

# Sedibeng District Municipality



## BID DOCUMENT

<b>Tender No.</b>	8/2/29-2023
<b>Closing Date and Time</b>	Tuesday, 26 September 2023@12H00
<b>Description</b>	
<b>Invitation for Service Providers for the Provision of Medical Aid Brokerage Services</b>	
<b>Contractor / Bidder</b>	
<b>Bid amount</b>	R
<b>Physical address</b>	
<b>Contact person</b>	
<b>Telephone no.</b>	
<b>Fax no.</b>	
<b>Cell no.</b>	
<b>Email address</b>	
<b>Central Supplier Database No.</b>	
<b>*****SUBMIT TWO COPIES (02) MARKED CLEARLY:“ ORIGINAL” AND “COPY”</b>	

## CONDITIONS OF TENDER

1. The prospective bidder's attention is drawn to the following list of forms, attached to this document and other documents that **shall** be completed and submitted with his/her bid documents:
  - a) Tender Form
  - b) Form of Offer
  - c) Declaration of interest
  - d) Certificate of independent Bid Determination
  - e) Bidders are requested to submit their Tax Clearance Pin provided by SARS to verify that the Tax Matters are in order.
  - f) A current account or proof that utilities account (municipal rates and taxes, water and lights account) of the bidder is up to date. (Not in arrears for more than 3 months).
  - g) Proof of registration for VAT (if applicable).
  - h) Valid B-BBEE Certificate Certified copy
  - i) Central Supplier Database (CSD) Registration Number.

In terms of Section 112 (1)I of the Local Government Municipal Finance Management Act, (Act 56 of 2003), persons who were convicted of fraud or corruption or who willfully neglected, reneged on or failed to comply with a government tender during the past 5 years, or whose tax matters are not cleared by the South African Revenue Services may not participate in the tendering process and the Tenderer shall submit a sworn statement to this effect.

2. **The official tender form shall be completed in BLACK ink and any corrections to the official tender form must also be made in BLACK ink and signed by the bidder. Any tender documents received with correction fluid (Tippex) corrections shall be disqualified.**
3. Bids shall be sealed and endorsed (with bid number and bid description) and must be deposited at Sedibeng District Municipality's tender box (Ground Floor, outside the main building).
4. Sedibeng District Municipality's Supply Chain Management Policy shall apply.
5. Late, Telexed, faxed or emailed tenders will not be accepted.
6. The Council does not bind itself to accept the lowest or any tender and reserves the right to accept any tender in whole or in part.
7. Persons in the service of the state are not allowed to bid.
8. In the event that you are awarded a tender the strict compliance with terms have to observed and in so doing within a period (3 days) (\*after an order is issued) a confirmation letter must be forwarded by you in terms of which you need to indicate whether or not you will be in a position to source the items per the tender and deliver same by the due date.
9. In the event that you do not furnish us with the said letter as requested and fail to comply as per the tender the Sedibeng District Municipality reserves in terms of rights to cancel this tender automatically after 3 days on the basis of your non-compliance and furthermore should you fail to deliver said goods which may necessitate the allocation of a new supplier the Sedibeng District Municipality may impose any further

penalty or charges against you.

10. **In the case where all MBD Documents are not completely filled and returned, your quotation will be disqualified.**
11. **The 80/20 Preferential Procurement System will be used to evaluate all the Formal Written Quotations.**
12. Bidders must ensure that, the company status is “**in business**” with the **Company and Intellectual Property Commission (CIPC)**.
13. Bidders who are not registered on the Central Supplier Database are requested to contact National Treasury at [csd@treasury.gov.za](mailto:csd@treasury.gov.za) or 012 406 9222 for any assistance.
14. Exempted Micro Enterprises can submit a letter from the accounting officer; and
15. A trust, consortium or joint venture must submit a consolidated B-BBEE Status Level Verification.
16. Bidder must attach Financial Services Board Certificate
17. Bidder must attach confirmation of membership with the Council for Medical Schemes

**Sedibeng District Municipality**  
**RFQ Number: 8/2/2/9-2023**

<b>DOCUMENT</b>	
INVITATION TO BID	<b>MBD 1</b>
CLEARANCE CERTIFICATE FOR WATER & LIGHTS	
TERMS OF REFERENCE/SPECIFICATIONS	
PRICING SCHEDULE – FIRM PRICES (PURCHASES)	<b>MBD 3.1</b>
PRICING SCHEDULE – PROFESIONAL SERVICES	<b>MBD 3.2</b>
DECLARATION OF INTEREST	<b>MBD 4</b>
PREFERENCE POINTS CLAIM FORM	<b>MBD 6.1</b>
CONTRACT FORM – RENDERING OF SERVICE	<b>MBD 7.2</b>
DECLARATION OF BIDDER’S PAST SUPPLY CHAIN MANAGEMENT PRACTICES	<b>MBD 8</b>
CERTIFICATE OF INDEPENDENT BID DETERMINATION	<b>MBD 9</b>
FORM OF OFFER AND ACCEPTANCE	
CREDIT ORDER INSTRUCTION	

