### **GREATER TZANEEN MUNICIPALITY**



## SUPPLY CHAIN MANAGEMENT UNIT

QUOTE DESCRIPTION:	APPOINTMENT OF SERVICE PROVIDER TO FACILITATE LEGAL			
	LIABILITY TRAINING FOR 35 EMPLOYEES			
QUOTE NO:	SCMUQ 20/2025			
NAME OF BIDDER:				
AMOUNT R				
AMOUNT IN WORDS:				
	RAND			
CLOSING DATE: 16 MAY 2025 @ 12H00				



## PART A: MBD1 GREATER TZANEEN MUNICIPALITY GROTER TZANEEN MUNISIPALITEIT



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## SUPPLY CHAIN MANAGEMENT UNIT DEPARTMENT: CORPORATE SERVICES

QUOTE DESCRIPTION: APPOINTMENT OF SERVICE PROVIDER TO FACILITATE LEGAL LIABILITY TRAINING FOR 35 EMPLOYEES

**QUOTE NO: SCMUQ 20/2025** 

Quotations are hereby invited from interested service provider for the Appointment of service provider to facilitate Legal Liability training for 35 Employees of greater Tzaneen municipality. 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, Diploma in Occupational Health and Safety / or related qualifications, Accreditation letter, proof of similar work experience (Orders / Appointment letters) 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 20/2025, postal address and contact details of the bidder.

Document will be available at <a href="www.greatertzaneen.gov.za">www.greatertzaneen.gov.za</a> and Supply Chain Office from the date of advert. Closing date:16 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) - 20 Points;

Qualifications – 20 Points; Facilitator certificate; Methodology – 10 Points; Accreditation letter – 10 Points; Facilitator certificate; 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 G Hlangwane @ 015 307 8378 Administrative enquiries must be directed to Ms. Z. Ramothwala @ 015 307 8199

### PART B.1 FORM OF OFFER

**Quote for contract number: SCMUQ 20/2025** 

I/We,	the undersigned:
Quote	e 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:
person other	
ı/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	rure 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 Contact number: Address of office submitting quote: 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\_\_\_\_ 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 LEGAL LIABILITY TRAINING FOR MANAGEMENT FOR 35 EMPLOYEES

May you kindly assist with quotations for accredited Training provider to Conduct Legal Liability for Management training as follows:

Description of the Training : Legal Liability

Number of People to be Trained: 35

### **REQUIREMENTS:**

- 1. Programme Accreditation letter
- 2. Facilitator's CV and relevant qualifications
- 3. Proof of similar work experience
- 4. Detailed proposal must be submitted

Quantity	Unit Price	Total	
35 Employees	R	R	
	Vat 15%	R	
	Total	R	

### **FUNCTIONALITY**

Functionality criteria		A	В
<u> </u>		Bid rating (score 1-5)	weighting
Company Work Experience (Attach appointment letter or	A least 3 (three) appointment letters in similar work experience	5	
orders	A least 2 (two) appointment letters in similar work experience	3 30	
	No appointment letter	0	
Key Personnel Work Experience (Min of 2 years'	Combined relevant work experience at least 2 years or more	5	
experience and CV)	Combined relevant experience at least $1-2$ years	3 20	
	No work experience	0	
Qualifications	Diploma in Occupational Health and Safety or related qualifications	5 20	
	No Qualification	0	
Facilitator certificate	Facilitator certificate	5	
	No Facilitator Certificate	0	10
Methodology	Detailed proposal	5	10
	No detailed proposal	0	
Accreditation letter	Accreditation Letter	5	10
	No Accreditation letter	0	
	Total		100
			0

 ${\bf EVALUATION\ OF\ QUOTATIONS}\\ {\bf NB:\ 80/20\ Preference\ point\ scoring\ system\ will\ apply,\ where\ 80\ points\ will\ be\ allocated\ for}$ 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 specification goals	
Black person as defined in the policy	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.

	In order to give effect to the above, the follow bomitted with the bid.	ing questionnaire n	nust be completed and
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.	5.1 If so, furnish particulars		
Hav	ave you been in the service of the state for the pas	t twelve months?	YES / NO
3.7.1	.1 If so, furnish particulars.		
3.8 I	Do you, have any relationship (family, friend, of	her) with persons in	the
S	service of the state and who may be involved wi	th the evaluation and	d or
a	adjudication of this bid?	YES / ]	NO
3.8.1	.1 If so, furnish particulars		
3.9 F	Have you been in the service of the state for the p YES $/$ NO	east twelve months?	
3.9.1	.1. If yes, furnish particulars		

- (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.

<sup>\*</sup> MSCM Regulations: "in the service of the state" means to be -

bidder and any pers	y relationship (family, friend, sons in the service of the state valuation and or adjudication	who may be	
3.10.1. If so, furnish part	iculars		
.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 part	iculars		
	child or parent of the conceholders in service of the star	mpany's directors, managers, principal te?  YES / NO	
2 12 1 If so furnish part	iculars		
-	s / trustees / members / shareh		
Full Name	Identity Number	State Employee Number	
Signature		Pate	
Capacity	 N	ame of Bidder	
	CERTIFICAT	ION	
I, the undersigned			
(name)			
	ion furnished on this declarated this declaration prove to be	tion form is correct. I accept that the state false.	
Signature		Date	
Designation		Name of Bidder	