



**DR. KENNETH KAUNDA
DISTRICT MUNICIPALITY**

**INVITATION TO BE LISTED ON THE DR. KENNETH KAUNDA DISTRICT MUNICIPALITY
SUPPLIER/SERVICE PROVIDER DATABASE FOR 2015/2016.**

Dr. Kenneth Kaunda District Municipality, pursuant to the provisions of the Municipal Finance Management Act (MFMA), (Act 56 of 2003), read with the Supply Chain Management Regulation (2005) invites service providers to register on council's database of suppliers / service as official vendors and suppliers for the 2022/2023 financial year.

Suppliers / Service Providers currently supplying the council should also update their registrations and tax clearances on the database. Prohibition on awards to persons in the service of the state: The municipality may not make any award to a person in the service of the state.

Company profiles clearly indicating fields of specializations as indicated below and all relevant company registration documents should be submitted:

Database Forms: Interested suppliers / service providers are requested to complete registration form, which is available from Dr. Kenneth Kaunda District Municipal Office, Patmore Road, Orkney.

Closing date for Registrations is: 01/12/2022

For more information contact (SCM): Ms. T. Sepele at 018 – 473 8000.

The Municipal Manager
Mokgatlhe J Ratlhogo



DR. KENNETH KAUNDA
DISTRICT MUNICIPALITY

KENNETH KAUNDA DISTRICT MUNICIPALITY INVITATION TO SUPPLIERS/SERVICE PROVIDERS TO APPLY FOR REGISTRATION OR RE-REGISTRATION FOR THE INCLUSION ON THE CENTRAL SUPPLIER/MUNICIPALITY'S SUPPLIERS DATABASE

In terms of the Municipal Supply Chain Management Regulations, 2005 section 14. **Lists of accredited prospective providers (1), ii)** At least once a year through newspapers commonly circulating locally, the website and any other appropriate ways, prospective providers of goods or services must be invited to apply for evaluation and listing as accredited prospective providers.

Documents for the Registration are available from the offices of the Dr Kenneth Kaunda District Municipality at Civic Centre, Patmore Road, Orkney or may be downloaded from our website at www.kaundadistrict.gov.za

The following certified copies must be returned with the Vendor Application form:-

- * Company Profile and Registration Certificate
- * SARS PIN
- * CSD Number (MAAA.....)
- * BEE Rating Certificate (If Applicable)
- * Confirmed Banking Details
- * VAT Registration Certificate
- * (Certified) Director's copy of ID and proof of Residence

Failure to submit all required documents may result in non-registration. No faxed or e-mailed applications will be considered.

NB: Registrations/Applications can be dropped at the Dr Kenneth Kaunda District Municipality SCM Office or send to:

Att: The Supply Chain Unit.
Registration can be posted:
Private Bag X 5017
Klerksdorp
2570

For enquiries, please call: Ms J Brown, Ms L. Veldschoen and Mr M Phulo @ 018 - 473 8000

MBD 4

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.
.....

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

3.7.1 If so, furnish particulars.

* 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.

.....
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**
.....

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? **YES / NO**

3.9.1 If so, furnish particulars
.....

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

3.10.1 If so, furnish particulars.
.....

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

3.11.1 If so, furnish particulars.
.....

CERTIFICATION

I, THE UNDERSIGNED (FULL NAME(S) & SURNAME)

.....**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

APPLICATION TO REGISTER A VENDOR

1.	Name of Business as indicated on Bank Statements:															
2.	Physical Address:															
3.	SMME (Small Medium Micro Enterprises as per Schedule of Act 102 of 1996 Amended Bill of 2003, attached hereto) (Mark with X).															
	Micro				Very Small				Small				Medium			
4.	Reference Number (on your system):															
5.	HDI (Historically Disadvantaged Individual - As described in Section 1 (h) of the regulations schedule of Act 5 of 2000, Preferential Procurement Policy Framework Act) in your management:															
List all Partners, Proprietor and the Shareholders (Attach copy of registration certificate to indicate to share in ownership).																
	Name	ID No.	Citizen-ship	HDI status		% Owned	Gender		Disabled		Home Address					
				Yes	No		M	F	Yes	No						
				Yes	No		M	F	Yes	No						
				Yes	No		M	F	Yes	No						
				Yes	No		M	F	Yes	No						
				Yes	No		M	F	Yes	No						
6.	Postal Address:															
	Postal Code:															
7.	E-mail:															
8.	Phone:										Fax:			Cell:		
9.	Bank Name:															
	Branch Name:															
	Branch Code:															
	Account Number:															
	Account Type:															
10.	VAT Registered		Yes	No	Vat Number					(Attached Certificate)						
11.	Type of Business:				Mark with X											
	Company				Partnership		Close Corporation		One man Business							
	Supplier				Wholesale		Retail		Distributor							