**PART A  
INVITATION TO BID**

<b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE SEDIBENG DISTRICT MUNICIPALITY</b>					
BID NUMBER:	8/2/2/9-2023	CLOSING DATE:	Tuesday, 26 September 2023	CLOSING TIME:	12:00AM
DESCRIPTION	Invitation for a service provider for the provision of Medical Aid Brokerage Services				
<b>THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7).</b>					

**BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS**

**MUNICIPAL BUILDING  
GROUND FLOOR  
CORNER BEACONSFIELD AND LESLIE  
VEREENIGING**

<b>SUPPLIER INFORMATION</b>					
NAME OF BIDDER					
POSTAL ADDRESS					
STREET ADDRESS					
TELEPHONE NUMBER	CODE		NUMBER		
CELLPHONE NUMBER					
FACSIMILE NUMBER	CODE		NUMBER		
E-MAIL ADDRESS					
TAX COMPLIANCE STATUS	TCS PIN:		CSD No:		
B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE [TICK APPLICABLE BOX]	<input type="checkbox"/> Yes  <input type="checkbox"/> No		B-BBEE STATUS LEVEL SWORN AFFIDAVIT		<input type="checkbox"/> Yes  <input type="checkbox"/> No

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

ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED?	<input type="checkbox"/> Yes <input type="checkbox"/> No [IF YES ENCLOSE PROOF]	ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES /WORKS OFFERED?	<input type="checkbox"/> Yes <input type="checkbox"/> No [IF YES, ANSWER PART B:3 ]
TOTAL NUMBER OF ITEMS OFFERED		TOTAL BID PRICE	R
SIGNATURE OF BIDDER	.....	DATE	
CAPACITY UNDER WHICH THIS BID IS SIGNED			
<b>BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO:</b>		<b>TECHNICAL INFORMATION MAY BE DIRECTED TO:</b>	
DEPARTMENT	Supply Chain Management	DEPARTMENT	Human Resource
CONTACT PERSON	Madikgomo Ramonana	CONTACT PERSON	Mrs. Caroline Serame
TELEPHONE NUMBER		TELEPHONE NUMBER	066 473 4299
E-MAIL ADDRESS	<a href="mailto:madikgomor@sedibeng.gov.za">madikgomor@sedibeng.gov.za</a>	E-MAIL ADDRESS	<a href="mailto:carolines@sedibeng.gov.za">carolines@sedibeng.gov.za</a>

**PART B  
TERMS AND CONDITIONS FOR BIDDING**

**1. BID SUBMISSION:**

- 1.1. Bids must be delivered by the stipulated time to the correct address. Late bids will not be accepted for consideration.
- 1.2. **ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED– (NOT TO BE RE-TYPED) OR ONLINE**
- 1.3. This bid is subject to the Preferential Procurement Policy Framework Act and The Preferential Procurement Regulations, 2017, The General Conditions Of Contract (GCC) and, if applicable, any other special conditions of contract.

**2. TAX COMPLIANCE REQUIREMENTS**

- 2.1 Bidders must ensure compliance with their tax obligations.
- 2.2 Bidders are required to submit their unique personal identification number (PIN) issued by SARS to enable the organ of state to view the taxpayer’s profile and tax status.
- 2.3 Application for the tax compliance status (TCS) certificate or pin may also be made via e-filing. In order to use this provision, taxpayers will need to register with SARS as e-filers through the website www.sars.gov.za.
- 2.4 Foreign suppliers must complete the pre-award questionnaire in part b: 3.
- 2.5 Bidders may also submit a printed TCS certificate together with the bid.
- 2.6 In bids where consortia / joint ventures / sub-contractors are involved, each party must submit a separate TCS certificate / pin / CSD number.
- 2.7 Where no TCS is available but the bidder is registered on the central supplier database (CSD), a CSD number must be provided.

**3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS**

- 3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?  YES  NO  N/A
- 3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA?  YES  NO  N/A
- 3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?  YES  NO  N/A
- 3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?  YES  NO  N/A
- 3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?  YES  NO  N/A

**If the answer is “NO” to all the above, then it is not a requirement to register for a tax compliance status system pin code from the South African Revenue Service (SARS) and if not register as per 2.3 above.**

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

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

SIGNATURE OF BIDDER: .....

