

# Mhlontlo Local Municipality



## SUPPLIER DATABASE REGISTRATION FORM

Category		Supplier no.	
Name			
Status	Preferred	Approved	Prohibited

### Registration

Registered name	
Trading name	
Company reg. no.	
VAT reg. no.	

### Contact details

Head office			
Local branch			
Postal address			
Physical Address			
Tel No.			
Cell No.			
E-mail			

### Clearances

SARS expiry		CIDB grading	
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### Financial information

Payment		EFT	
Account type		Savings	
Bank		Branch code	
Account holder		Account no.	
Average turnover(p.a)	Current year	Last year	Year before last

### Owners

Name	ID no.	Citizenship	Race	Gender	Disability
	Prohibited	Criminal	Shares	Declared interests?	In the service of state?

Name	ID no.	Citizenship	Race	Gender	Disability
	Prohibited	Criminal	Shares	Declared interests?	In the service of state?
Name	ID no.	Citizenship	Race	Gender	Disability
	Prohibited	Criminal	Shares	Declared interests	In the service of state

### Individuals responsible for daily activities

	Surname & Initials	HDI (Y/N)	Male/Female	Length of service
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### FINANCIAL DECISIONS

Signing of cheques				
Signing and co-signing for loans				
Acquiring lines of credit				
Major acquisition/purchase				
Signing contracts				

### Core business activities

Construction	Media, marketing and communications	Financial Services	Real Estate	Environmental services
Engineering	Facilities Management	Project Management	Surveying	Town and Regional Planning
Specialists	Training Providers	Legal	ICT	Other (specify)

### Business History

Year(s) business has been active in:	Mhlontlo	OR Tambo	Eastern Cape	South Africa
Biggest Contract performed(Exact Rand value in last 2 years)				
Specify the types of contracts				

Does your company have a formal Social Responsibility(specify)			
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**Declaration**

I .....ID No.....

- Confirm that the service provider/supplier will comply with the terms and conditions of the supply chain management policy of the Mhlontlo Local Municipality

Name.....

Signature.....

Designation.....

**CERTIFICATION OF CORRECTNESS OF INFORMATION AS PROVIDED**

- If the information supplied is found to be incorrect , Mhlontlo Local Municipality in addition to any remedies it may have , may :
  - recover from the enterprise all costs ,losses or damages incurred or sustained by Mhlontlo local Municipality as a result of doing business with the company
  - cancel the contract/SLA and claim any damages which Mhlontlo Local Municipality may suffer by having to make favourable arrangements after such cancellations and /or ;
  - impose a penalty on enterprise and list the company in the prohibited companies' list
  - take any actions as may be deemed necessary

Signature.....

Name .....

Designation.....

Physical address.....

Telephone.....

e-mail.....

Signed and sworn before me at .....on this .....day

Of..... and I acknowledge that I know and understand the contents of this document ,that it is true and correct to the best of my knowledge.

Commissioner of Oath\_\_\_\_\_



**Kindly ENSURE THAT THE FOLLOWING DOCUMENTATION IS ATTACHED:**

- **Cancelled cheque**
- **Certified copy of identity documents of shareholders/directors (where applicable)**
- **Certified copy of share certificates**
- **Company registration documents**
- **Tax certificate**
- **VAT Certified copy of equity plan / training plan**
- **Application is signed by a commissioner of oaths**
- **Other relevant documentation**
- **Copy of company profile**
- **B-BBEE Status Level Certificate**
- **Proof of Municipal rates (Office)**
- **CSD Report**

## DECLARATION OF INTEREST

1. No bid will be accepted from persons in the service of the state\*.
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 and/or take an oath declaring his/her interest.
3. In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

3.1 Full Name: .....

3.2 Identity Number: .....

3.3 Company Registration Number: .....

3.4 Tax Reference Number: .....

3.5 VAT Registration Number: .....

3.6 Are you presently in the service of the state\*

**YES / NO**

3.6.1 If so, furnish particulars.

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\* 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.

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3.7 Have you been in the service of the state for the past Twelve months? **YES / NO**

3.7.1 If so, furnish particulars.

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3.8 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?

3.8.1 If so, furnish particulars. **YES/NO**

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.....

3.9 Are you, aware of any relationship (family, friend, other) between a bidder and any persons in the service of the state who may be involved with the evaluation and or adjudication of this bid?

3.9.1 If so, furnish particulars **YES/NO**

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.....

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

3.10.1 If so, furnish particulars.

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3.11 Are any spouse, child or parent of the company's directors, Managers, principle shareholders or stakeholders in service of the state? **YES / NO**

3.11.1 If so, furnish particulars.

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3.12 Are you prohibited to trade with the state as per National Treasury database **YES/NO**

3.12.1 If so, furnish particulars.

.....  
.....

**CERTIFICATION**

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

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

**I ACCEPT THAT THE STATE MAY ACT AGAINST ME SHOULD THIS  
DECLARATION PROVE TO BE**

**FALSE.**

.....  
Signature Date

.....  
Position Name of Bidder

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**OFFICE USE ONLY:**

**Approval of the prospective supplier form:**

3.12 Is the supplier prohibited to trade with the state as per National Treasury database **YES/NO**

3.12.1 If so, furnish particulars.

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Approved By: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_

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**Processing and approval on the system**

Captured by: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_

Approved By: \_\_\_\_\_ Signature \_\_\_\_\_ Date: \_\_\_\_\_