GREATER TZANEEN MUNICIPALITY



RE - ADVERT

SUPPLY CHAIN MANAGEMENT UNIT

QUOTE DESCRIPTION:	APPOINTMENT OF ACCREDITED SERVICE PROVIDER TO FACILITATE
	GRADER TRAINING FOR 13 EMPLOYEES (OPERATORS)
QUOTE NO:	SCMUQ 10/2024
NAME OF BIDDER:	
AMOUNT R	
AMOUNT IN WORDS:	
	RAND
CLOSING DATE: 23 MA	Y 2024 @ 12H00



RE - ADVERT

PART A: MBD1 GREATER TZANEEN MUNICIPALITY GROTER TZANEEN MUNISIPALITEIT



SUPPLY CHAIN MANAGEMENT UNIT DEPARTMENT: CORPORATE SERVICES

QUOTE DESCRIPTION: APPOINTMENT OF ACCREDITED SERVICE PROVIDER TO FACILITATE

GRADER TRAINING FOR 13 EMPLOYEES (OPERATORS)

QUOTE NO: SCMUQ 10/2024

Quotations are hereby invited from interested service provider for the Appointment of Service Provider for the Appointment of accredited service provider to facilitate grader training for 13 employees (Operators). Documents are obtainable at Greater Tzaneen Municipality Supply Chain Management Offices and municipal website.

Interested bidders must attach proof of the following documents to avoid disqualification:

CSD report (not older than 3 months), certified copies of ID's for all directors of the company, statement of municipal rates and taxes for both company and directors appearing in the CK (not older than 3 months)/ letter from traditional authority not older than 3 months for the company and the directors/ copy of Lease Agreement with 3 Months proof of payment only (No statements), certified copies of Permission to occupy (PTO's) land for bidders residing in Tribal authority's areas of jurisdiction. valid tax pin or tax clearance, signed joint venture agreements in case of a joint venture companies.

Completed documents with attachments (supporting documents) must be wrapped in a sealed envelope and be deposited into Greater Tzaneen Municipality bid box, Civic Centre, Agatha Street, marked as Quote No: **SCMUQ 10/2024**, **postal address and contact details of the bidder.**

Document will be available at www.greatertzaneen.gov.za and Supply Chain Office from the date of advert.

Closing date 23May 2024 @ 12:00 at Greater Tzaneen Municipality; Civic Centre; Council Chamber. Bidders must note that briefing session will Not take place. Bidders shall take note of the following bid conditions:

- a) Greater Tzaneen Municipality Supply Chain Management Policy will apply on this bid.
- b) Specific goals points scored.
- c) Council reserves the right not to appoint.
- d) No bidder will be appointed if not registered on Central Supplier Database.
- e) Contract period of this quote is once off procurement.
- f) Late, incomplete, unsigned, faxed, or emailed documents will not be accepted.

Technical enquiries should be directed to Ms N. Maake @ 015 307 8282 Administrative enquiries must be directed to Ms. Z. Ramothwala @ 015 307 8199

PART B.1 FORM OF OFFER

Quote for contract number: SCMUQ 10/2024

I/We,	the undersigned:
Quote	for an amount % (vat inclusive) and.
a)	Quote to supply and deliver to the Greater Tzaneen Municipality all or any of the supplies
	of goods described in both Specification and Scheduled of this Contract.
b)	Agree that we will be bound by the specifications, prices, terms and conditions stipulated
	in those Schedules attached to this document, regarding delivery and execution.
c)	Declare that all information provided in respect of the bidder as well as the bid documents
	submitted are true and correct.
Sign	ed at
Signa	ature
Nam	e of Firm:
Addı	ress:
	in cases where the bidder is a Company, Corporation of Firm by what authority the a signing does so, whether by Articles of Association, Resolution, Power of Attorney or wise.
I/We t	he undersigned am/are authorized to enter into this contract on behalf of:
By vir	tue of
Dated	a certified copy of which is attached to this bid.
Signat	ure of authorized person:
Name	of Firm:
Postal	Address:

Please Note: The prices at which bids are prepared to supply the goods and materials or perform the services must be placed in the column on the form provided for that purpose.

Failure to sign the form of offer and initialling each page of the document will result in disqualification of the bidder.

Part B. 2 Quote Information

Details of person responsible for bidding process	
Name:	
Contact number:	
Address of office submitting quote:	
Telephone:	
Fax no:	
E-mail address:	
Authority for signatory	
Signatories for close corporation and companies shall confirm their authority by attach	ing to this
	_
form a duly signed and dated copy of the relevant resolution of their members or their	r board of
directors, as the case may be.	
An example for a company is shown below:	
"By resolution of the board of director(s) passed on//20	
Mr/ Mrs	
Has been duly authorized to sign all documents in connection with the bid for	
ContractNo	
And any contract, which may arise there from on behalf of	
G: 1 1 1 1 G G d	
Signed on behalf of the company:	-
In his capacity as: Date: /	
Signature of signatory	



GREATER TZANEEN MUNICIPALITY GROTER TZANEEN MUNISIPALITEIT MASIPALA WA TZANEEN MASEPALA WA TZANEEN



P.O. BOX 24 TZANEEN 0850 TEL: 015 307 8000 FAX: 015 307 8049

SPECIFICATIONS FOR GRADER OPERATOR TRAINING

May you kindly assist with quotations for accredited Training provider to facilitate Grader Operator training as follows:

Description of the Training : Grader Operator

Number of People to be Trained : 13 Employees (Operators)

The Appointed Provider must issue the Operators with Grader Operator's Certificate)

REQUIREMENTS:

- 1. Programme Accreditation letter
- 2. Facilitator's CV and relevant qualifications
- 3. Proof of similar work experience

Quantity	Unit Price	Total	
13 Employees (Operators)	R	R	
	Vat 15%		
	Total	R	

EVALUATION OF QUOTATIONS

NB: 80/20 Preference point scoring system will apply, where 80 points will be allocated for price only and 20 Specific goals points scored.

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)	Means of verificati (MOV) for specific goals	
An entity which is at least 50% owned by Black, Indian or Coloured people	20		CK, CSD report and Certified Identification documentation	Tick
TOTAL	20			

PART D

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.

	n order to give effect to the above, the following questionnaire must be completed and mitted 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
	1 If so, furnish particulars
	If so, furnish particulars.
S	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
	I If so, furnish particulars

(i) any municipal council.

^{*} MSCM Regulations: "in the service of the state" means to be -

⁽a) a member of -

⁽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.

3.9.1. If yes, furnish particul	ars	
bidder and any persons	elationship (family, friend, others in the service of the state when the state where the state of the state o	ho may be
3.10.1. If so, furnish particul	lars	
3.11 Are any of the compar or stakeholders in serv	ny's directors, managers, pri ice of the state?	ncipal shareholders YES / NO
3.11.1 If so, furnish particul	lars	
• -	ld or parent of the comp olders in service of the state?	
3.12.1 If so furnish particul	ars	YES / NO
-	rustees / members / sharehold	
The decimal of directors, t	rusces, memoris, sharenox	
Full Name	Identity Number	State Employee Number
Signature	——————————————————————————————————————	
Signature	Duit	
~ .		
Capacity	acity Name of Bidder	
	CERTIFICATIO	N
	CERTIFICATIO	
I, the undersigned		
•	furnished on this declaration his declaration prove to be fall	n form is correct. I accept that the state lse.
Signature		Date
Č		
Designation		Name of Bidder