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

DATE:.....

**ATTACH SARS TAX CLEARANCE CERTIFICATE/PIN HERE**

MIBD2:  
DISCONTINUED  
MIFMA CIRCULAR  
NO.90





## DEPARTMENT: SUPPLY CHAIN MANAGEMENT

Sedibeng District Municipality  
P.O. Box 471  
Vereeniging, 1930  
Republic of South Africa  
Tel: +27 66 472 7253

### CLEARANCE CERTIFICATE FOR WATER & LIGHTS

Section 38 (d) (i) of Municipal Supply Chain Regulations requires that the municipality must reject a bidder whose municipal rates and taxes are in arrears for more than three months.

The purpose of this form is to obtain prove that municipal services, rates and taxes of the service provider are not more than three months in arrears with the relevant municipality / landlord in the municipal area where the service provider conduct his / her business. **This form is to be completed only if the service provider's rates and taxes are not in arrears for more than three months.**

**EACH BIDDER MUST COMPLETE THE BELOW CHECKLIST (Please tick with X where appropriate):**

QUESTIONS	YES	NO
1. Is your municipal rates and taxes account up to date/current (not in arrears for more than three months)?		
2. If yes, please submit proof in the form of the <b>original or certified copy</b> of the bidder's municipal rates and taxes account.		
3. Does the bidder lease/rent the property where the business is situated?		
4. If yes provide the contact name and contact number of the lessor/landlord:		
<b>Contact Name:</b>	<b>Contact Number:</b>	
5. Please attach the copy of the lease agreement signed by the Landlord/ lessor and the tenant/lessee as proof.		

I (FULL NAMES), \_\_\_\_\_ OF (PHYSICAL ADDRESS) \_\_\_\_\_ being a Director / principal shareholder, owner of company<sup>1</sup> (COMPANY NAME):

Hereby confirms that, the information submitted in this form is accurate, to the best of my knowledge.

\_\_\_\_\_  
Signature

**NB: IF YOU FAIL TO COMPLETE THIS FORM, PLEASE REGARD YOUR BID AS NON RESPONSIVE!**

ATTACH UTILITIES ACCOUNT HERE



## **Invitation for a service provider for the provision of Medical Aid Brokerage Services**

**BID NO: 8/2/29-2023**

### **1. PURPOSE**

The Sedibeng District Municipality (SDM) intends appointing Medical Aid Brokers for the provision of Medical Aid Brokerage Services to its employees for the duration of twelve months renewable annually subject to their respective performance.

It is expected of the Medical Aid Brokers to offer the services to the employees of Sedibeng District Municipality totalling a number of 625 who are members of the following Medical Aid schemes:

- a. Bonitas
- b. Hosmed
- c. LAhealth
- d. Samwu Med
- e. Key health

### **2. OBJECTIVES**

The envisaged services to the employees include:

- Induction:

Conducting member education and training on scheme products and services.

Induct new employees on packages of the Medical Aid Schemes

Organize Wellness events and Healthcare Benefit days.

- Facilitating the changes to any new Medical Aid schemes arrangements, by providing

Individual costing comparisons

Assist new members with enrolment forms.

Arrange for second membership cards when required.

Arrange for add-on or deletion of dependants when applicable, e.g. spouse for newlyweds and new-born children.

Detailed membership listings for Human Resources Administrator to load the relevant contribution process timeously.

Ensure that new membership cards are issued correctly, with minimum delay.

- Providing assistance to the Council and individual members on any problem relating to membership, contributions, claims or any other relevant Medical Aid services enquiries.  
Call at scheme office on behalf of the members and clear up, sort out problem and return to members with update information on a monthly basis.

### 3. **ONGOING SERVICES**

Medical Aid Brokers will ensure that:

- The SDM is advised of any changes to the Health Care Industry that may have an impact on the municipality, including any changes to the Medical Schemes Act of 1998 and amendments to its regulations.
- The intermediary will at all-time exercise professionalism in his/her dealings with the Municipality and will at all times ensure that engagement with employees does not disrupt delivery of services.
- Current and future medical aid requirements of the municipality are reviewed on a regular basis and feedback is provided to ensure that the healthcare strategy continues to meet the needs and requirements of the municipality and its employees

### 4. **SPECIFICATIONS**

The respondent should possess the following:

