GREATER TZANEEN MUNICIPALITY

SUPPLY CHAIN MANAGEMENT UNIT

QUOTE DESCRIPTION:	APPOINTMENT OF SERVICE PROVIDER FOR OHRA COMMUNITY SERVICES DEPARTMENT
QUOTE NO:	SCMUQ 17/2025
NAME OF BIDDER:	…….
AMOUNT R	…… VAT incl.
AMOUNT IN WORDS:	…….....
	….…….....RAND
CLOSING DATE: 23 MAY 2025 @ 12H00	

PART A: MBD1

GREATER TZANEEN MUNICIPALITY

GROTER TZANEEN MUNISIPALITEIT

SUPPLY CHAIN MANAGEMENT UNIT

DEPARTMENT: CORPORATE SERVICES

QUOTE DESCRIPTION: APPOINTMENT OF SERVICE PROVIDER FOR CONDUCTING ORHA COMMUNITY SERVICES DEPARTMENT.

QUOTE NO: SCMUQ 17/2025

Quotations are hereby invited from interested service provider for the Appointment of service provider for conducting ORHA community services department. 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 / 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 / letter from traditional authority not older than 3 months for the company and the directors . valid tax pin or tax clearance, Degree in Occupational Health and Safety / Safety and Hygiene / SACPC CHS Manager / integrated ISO 14000/OHSAS 18001 and NEBOSH general certificate on Occupational Health and Safety will be added advantage / or related qualifications, Proof of similar work experience (Orders / Appointment letters); timeframe for completion of the project after receipt of the PO must be 2 Months ;registration with professional body; Methodology and 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 17/2025, 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.**
Compulsory briefing session 20 May 2025@10h00 at Greater Tzaneen Municipality; old fire station.
Closing date:23 May 2025 @ 12:00 at Greater Tzaneen Municipality; Civic Centre; Council Chamber.
Bidders shall take note of the following bid conditions:

The Evaluation of the bid will be conducted in two stages; first stage will be assessment on functionality:

Relevant company experience – 30 Points; Key personnel experience (Attach CV) - 30 Points;

Qualifications – 20 Points; Registration with professional body 10 – Points; Methodology – 10 Points;

Only bidders who obtain 70 Points will be subjected to 80/20 Preference point scoring system, where 80 points will be allocated for price only and 20 points will be allocated based on the specific goals points scored.

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 P Setlhako @ 015 307 8059
Administrative enquiries must be directed to Ms. Z. Ramothwala @ 015 307 8199

PART B.1
FORM OF OFFER

Quote for contract number: SCMUQ 17/2025

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.

Signed at ……this ……. Day of ……20……

_____

Signature

Name of Firm: _____

Address: _____, _____, _____

State in cases where the bidder is a Company, Corporation of Firm by what authority the person signing does so, whether by Articles of Association, Resolution, Power of Attorney or otherwise.

I/We the undersigned am/are authorized to enter into this contract on behalf of:

_____

By virtue of _____

Dated _____ a certified copy of which is attached to this bid.

Signature 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 attaching to this form a duly signed and dated copy of the relevant resolution of their members or their 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

Contract**_____No_____**

And any contract, which may arise there from on behalf of

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 APPOINTMENT OF SERVICE PROVIDER FOR CONDUCTING QUALITATIVE CONSEQUENCE MATRIX FOR ELECTRICAL DEPARTMENT

Description of the Training : Appointment of Service for Conducting Qualitative Consequence Matrix for Electrical Department

REQUIREMENTS:

1. Delivery period
2. Facilitator's CV and relevant qualifications
3. Proof of similar work experience
4. Registration with South African Institute of Occupational Safety and Health (SACPCP)
5. Methodology

Unit Price	**Total**
R	R
Vat 15%	R
Total	R

-

Functionality Criteria

Functionality criteria		A	B
		Bid rating (score 1-5)	**weighting**
Company Work Experience (Attach appointment letter or orders	A least 3 (three) appointment letters in similar work experience	5	**30**
	A least 2 (two) appointment letters in similar work experience	3	
	No appointment letter	0	
Key Personnel Work Experience (Min of 2 years' experience and CV)	Combined relevant work experience at least 3 years or more	5	**30**
	Combined relevant experience at least 2 to 3 years	3	
	No work experience	0	
Qualifications	Degree in Health and Safety and Hygiene, Integrated ISO 14000/OHSAS 18001 AND NEBOSH General certificate in Occupational Health and Safety will be added advantage / related qualifications	5	**20**
	No Qualification	0	
Registration with professional body	Registration with South African Institute of Occupational Health, CHS Manager (The South African Council for the Project and Management; ROSPrac (Registered Occupational Safety Practitioner) or ROSProf (Registered Occupational Safety Professional)	5	**10**
	No registration	0	
Methodology	Methodology stating the deliverance of the project deliverables	5	**10**
	No Methodology stating the deliverance of the project deliverables	0	
	Total		**100**

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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 verification (MOV) for specific goals	
Black person as defined in the policy	20		CK, CSD report and Certified Identification documentation	**Tick**
TOTAL	**20**			

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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.

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……

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

3.7.1 If so, furnish particulars. ……

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? YES / NO

3.8.1 If so, furnish particulars…….

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

∗ 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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3.9.1. If yes, furnish particulars……...……

10. 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

3.10.1. If so, furnish particulars……

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

3.11.1 If so, furnish particulars……

3.12 Are any spouse, child or parent of the company's directors, managers, principal shareholders or stakeholders in service of the state?

YES / NO

3.12.1 If so, furnish particulars……

4. Full details of directors / trustees / members / shareholders

Full Name	Identity Number	State Employee Number

_____ _____

Signature Date

_____ _____

Capacity Name of Bidder

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

……. …….

Designation Name of Bidder