

CO-OPERATIVE GOVERNANCE, HUMAN SETTLEMENTS & TRADITIONAL AFFAIRS

DATABASE REGISTRATION FORMS 2015- 2016 AND / 2016 - 2017FY

SECTION 1: PARTICULARS OF THE COMPANY Provide details regarding the Company

1.1	Registered Name of 0	Company:
1.2	Postal address:	
1.3	Physical address:	
1.4	Telephone:	
1.5	Fax No:	
1.6	Cell Number:	
1.7	Email address:	

1 .8	Cor	ntact p	erson:	
1.9	Тур	oe of o	company	
		Tick	One box	
			Partnership	
			One person business/sole trader	
			Close Corporation	
			Trust	
			(Pty) Limited	
			Other specify	
1.10	Com Num		registration	
1.11	Com	npany/	enterprise enterprise	
	Inco	me Ta	ax Ref No.:	
1.12	VAT	regis	tration No.:	
1.13	Com	npany	classification	
Tick	One	box		
			Manufacturer	
			Supplier	
			Professional service provider	
			Other services (explain	

1.14	Describe BUSINESS COMPANY)		ACTIVITY	activity:(LIST		PER
1.15	Street addre		sed by the o	company (e.g	. wareh	ouse,
15.1	Office:					
15.2	Warehouse	:				
15.3	Storage					
PRIN	Г NAME			DATE		
SIGN	ATURE			DESIGNAT	ON.	

1.16 FOR OFFICE USE ONLY (PLEASE DO NOT FILL THIS AREA)

PLEASE NOTE

Attached the following documents:

	Documents required	Compulsory document	Yes	No	N/A
1	Original and valid SARS tax	X			
	clearance certificate				
2	Copy of Company Registration (CK)	X			
3	Certified ID copies of shareholders or	Х			
	members				
4	Company Profile	X			
5	BBBEE Certificate – Original valid or				
	Certified copy	No			
6	Registration Certificate with				
	professional bodies (eg health	No			
	certificate, ASATA)				
7	Confirmation letter for the bank	X			

Checked by: Demand Management Official	Signature:	Date:
Verified by: Deputy Manager SCM Demand/Acquisition	Signature:	Date:
Captured by:	Signature:	. Date:

1.17. BANKING DETAILS (Full details) (Confirmation letter from the Bank is needed)

Bank:			
Type of account:			
Account no:		 	
Branch code:			
BANK STAMP: PRINT NAME		DATE	
SIGNATURE	_	DESIGNAT	ION

DECLARATION OF INTEREST

- 1. Any legal person, including persons employed by the state¹, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid (includes a price quotation, advertised competitive bid, limited bid or proposal). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where-
 - the bidder is employed by the state; and/or
 - the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the bid.
- In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

2.1	Full	Name	of	bidder	or	his	or	her 	representatives
2.2	Ident	ity Numb	er:						
2.3	Posit	ion occup	oied i	n the Co	mpan	y (dire	ector,	truste	e, shareholder²):
2.4	Com	pany			Regis	stratior	า 		Number
2.5	Tax			Re	eferer	nce			Number

2.6	VAT	Registration	Number:
2.6.1	individu applicat	mes of all directors / trustees / shareholders al identity numbers, tax reference r ble, employee / persal numbers must	numbers and, if
¹"Stat	paragra e" means	iph 3 below. : –	
O.C.	(a) provii	any national or provincial departm ncial public entity or constitutional insti ning of the Public Finance Management Ac	itution within the
	(b)	any municipality or municipal entity;	
	(c)	provincial legislature;	
	(d)	national Assembly or the national Cou	ancil of provinces;
	or (e)	Parliament.	
	(0)	r amament.	
activ	ely involv	means a person who owns shares in the ved in the management of the enterprise trol over the enterprise.	
2.7 NO	Are you o	or any person connected with the bidder	YES /
140	presently	employed by the state?	
2.7.1	If so, furn	nish the following particulars:	
	Name of	person / director / trustee / shareholder/ me	ember:
		state institution at which you or the personed to the bidder is employed:	
	Position (occupied in the state institution:	
	Any othe	r particulars:	

2.7.2 If you are presently employed YES / NO

by the state, did you obtain

the appropriate authority to undertake remunerative work outside employment in the public sector?