- The medical broker must be familiar with the current medical aid legislation.
- The medical broker and all its consultants should be currently accredited with the Council for Medical Schemes and Financial Services Board.
- The broker must comply with provision of the Medical Schemes Act No. 131 of 1998 and specifically section 65 and Regulations 28 of the Act.
- The broker will be compensated as provided for in the Act by the medical schemes.
- To be contracted to at least three of the five (Bonitas, Hosmed, LA Health, SAMWU med and Key Health) recognized medical schemes within the Local Government Industry.
- The company should have an IT Infrastructure.
- Scope of the service- Provide proposals on how you will execute services for Sedibeng District Municipality in terms of services of its nine (9) work sites on a monthly basis and during Window period

### 5. **CONDITIONS OF APPOINTMENT**

All employees on Medical Aid Schemes will be serviced by Medical Brokers for as long as they are active members of the Medical Aid Schemes.

The appointment will be reviewed annually to comply with the accreditation requirements of the Council for Medical Schemes and Financial Services Board.

6. **REMUNERATION**

The service rendered by Medical Brokers, will bear no direct cost to Sedibeng District Municipality or the employees, as the intermediary will be remunerated as per the Medical Schemes Act and or the standard current agreement with Medical Fund.

7. **MINIMUM REQUIREMENTS**

- Up to date utilities account e.g. Municipal Rates & Taxes account or A Valid Lease Agreement (Please note that if the Water and Lights statement is not in the company's name, kindly submit a lease agreement between the company and the landlord)
- Registered on Central Database (CSD)
- Tax compliant status document / Tax compliance status pin (to enable the municipality to verify the bidders tax compliance status)
- Bidders must attach Financial Services Board Certificate,
- Bidders must attach confirmation of membership with the Council for Medical Schemes.

**EVALUATION CRITERIA Values: 1 = Poor, 2 = Average, 3 = Good, 4 = Very Good and 5 = Excellent**

No	Description	Points	Value (Max of 5 points per criteria)	Score = (Weight x Value) (Max score of 500)
1.	Understanding the scope of the project by submitting; Implementation plan on how the bidder will execute services for Sedibeng District Municipality in terms of services of its nine (9) work sites on a monthly basis and during Window periods.	40		
2.	Three completion certificate in Similar Project 3 Certificates = 5 Points 2 Certificates = 3 Points 1 Certificates = 1 Point	30		
3.	Track Record 5 years or above = 5 points; 2 to 4 years = 3 points; 1 year or less = 1 point	30		
		B-BBEE = 20		

## **EVALUATION CRITERIA**

Proposals will be evaluated based on 80/20 principle and the details are as follows:

DESCRIPTION	POINTS
PRICE	80
B-BBEE	20
TOTAL	100

The bid will be based on Point System 80:20 point system.

<b>1<sup>ST</sup> STAGE</b>	FUNCTIONALITY TOTAL SCORE : 100%
	THRESHOLD (MINIMUM SCORE REQUIRED = 70%)

<b>2<sup>nd</sup> stage</b>		<b>POINTS</b>
<b>PRICE</b>		80
<b>SPECIFIC GOALS</b>		20
Youth	4 points (100%) 2 Points (50%) 1 points (25%)	
<i>Disability (medical certificate needed)</i>	4 points (100%) 2 Points (50%) 1 points (25%)	
Locality	4 points (100%) 2 Points (50%) 1 points (25%)	
Women	4 points (100%) 2 Points (50%) 1 points (25%)	
51 % black owned	4 points (100%) 2 Points (50%) 1 points (25%)	
<b>Total points for Price and SPECIFIC GOALS</b>		<b>100</b>

### **Contact Person:**

Ms Madikgomo Ramonana @ 066 472 253 for Supply Chain Management related queries.  
Ms Caroline Serame @ 066 473 4299 for Technical related queries.

### **Technical Specification Compiled by:**

\_\_\_\_\_  
Ms C. Serame  
Assistant Manager Personnel Admin

**PRICING SCHEDULE – FIRM PRICES (PURCHASES)**

**NOTE: ONLY FIRM PRICES WILL BE ACCEPTED. NON-FIRM PRICES (INCLUDING PRICES SUBJECT TO RATES OF EXCHANGE VARIATIONS) WILL NOT BE CONSIDERED**

IN CASES WHERE DIFFERENT DELIVERY POINTS INFLUENCE THE PRICING, A SEPARATE PRICING SCHEDULE MUST BE SUBMITTED FOR EACH DELIVERY POINT

Name of Bidder.....	Bid Number: <b>8/2/2/9-2023</b>
Closing Time: <b>12H00</b> Closing Date: <b>Tuesday, 26 September 2023</b>	
<b>OFFER TO BE VALID FOR 90 DAYS FROM THE CLOSING DATE OF BID.</b>	

ITEM NO.	QUANTITY	DESCRIPTION	BID PRICE IN RSA CURRENCY **(ALL APPLICABLE TAXES INCLUDED)

- Required by: .....
- At: .....
- Brand and Model .....
- Country of Origin .....
- Does the offer comply with the specification(s)? \*YES/NO
- If not to specification, indicate deviation(s) .....
- Period required for delivery .....
- \*Delivery: Firm/Not firm
- Delivery basis .....

