

APPLICATION FOR REGISTRATION

NDLAMBE MUNICIPALITY SUPPLIER DATABASE

THE COMPLETED APPLICATION FORM MUST BE DELIVERED TO:

SUPPLY CHAIN MANAGEMENT UNIT NDLAMBE MUNICIPALITY PASCOE CRESCENT PORT ALFRED 6170

POSTED TO:

SUPPLY CHAIN MANAGEMENT UNIT NDLAMBE MUNICIPALITY PO BOX 13 PORT ALFRED 6170

ENQUIRIES:

TELEPHONE: (046) 624 3604 / 624 1140

FOR OFFICIAL USE	
NAME OF SUPPLIER	
REGISTRATION NUMBER_	

INTRODUCTION

This supplier database is being populated to enable the effective implementation of the Ndlambe Municipality Supply Chain Management Policy. This policy is in line with the Preferential Procurement Policy Framework Act (PPPFA) No. 5 of 2000, and the National Government Regulations pertaining to that Act. In terms of the Act, preference are given to Historically Disadvantaged Individual (HDI) shareholders who are actively involved in the daily operations and management of an organisation, defined according the Preferential Procurement Regulations 2001, an "an activity inclusive of control and performed on a daily basis."

"Historical Disadvantage Individual (HDI) means a SA Citizen -

- (1) who, due to the apartheid policy that had been in place, had no franchise in national elections prior to the introduction of the RSA (Act No. 110 of 1983) or the constitution of the RSA, 1993 (Act No. 2000 of 1993) ("the interim Constitution") and/or
- (2) who is a female; and/or
- (3) who is a disability:

Provided that a person, who obtained SA Citizenship on or after the coming effect of the interim Constitution is deemed not to be an HDI".

GUIDELINES FOR COMPLETING THE NDLAMBE MUNICIPALITY REGISTRATION FORM

- **Required documentation** Please refer to the attached table (following page) to determine the mandatory supporting documentation required by your business type. Please ensure that all copies of Mandatory documents (certified copies, where applicable) are attached if a field is not applicable to your business type clearly mark as N/A and supply applicable documentation, or proof of exemption.
- **Completion of Questions** Clearly state Yes, No or N/A to questions asked. Do not leave any fields blank.
- An original valid Tax Clearance Certificate to be submitted This is to be updated on expiry and submitted for inclusion in the Ndlambe Municipality Supplier Database.
- Copies of Documents Please keep copies of the registration form and all supporting documentation, for your own records, and to ensure that all data is maintained and up to date on a continual basis.
- Owners, Shareholders Please ensure that the percentages of ownership of the individual shareholders amount to 100%. That is, provide details of all shareholders, and ensure that all fields are completed for each. Proof of the individual shareholding is to be submitted.
- **Certification of Correctness** Please ensure that the Certification of Correctness is signed and dated.
- Processing of registration Your completed registration will be processed, and once verified, will be approved and you will be issued with a Supplier Database Registration Code to be used in all future communication with the Ndlambe Municipality. A letter of verification will be dispatched upon registration, provided that all the requirements are met. Please note that this administration process of COMPLETED registration forms will take a minimum of 5 working days. Once accessible to the Ndlambe Municipality Supply Chain Management Unit.

- **Business opportunities** Please note that registration on the Ndlambe Municipality Supplier Database does not guarantee business opportunities.
- Amendments Please notify Ndlambe Municipality Supply Chain Management Unit immediately of any changes to the verified information submitted. Submit a Certification of Correctness with the amended data.
- **Queries** Should you have any queries or if you require assistance in completing the registration form please contact Ndlambe Municipality at 046 624 1140.

DOCUMENTS REQUIRED	Close Corporation & Private Company	Close Corporation & Private Company	Partnership	Public Company	Business Trust	Non Profit Organisation	Where to get documents	Address	Telephone Number
Company Registration (CERTIFIED COPIES)	N/A	Certificate of Incorporation CK1 / CK2	Partnership Agreement	Certificate of Incorporation CM3	Trust Agreement	Certificate of Incorporation Section 21	Registrar of Close Corporation & Companies		
Proof of Ownership (Certified Copies)	N/A	Shareholding CK1/CK2	Partnership Agreement	Shareholding CM3	Trustees details: Letter of Authority	Auditor's letter No shareholding	Registrar of Close Corporation & Companies		
Billing Clearance Certificate	Yes	Yes	Yes	Yes	Yes	Yes	Relevant Local Authority		
RSC Levy Clearance Certificate	Yes	Yes	Yes	Yes	Yes	Yes	NMMM (Levies Section)	Auto & General Towers 7" floor Govan Mbeki Ave	041 – 506 1522 041 – 506 1299 082 781 7051
Proof of Banking	Bank Statement/ Cancelled cheque	Bank Statement/ Cancelled cheque	Bank Statement/ Cancelled cheque	Bank Statement/ Cancelled cheque	Bank Statement/ Cancelled cheque	Bank Statement/ Cancelled cheque	Branch of Bank where account is held		
Income Tax	For the owner or the business	For the company/cc	For the partnership	For the company	For the Trust	For the NPO	Receiver of Revenue	St Mary Terrence C/o White Road &	041 – 505 7500