If yes, did you attached proof of such authority to the bid 2.7.2.1 YES / NO

document?

(Note: Failure to submit proof of such authority, where

		applicable, may result in the disqualification of the b	oid.
	2.7.2	If no, furnish reasons for non-submission of s	uch proof:
	2.8	Did you or your spouse, or any of the company's div YES / NO trustees / shareholders / members or their spouses business with the state in the previous twelve month	conduct
	2.8.1	If so, furnish particulars:	
	2.9	Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this bid?	NO
2.9.11	f so, furn	nish particulars.	
2.10	awa any who	yes, or any person connected with the bidder, are of any relationship (family, friend, other) between other bidder and any person employed by the state o may be involved with the evaluation and or adjudication his bid?	0

2.10.	1 If so, furnish particulars.				
2.11	Do you or any of the director of the company have any in whether or not they are bid	nterest in any other relate		YES/N	0
2.11.	1 If so, furnish particulars:	-			
3	Full details of di	rectors / truste	ees / membe	rs / s	hareholders.
	Full Name	Identity Number	Personal Reference Number	Tax	State Employee Number / Persal Number
	4 DECLARAT	ON			
	I, THE UNDERSIGN	ED (NAME)			
	CORRECT.				S 2 and 3 ABOVE IS
	TERMS OF PARA	GRAPH 23 OF THE	GENERAL CO	NDITIC	NS OF CONTRACT
	SHOULD THIS D	ECLARATION PRO	VE TO BE FALS	E.	
	Signature	_	Date		
	Position		lame of bidder		

CATEGORY = DATABASE INDEX

Choose only 1 and complete on page 3 point 1.14

NB: Company profiles should be attached.

1	GOODS
1.1	Stationery
1.2	Supply of news papers
1.3	Refreshment/Groceries
1.4	Office Furniture
1.5	Office equipment
1.6	Electrical equipment's
1.7	Domestic appliances (kitchen utensils, crockery, cutlery)
1.8	Electronic Security Systems and Equipment Supply
1.9	Cleaning Materials
1.10	Protective clothing
1.11	Library books
1.12	Flower services
1.13	Carpets Blinds and Curtains
2	FUNCTIONAL SERVICE
	FUNCTIONAL SERVICE
2.1	Catering Services including VIP and mass:
2.2	Conference Venue, Facilities and Accommodation
	e.g Hotels, Motels & B&B's
2.3	Travel Agencies
2.4	Motivational Speaker
2.5	Event Management & Co- coordinators
	(Hiring of Tents & decorations ,Chairs, Tables, Toilets, Entertainers e.g.
	Performers, Artists, Poetry, traditional dancers, Program directors) etc

2.6	Hiring of Stage, Podium, Sound System, and Generator:
2.7	Hiring of Audio Visual, Video & Photo services
2.8	Interior Décor e.g
	(supply and installation of carpets,Blinds and curtains)
3	TRANSPORT SERVICES
3.1	Furniture Removals, Packing and Storage,
	Safe Removals
3.2	Bus, Taxi & Coach Transport Services
4	OTHER SERVICES
4.1	Physical Security Services
4.2	Office Maintenance in general: Repairs, building materials. Please specify:
	(electricity, building, roofing, painting, shades, partitioning, fencing, plumbing,
	tiling, carpentry, air-conditioning
4.3	Cleaning Services
4.4	Public Liability
4.5	Locksmith
4.6	Pest control
4.7	Training Provision
	Preference will be given to Accredited Service Providers
4.8	Auctioneers
4.9	Other: Please specify
5	MARKETING AND PUBLIC RELATIONS
5.1	Media Agencies(Newspapers/Magazines (including online)
5.2	Advertising Media Agencies(Radios)
5.3	Braille Service
5.4	Interpreters and Translators

5.5	Branding and Engraving (Promotional materials)
5.6	Printing and design
5.7	Picture Frame and Mounting