Note: All delivery costs must be included in the bid price, for delivery at the prescribed destination.

\*\* “all applicable taxes” includes value- added tax, pay as you earn, income tax, unemployment insurance fund contributions and skills development levies

\*Delete if not applicable



**PRICING SCHEDULE**  
**(Professional Services)**

Name of Bidder.....	Bid Number: 8/2/2/9 - 2023
Closing Time: 12.00pm	Closing Date:26 September 2023

OFFER TO BE VALID FOR.....DAYS FROM THE CLOSING DATE OF BID.

ITEM NO.	QUANTITY	DESCRIPTION	BID PRICE IN RSA CURRENCY **(ALL APPLICABLE TAXES INCLUDED)
1.		The accompanying information must be used for the formulation of proposals.	
		2. Bidders are required to indicate a ceiling price based on the total estimated time for completion of all phases and including all expenses inclusive of all applicable taxes for the project.	R.....
		3. PERSONS WHO WILL BE INVOLVED IN THE PROJECT AND RATES APPLICABLE (CERTIFIED INVOICES MUST BE RENDERED IN TERMS HEREOF)	
4.	PERSON AND POSITION	HOURLY RATE	DAILY RATE
	-----		R-----
	-----		R-----
	-----		R-----
	-----		R-----
	-----		R-----
		5. PHASES ACCORDING TO WHICH THE PROJECT WILL BE COMPLETED, COST PER PHASE AND MAN-DAYS TO BE SPENT	
		-----	R-----
--		----- days	
		-----	R-----
---		----- days	
		-----	R-----
---		----- days	

R-----

----- days

5.1 Travel expenses (specify, for example rate/km and total km, class of air travel, etc). Only actual costs are recoverable. Proof of the expenses incurred must accompany certified invoices.

DESCRIPTION OF EXPENSE TO BE INCURRED AMOUNT	RATE	QUANTITY
---	------	----------

----- .....	----- .....	.....
R..... ----- .....	----- .....	.....
R..... ----- .....	----- .....	.....
R..... ----- .....	----- .....	.....
R..... ----- .....	----- .....	.....

\*\*\*"all applicable taxes" includes value-added taxes, pay as you earn, income tax, unemployment insurance fund contributions and skills development levies.

5.2 Other expenses, for example accommodation (specify, eg. Three star hotel, bed and breakfast, telephone cost, reproduction cost, etc.). On basis of these particulars, certified invoices will be checked for correctness. Proof of the expenses must accompany invoices.

DESCRIPTION OF EXPENSE TO BE INCURRED AMOUNT	RATE	QUANTITY
---	------	----------

----- .....	----- .....	.....
R..... ----- .....	----- .....	.....
R..... ----- .....	----- .....	.....
R..... ----- .....	----- .....	.....

TOTAL:

R.....

6. Period required for commencement with project after acceptance of bid  
.....

7. Estimated man-days for completion of project  
.....

8. Are the rates quoted firm for the full period of contract?  
.....\*YES/ NO.

9. If not firm for the full period, provide details of the basis on which  
adjustments will be applied for, for example consumer price  
index.....

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

**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 positioning 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, hareholder<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 / shareholder 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?

<b>Please ✓ one option:</b>			
<b>YES</b>		<b>NO</b>	

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?

<b>Please ✓ one option:</b>			
<b>YES</b>		<b>NO</b>	

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?

<b>Please ✓ one option:</b>			
<b>YES</b>		<b>NO</b>	

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?

<b>Please ✓ one option:</b>			
<b>YES</b>		<b>NO</b>	

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?

<b>Please ✓ one option:</b>			
<b>YES</b>		<b>NO</b>	

3.12.1 If yes, furnish particulars.

.....  
.....

3.13 Are any spouse, child or parent of the company's director's trustees, managers, principle shareholders or stakeholders in service of the state?

<b>Please ✓ one option:</b>			
<b>YES</b>		<b>NO</b>	

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?