								Govan Mbeki Ave Port Elizabeth	
P.A.Y.E	N/A Unless staff remuneration	Yes If staff remuneration	Yes If staff remuneration	Yes If staff remuneration	Yes If staff remuneration	Yes If staff remuneration	Receiver of Revenue	As above	041 – 505 7500
VAT Registration *	Yes	Yes	Yes	Yes	Yes	Yes	Receiver of Revenue	As above	041 – 505 7500
UIF Registration	Yes If staff remuneration	Yes	Yes	Yes	Yes	Yes	Department of Labour	Laboria House 16 Grace Street Port Elizabeth	041 – 506 5000
Workman's	Yes	Yes	Yes	Yes	Yes	Yes	Department	As above	041 – 506
Compensation	If staff remuneration	If staff remuneration	If staff remuneration	If staff remuneration	If staff remuneration	If staff remuneration	of Labour		5000
Security	If applicable	If applicable	If applicable	If applicable	If applicable	If applicable			
Officer's Board	(for security industry)	(for security industry)	(for security industry)	(for security industry)	(for security industry)	(for security industry)			
Proof of Disability	If owner is disable	If owner is disable	If owner is disable	If owner is disable	If owner is disable	If owner is disable			

$\frac{APPLICATION\ FOR\ REGISTRATION\ ON\ NDLAMBE\ MUNICIPALITY'S}{SUPPLIER\ DATABASE}$

(The following information must be filled in by the applicant. Failure to submit ALL the required information may lead to non-registration of the applicant

1. BUSINESS PARTICULARS:

Na	me of Business as register	red with the Registrar of Companies/Close Corporations
Na	me of Business used for T	TRADING purposes, if different from 1.1.or name of business
t busın	ness is not registered with	the Registrar.
_ [
		stered with the Registrar of companies/close corporations (if
pplica	lble)	
Į		
Pos	stal address	
Ī	Postal Code:	
L	Physical address	
Ī	111,010	
ŀ		
}		
}		
L	L	
Г	T-1hans No	Fax No.
L	Telephone No.	Fax INO.
Г	Q 11 XI	
ŀ	Cell No.	
Į	E –mail address (if avail	able)
~		
Co	ntact person	
Phy	ysical location of Head Of	ffice (if applicable)
ŀ		

Registration details (where applicable)

Details	Registration Number	Certificates Attached
		Yes / Not applicable
Company/CC Registration		
Proof of		
Shareholding/Ownership		
Billing Clearance Certificate		
RSC Levy Clearance		
Certificate		
Proof of Banking		
Income Tax		
Tax Clearance Certificate*		
P.A.Y.E		
VAT		
UIF		
Compensation Commissioner		
Security Officers Board		
Disability Documents		

• An original Clearance Certificate must be supplied

2. BANKING DETAILS:

Name of Banking institution:	
Branch Name:	
Branch Code	
Town/City	
Banking account number	
Account type:	
Account Holder (Name under which account is operated)	
•	

N.B.A COPY OR ORIGINAL BANK STATEMENT NOT OLDER THAN 60 DAYS, OR A CANCELLED CHEQUE MUST BE SUPPLIED. ALSO THE ACCOUNT HOLDER MUST MACTH THE TRADING NAME OF THE ORGANISATION

3. TYPE OF BUSINESS

Tick whichever block is applicable to your business or firm and attached the relevant certified copy:

Public Company Ltd	Certified copy of Certificate of
	Incorporation (CM 3)
Private Company (Pty) Ltd	Certified copy of Certificate of
	Incorporation (CM 3)
Close Corporation cc	Copy of CK 1 Document and CK 2 if
	applicable
Sole Proprietor	Certified copy of I.D. document
Partnership	Certified copy of Partnership agreement
Trust	Certified copy of Trust document
Co-operative	Certified copy of Proof of Registration
	with the Directorate Co-operatives
Voluntary Associations	Certified copy of Constitution
Other (specify)	

4. **BUSINESS INFORMATION**

THE FOLLOWING TABLE MUST BE COMPLETED IN ORDER TO ESTABLISH WHETHER A BUSINESS CAN BE CLASSIFIED AS AN SMME IN TERMS OF THE NATIONAL SMALL BUSINESS ACT 102 OF 1996. SELECT AND TICK THE APPROPRIATE BLOCKS IN COLOMN 2, 3 AND 4.