TYPE OF SERVICES DELIVERED (MARK BLOCK WITH X)

	Account Deliveries		
	Air conditioning Repairs		
	Banking		
	Blasting		
	Building Maintenance		
	Catering		
	Civil Construction		
	Consulting & Professional Services		
	Deliveries		
	Dry Cleaning		
	Gardening		
	Implement Hire		
	Insurance		
	Labour Hire		
	Legal Services		
	Lift Repairs		
	Manufacturing		
	Meter Readings		
	Motor Repair (Electrical)		
	Motor Trade		
	Panel beating		
	Printing		
	Property Valuations		
	Pump Repairs		
	Radio Repairs		
	Roads Resurfacing		
	Security Services		
	Steel Works		
	Storage		
	Transport Services		
	TV Repairs		
	Tyre Repairs		
	Vehicle Maintenance		
	Vehicle Repairs		
	IT Services		
	General Maintenance Services		
	Office Automation		
	Telephone Services		
	Stationery		

TYPE OF GOODS SUPPLIED: (MARK BLOCK WITH X)

	Air Conditioning		
	Armature Winding		
	Batteries and Charges		
	Bolts and Nuts		
	Brooms		
	Brush Cutters		
	Carpets		
	Cartidges		
	Cart Iron Fittings		
	Cart Iron water fittings		
	Cement		
	Chain Saws		
	Cheque		
	Cleaning Material		
	Clothing		
	Concrete manhole covers		
	Cu cables		
	Electrical - General		
	Electrical Appliances		
	Electrical Meters		
	Fencing and Courts		
	Films		
	Filters		
	Fuses		
	Galvanized street poles		
	Galvanized water fittings		
	Gasses - Welding etc.		
	Grass		
	Groceries		
	Hardware		
	HTH Chemicals		
	IT Equipment		
	Kitchen Utensils		
	Library products		
	Line clips		
	Locks		
	Mattresses		
	Mowers and slashers		
	Office Furniture		
	Office Machines		
	Paint - General		
	Paint - Road Marking		
	Paper - Continious		
	Paper - Copy		
	Pipes and Fittings - PVC		
	Piping - AC		
	Piping - Clay		
	Plants pots		

**P.S. ACT IF NO.5 OF 2000: PREFERENCIAL PROCUREMENT POLICY FRAMEWORK ACT
SECTION 5**

1. (h) "Historically Disadvantaged Individual (HDI)" means a South African Citizen -

- (1) who, due to the apartheid policy that was in place, had no franchise in national elections prior to the introduction of the Republic of South Africa, 1983 (Act No 110 of 1983) or the Constitution of the Republic of South Africa, 1993 (Act No 200 of 1993) ("the Interim Constitution"); and / or
- (2) who is a female; and / or
- (3) who has a disability;

Provided that a person who obtained South African Citizenship on or after the coming to effect of the Interim Constitution, is deemed not to be an HDI.

12.	Name of Registered Owner			
13.	Owner of ID Number			
14.	Proof of Residence			
	e.g. Municipal Account: Number			
15.	Company Registration Number			
16.	Number of the years in Business			
17.	Type Services/Goods Supplied	(Mark list attached)		
18.	How many permanent staff members are employed by the firm?	Full Time	Part Time	

19. Disclaration:

The undersigned warrants that the he/she is duly authorized to do so, on behalf of the firm and affirms that the information furnished is true and correct.

Signature of Owner/Authorized Person	Date:
Telephone Number	
Commissioner of Oaths	
Date	