<b>Please ✓ one option:</b>			
<b>YES</b>		<b>NO</b>	

3.14.1 If yes, furnish particulars:

.....

5.1 Full details of directors / trustees / members / shareholders. **\*\* THIS IS COMPULSORY\*\***

Full Name	Identity Number	State Employee Number

.....  
**Signature**

.....  
**Date**

.....  
**Capacity**

.....  
**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.

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

**1. GENERAL CONDITIONS**

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

- the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- the 90/10 system for requirements with a Rand value above R50 000 000 (all applicable taxes included).

**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.
- b) The 80/20 preference point system will be applicable in this tender. The lowest/ highest acceptable tender will be used to determine the accurate system once tenders are received.

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:

	<b>POINTS</b>
<b>PRICE</b>	80
<b>SPECIFIC GOALS</b>	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 OR 90/10 PREFERENCE POINT SYSTEMS**

A maximum of 80 or 90 points is allocated for price on the following basis:

$$\begin{array}{ccc}
 \mathbf{80/20} & \mathbf{or} & \mathbf{90/10} \\
 \\
 Ps = 80 \left( 1 - \frac{Pt - P_{min}}{P_{min}} \right) & \mathbf{or} & Ps = 90 \left( 1 - \frac{Pt - P_{min}}{P_{min}} \right)
 \end{array}$$

Where

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

**3.2. FORMULAE FOR DISPOSAL OR LEASING OF STATE ASSETS AND INCOME GENERATING PROCUREMENT**

**3.2.1. POINTS AWARDED FOR PRICE**

A maximum of 80 or 90 points is allocated for price on the following basis:

$$\begin{array}{ccc}
 \mathbf{80/20} & \mathbf{or} & \mathbf{90/10} \\
 \\
 Ps = 80 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right) & \mathbf{or} & Ps = 90 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right)
 \end{array}$$

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:



- 4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the tender documents, stipulate in the case of—
- (a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or
  - (b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system,
- then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

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

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

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

The specific goals allocated points in terms of this tender	Number of points allocated (80/20 system) (To be completed by the organ of state)	Number of points claimed (80/20 system) (To be completed by the tenderer)
Youth	4 points (100%) 2 Points (50%) 1 points (25%)	
Disability (medical certificate needed)	4 points (100%) 2 Points (50%) 1 points (25%)	
Locality/township	4 points (100%) 2 Points (50%) 1 points (25%)	
Women	4 points (100%) 2 Points (50%) 1 points (25%)	
% Black owned	4 points (100%) 2 Points (50%) 1 points (25%)	

**DECLARATION WITH REGARD TO COMPANY/FIRM**

4.3. Name of company/firm.....

4.4. Company registration number: .....

4.5. 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]

4.6. 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:** .....

.....

.....

.....

**ATTACH BBB-EE CERTIFICATE / SWORN AFFIDAVIT  
HERE**

**CONTRACT FORM - RENDERING OF SERVICES**

**THIS FORM MUST BE FILLED IN DUPLICATE BY BOTH THE SERVICE PROVIDER (PART 1) AND THE PURCHASER (PART 2). BOTH FORMS MUST BE SIGNED IN THE ORIGINAL SO THAT THE SERVICE PROVIDER AND THE PURCHASER WOULD BE IN POSSESSION OF ORIGINALLY SIGNED CONTRACTS FOR THEIR RESPECTIVE RECORDS.**

**PART 1 (TO BE FILLED IN BY THE SERVICE PROVIDER)**

1. I hereby undertake to render services described in the attached bidding documents to (name of the institution **SEDIBENG DISTRICT MUNICIPALITY** in accordance with the requirements and task directives / proposals specifications stipulated in Bid Number **8/2/2/9-2023 9** at the price/s quoted. My offer/s remain binding upon me and open for acceptance by the Purchaser during the validity period indicated and calculated from the closing date of the bid.
2. The following documents shall be deemed to form and be read and construed as part of this agreement:
  - (i) Bidding documents, *viz*
    - Invitation to bid;
    - Tax clearance certificate;
    - Pricing schedule(s);
    - Filled in task directive/proposal;
    - Preference claims for Broad Based Black Economic Empowerment Status Level of Contribution in terms of the Preferential Procurement Regulations 2011;
    - Declaration of interest;
    - Declaration of Bidder's past SCM practices;
    - Certificate of Independent Bid Determination;
    - Special Conditions of Contract;
  - (ii) General Conditions of Contract; and
  - (iii) Other (specify)
3. I confirm that I have satisfied myself as to the correctness and validity of my bid; that the price(s) and rate(s) quoted cover all the services specified in the bidding documents; that the price(s) and rate(s) cover all my obligations and I accept that any mistakes regarding price(s) and rate(s) and calculations will be at my own risk.
4. I accept full responsibility for the proper execution and fulfilment of all obligations and conditions devolving on me under this agreement as the principal liable for the due fulfillment of this contract.
5. I declare that I have no participation in any collusive practices with any bidder or any other person regarding this or any other bid.

