per specific goals                                                                                                                                                                                                                   |
|------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>People with Disabilities</b> - Business owned by 51% or more-Black People with Disabilities | <b>10</b>                                 |                                         | Medical Certificate from medical doctor or SARS Confirmation of Diagnosis of Disability. Valid BBEE Certificate issued by SANAS accredited verification agency, DTI/CIPC BBEE Certificate for Exempted Micro Enterprises or Affidavit sworn under Oath. |
| <b>EME</b> - Businesses owned by Black People - 51% or more                                    | <b>10</b>                                 |                                         | Valid BBEE Certificate issued by SANAS accredited verification agency, DTI/CIPC BBEE Certificate for Exempted Micro Enterprises or Affidavit sworn under Oath.                                                                                          |

#### **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:

- i) The information furnished is true and correct;
- ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- iii) 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;
- iv) 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 –
  - (a) disqualify the person from the tendering process;
  - (b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
  - (c) 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;
  - (d) 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
  - (e) forward the matter for criminal prosecution, if deemed necessary.

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

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

**DATE:** .....

**ADDRESS:** .....

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