GREATER TZANEEN MUNICIPALITY



SUPPLY CHAIN MANAGEMENT UNIT

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QUOTE DESCRIPTION:	ORHVS – APPOINTED OPERATOR TRAINING FOR 9 EMPLOYEES
	(ELECTRICIANS)
QUOTE NO:	SCMU Q 20/2023 (RE – ADVERT)
NAME OF BIDDER:	
AMOUNT R	
AMOUNT IN WORDS:	
CLOSING DATE: 06 JULY	2023@ 12H00



RE - ADVERT PART A: MBD1 GREATER TZANEEN MUNICIPALITY GROTER TZANEEN MUNISIPALITEIT



SUPPLY CHAIN MANAGEMENT UNIT

DEPARTMENT: CORPORATE SERVICES

QUOTE DESCRIPTION: ORHVS – APPOINTED OPERATOR TRAINING

FOR 9 EMPLOYEES (ELECTRICIANS)

QUOTE NO: SCMU Q 20/2023

Quotations are hereby invited from interested service provider for ORHVS – Appointed Operator Training for 9 Employees (Electrician) at Greater Tzaneen Municipality for Corporate 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)/ 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. initial every page of the bid document; all MBD forms be completed in full.

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 20/2023, postal address and contact details of the bidder.

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

Closing date:06 July 2023@ 12:00 at Greater Tzaneen Municipality; Civic Centre; Council Chamber. Bidders must note that briefing session will Not take place.

EVALUATION OF QUOTATIONS

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

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 will be used for preferential point system in terms of the Preferential Procurement Regulation 2022.
- 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. H. Maake @ 015 307 8006/8282 Administrative enquiries must be directed to Ms. Z. Ramothwala @ 015 307 8199

PART B.1 FORM OF OFFER

Quote for contract number: SCMUQ 20/2023

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.

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:	
-	
_	
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) passe	ed on//20	
Mr/ Mrs.		
Has been duly authorized to sign all documents	s 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:	Date:/	
In his capacity as:	Date://	

Signature of signatory



Tropical Paradise

PART C

SPECIFICATION

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

www.greatertzaneen.gov.za

SPECIFICATIONS FOR OPERATING REGULATIONS FOR HIGH VOLTAGE SYSTEM (ORHVS) TRAINING

May you kindly assist with advertisement of a tender for accredited Training provider to Conduct ORHVS training as follows:

Description of the Training Number of People to be Trained

: ORHVS Level 4 - Appointed Operator : 9 Employees (Electricians)

The facilitator to also assess the electrician and issue them with Authorization certificate.

REQUIREMENTS:

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

FUNCTIONALITY FOR SCMQ 20/2023

Functionality Criteria

Functionality criteria		Α	В
		Bid rating (score 1- 5)	weighting
Program accreditation letter	Accreditation letter	5	
and Qcto registered 95% pass rate on	Qcto registered 95% pass rate on Hv01-3	3	50
Hv01-3 Validation letter from Eskom	Validation letter from Eskom	1	
	None of the above	0	
Company Work Experience (Min of 5 years' experience)	At least 3 (three) appointment letters in related field	5	
attach appointment letter or order as proof of experience.	At least 2 (two) appointment letter in related field	3	30
	At least 1 (one) appointment letter in related field	2	
	No appointment letter	0	
Number of Years' Experience of key personnel (Attach	Combined relevant experience of key personnel > 5 years.	5	
CV's) including facilitation course, or any qualification	Combined relevant experience of key personnel > 4 years but < 5 years.	4	20
related to ORHVS	Combined relevant experience of key personnel > 3 years but < 4 years.	3	
	Combined relevant experience of key personnel > 2 years but < 3 years.	2	
	Combined relevant experience of key personnel > 2 years.	1	
	Total		100

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
An entity which is at least 50% owned by Black, Indian or Coloured people	20		CK, CSD report and Certified Identification documentation
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.

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
Hav	we you been in the service of the state for the past twelve months? YES / NO
3.7.1	If so, furnish particulars.
S	Do you, have any relationship (family, friend, other) with persons in the ervice of the state and who may be involved with the evaluation and or djudication of this bid? YES / NO
	If so, furnish particulars Have you been in the service of the state for the past twelve months?

- (a) a member of
 - (i) any municipal council.
 - (ii) any provincial legislature; or
 - (iii) the national Assembly or the national Council of provinces.

(e) a member of the accounting authority of any national or provincial public entity; or

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

⁽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);

⁽f) an employee of Parliament or a provincial legislature.

YES / NO

10

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

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

Designation

Name of Bidder

Date

Date