6. I confirm that I am duly authorised to sign this contract.

NAME (PRINT) .....

CAPACITY .....

SIGNATURE .....

NAME OF FIRM .....

DATE .....

WITNESSES

1 .....

2 .....

- - - -

**CONTRACT FORM - RENDERING OF SERVICES**

**PART 2 (TO BE FILLED IN BY THE PURCHASER)**

1. I..... in my capacity as..... accept your bid under reference number 8/2/29-2023 \ dated ..... for the rendering of services indicated hereunder and/or further specified in the annexure(s).
2. An official order indicating service delivery instructions is forthcoming.
3. I undertake to make payment for the services rendered in accordance with the terms and conditions of the contract, within 30 (thirty) days after receipt of an invoice.

<i>DESCRIPTION OF SERVICE</i>	<b>PRICE (ALL APPLICABLE TAXES INCLUDED)</b>	<b>COMPLETION DATE</b>	<b>B-BBEE STATUS LEVEL OF CONTRIBUTION</b>	<b>MINIMUM THRESHOLD FOR LOCAL PRODUCTION AND CONTENT (if applicable)</b>

4. I confirm that I am duly authorised to sign this contract.

SIGNED AT ..... ON .....

NAME (PRINT) .....

SIGNATURE .....

OFFICIAL STAMP

**WITNESSES**

1 .....

2 .....

---

## 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 of Restricted Suppliers as companies or persons prohibited from doing business with the public sector?  (Companies or persons who are listed on this Database were informed in writing of this restriction by the Accounting Officer/Authority of the institution that imposed the restriction after the <i>audialterampartem</i> rule was applied).  <b>The Database of Restricted Suppliers now resides on the National Treasury’s website(<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) and can be accessed by clicking on its link at the bottom of the home page.</b>	Yes <input type="checkbox"/>	No <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)?  <b>The Register for Tender Defaulters can be accessed on the National Treasury’s website (<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) by clicking on its link at the bottom of the home page.</b>	Yes <input type="checkbox"/>	No <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 <input type="checkbox"/>	No <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 <input type="checkbox"/>	No <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 <input type="checkbox"/>	No <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





**DEPARTMENT: SUPPLY CHAIN  
MANAGEMENT**

Sedibeng District Municipality  
P.O. Box 471  
Vereeniging, 1930  
Republic of South Africa  
Tel: +27 16 450 3110  
Fax: +27 86 682 9892

**Please provide at least 3 references**

1. Name:.....  
Company:.....  
Position Held:.....  
Contact Number (s) work.....  
Mobile.....
2. Name:.....  
Company:.....  
Position Held:.....  
Contact Number (s) work.....  
Mobile.....
3. Name:.....  
Company:.....  
Position Held:.....  
Contact Number (s) work.....  
Mobile.....
4. Name:.....  
Company:.....  
Position Held:.....  
Contact Number (s) work.....  
Mobile.....
5. Name:.....  
Company:.....  
Position Held:.....  
Contact Number (s) work.....  
Mobile.....

**PLEASE NOTE THAT THIS IS COMPULSORY\*\*\***

ATTACH ADDITIONAL  
LETTERS OF REFERENCE  
(IF APPLICABLE)  
HERE

DESCRIPTION	YES (√)	NO (X)
1. All pages are completely filled and signed by the authorized person:		
2. Bidders are requested to submit their Tax Clearance Pin provided by SARS to verify that the Tax Matters are in order.		
3. Original BBBEE Certificate or Sworn Affidavit for exempted micro enterprise signed and stamped by Commissioner of Oaths. A trust, consortium or joint venture must submit a consolidated B-BBEE Status Level Verification.		
4. Original current account of water and lights/Rates and Taxes obtainable from any Local or Metropolitan Municipality has been attached		
5. In a case of Joint Ventures (JV)/Consortium, the JV agreement has been attached		
6. The bidder has provided at least three contactable references		
7. Company registration documents e.g. CK document has been attached, in a case of a Private/Public company, shareholding information e.g. share certificate, has been attached		
8. Central Supplier Database summary report.		
9. Bidder must attach Financial Services Board Certificate		
10. Bidder must attach confirmation of membership with the Council for Medical Schemes		
11. Submitted 2 copies		

**ATTACH COMPANY  
REGISTRATION DOCUMENTS  
HERE**

**ATTACH CENTAL SUPPLIER DATABASE  
REGISTRATION  
HERE**

**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.

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:

Invitation for a service provider for the provision of Medical aid Brokerage Services

(Bid Number 8/2/2/9-2023 )

in response to the invitation for the bid made by:

SEDIBENG DISTRICT MUNICIPALITY

(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

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

Js9141w 4



**FORM OF OFFER AND ACCEPTANCE**

**OFFER**

The Employer, identified in the acceptance signature block, has solicited offer to enter into a Contract in respect of the following service:

**TENDER No: 8/2/29-2023**

The tenderer, identified in the offer signature block has examined the documents listed in the tender data and addenda thereto as listed in the tender schedules, and by submitting this offer has accepted the Conditions of Tender.

By the representative of the tenderer, deemed to be duly authorized, signing this part of this form of offer and acceptance, the tenderer offer to perform all of the obligations and liabilities of the Service Provider under the contract including compliance with all its terms and conditions according to their true intent and meaning for an amount of R..... be determined in accordance with the conditions of contract identified in the Conditions of Contract.

**THE OFFERED PRICE IS R..... (INCLUSIVE OF ALL APPLICABLE TAXES)**

This offer may be accepted by the Employer by signing the Acceptance part of this form of offer and acceptance and returning one copy of this document to the Tenderer before the end of the period of validity stated in the Conditions of Tender, whereupon the Tenderer becomes the party named as the Service Provider in the Condition of Contract.

Signature(s):.....  
.....

Name(s):.....  
.....

Capacity for the Tenderer:  
.....

Name and address of organization).....

Name and Signature of Witness:.....

Date:.....

**ACCEPTANCE**

By signing this part of this form of offer and acceptance, the Employer identified below accepts the Tenderer's offer. In consideration thereof, the Employer shall pay the Service Provider the amount due in accordance with the Conditions of Contract identified in the contract that is the subject of this agreement.

Deviations from and amendments to the documents listed in the tender data and any addenda thereto as listed in the tender scheduled as well as any changes to the terms of the offer agreed by the tenderer and the Employer during this process of offer and acceptance, are contained in the schedule of deviations attached to, and forming part of this agreement. No amendments to or deviations from said documents are valid unless contained in this schedule, which must be signed by the authorized representative(s) of both parties.

The tenderer shall within two weeks after receiving a completed copy of this agreement, including the schedule of deviations (if any), contact the Employer's agent (whose details are given in the contract data) to arrange the delivery of any bonds, guarantees, proof of insurance and any other documentation to be provided in terms of the conditions of contract identified in the Contract Data at, or just after, the date this agreement comes into effect. Failure to fulfill any of these obligations in accordance with those terms shall constitute a repudiation of this agreement.

Notwithstanding anything contained herein, this agreement comes into effect on the date when the tenderer receives one fully completed original copy of this document, including the schedule of deviations (if any). Unless the tenderer (now Service Provider) within five days of the date of such receipt notifies the Employer in writing of any reason why he cannot accept the contents of this agreement shall constitute a binding between the parties.

Signature(s):

.....

Name(s):

.....  
.....

Capacity for the Employer:

.....

(Name and address of organization).....

.....

Name and Signature of

Witness:.....

Date:.....

**CREDIT ORDER INSTRUCTION**

It is the policy of the Sedibeng District Municipality to pay all creditors by means of direct bank transfers. Please complete this information and acquire your banker’s confirmation.

Name of Firm Account Holder

.....

Address:.....

.....  
.....

Name of Bank: .....

Name of Branch:.....

Branch Code:.....

Account Number:.....

Type of Account:.....

I/we hereby requested and authorize the Sedibeng District Municipality to pay any amounts that may accrue to me/us to the credit of my/our bank account.

I/we understand that a payment advice will be supplied by the Sedibeng District Municipality in the normal way that will indicate the date on which funds will be available in my/our bank account and details of payment.

I/we further undertake the inform the Sedibeng District Municipality in advance of any change in my/our bank details and accept that this authority may only be cancelled by me/us by giving thirty days’ notice by prepaid registered post.

.....  
Initials and Surname

.....  
Authorized Signature

Date:.....

**FOR BANK USE ONLY**

I/We hereby certify that the details of our clients bank account as indicated on the credit order instruction is correct:	
..... <b>AUTHORISED SIGNATURE(S)</b>	

**OFFICIAL DATE STAMP**