COLUMN 1	COLUMN 2	COLUMN 3	COLUMN 4	
Sector or sub-sectors in accordance	Total full time equivalent of paid	Total annual turnover	Total gross asset value (fixed	
with the Standard Industrial	employees		property excluded)	
Council	TICK WHERE APPLICABLE	TICK WHERE APPLICABLE	TICK WHERE APPLICABLE	
Agriculture	MORE THAN 100	MORE THAN R 5 m	MORE THAN R 5 m	
	LESS THAN 100	LESS THAN R 5 m	LESS THAN R 5m	
Mining and Quarrying	MORE THAN 200	MORE THAN R 39 m	MORE THAN R 23 m	
	LESS THAN 200	LESS THAN R 39 m	LESS THAN R 23 m	
Manufacturing	MORE THAN 200	MORE THAN R 51 m	MORE THAN R 19 m	
	LESS THAN 200	LESS THAN R 51 m	LESS THAN R 19 m	
Electricity, Gas and Water	MORE THAN 200	MORE THAN R 51 m	MORE THAN R 19 m	
	LESS THAN 200	LESS THAN R 51 m	LESS THAN R 19 m	
Construction	MORE THAN 200	MORE THAN R 26 m	MORE THAN R 5 m	
	LESS THAN 200	LESS THAN R 26 m	LESS THAN R 5m	
Retail, Motor trade and Repair Services	MORE THAN 100	MORE THAN R 39 m	MORE THAN R 6 m	
561,1365	LESS THAN 100	LESS THAN R 39 m	LESS THAN R 6 m	
Wholesale Trade, Commercial Agents and Allied Services	MORE THAN 100	MORE THAN R 64 m	MORE THAN R 10 m	
Ø:	LESS THAN 100	LESS THAN R 64 m	LESS THAN R 10 m	

Finance and Business Services	MORE THAN 100	MORE THAN R 26 m	MORE THAN R 5 m	
	LESS THAN 100	LESS THAN R 26 m	LESS THAN R 5m	
Community, Social and Personnel	MORE THAN 100	MORE THAN R 13 m	MORE THAN R 6 m	
Services				
	LESS THAN 100	LESS THAN R 13 m	LESS THAN R 6 m	
Catering, Accommodation & other	MORE THAN 100	MORE THAN R 13 m	MORE THAN R 3 m	
Trade				
	LESS THAN 100	LESS THAN R 13 m	LESS THAN R 3 m	
Transport, Storage and	MORE THAN 100	MORE THAN R 26 m	MORE THAN R 6 m	
Communications				
	LESS THAN 100	LESS THAN R 26 m	LESS THAN R 6 m	

5. PROPRIETORS/SHARHOLDERS/PARTNERS/SOLE PROPIETORS/TRUSTEES/BENEFICIARIES (OWNER)

List all persons who are OWNERS (as list above), in the business/trust, and indicate their involvement in the management/operations of the business/trust.

PROOF OF DISABILITY PROVIDED BY A RECOGNISED RELATED INSTITUTION, IN CASE OF DISABLED PERSONS, MUST BE SUPPLIED

If there is insufficient space, kindly attached a copy/copies of this page, signed by the person who signs on behalf of the business/trust on the Certificate of Correctness.

FULL	ID	SA	SA	CAPACITY	%	MALE/	DIS	HDI	RACE	AGE	% OF
NAME	NUMBER	CITIZEN	CITIZEN	MEMBER/PARTNER	OWNERSHIP/	FE	ABLED		B/W/		TIME
			BEFORE	DIRECTOR/PROPRIETOR/	PARTNERSHIP/	MALE			I/C		DEVOTED
			27	SHAREHOLDER/	TRUST/						TO
			APRIL	TRUSTEE/BENEFICIARY	INTEREST						FIRM
			1994								
		YES/NO	YES/NO				YES/NO	YES/NO			
					_						
		· ·									
		-									

6. <u>Bl</u>	LACK ECONOMIC EMPOWERMENT (BEE) AND HDI	PROGRAMS
6.1 Do	pes the organisation have an employment equity programme?	YES/NO
	umber of HDI people s per the definition of the Preferential Procurement Reguslatio	ns,2001)
6.3 To	otal number of people in workforce.	
6.4 Sk	ills development expenditure for the last 12 months.	R
6.5 To	otal payroll expenditure for the last 12 months.	R
	umber of HDI employees engaged in a management/profession pacity.	nal
6.7 To	otal number of employees engaged in a management/profession	nal
6.8 Is	the organisation currently classified as a BEE company?	YES/NO
6.9 If	YES, who has provided this BEE classification for the organis	ation?
Governme	ent	
Parastatals		
Listed Cor Other (spe	•	
strict (spe		
Please	attached proof of classification (if applicable)	
7. <u>Bl</u>	RANCHES, SALES AND ACCOUNTS DEPARTMENTS	
Sales 1	<u>Department</u>	
Co	ontact Name:	
	H No. al. an	
Ce	ell Number:	
E-	mail Address:	
T	Nanhanai	
16	elephone:	

Accounts Department

Contact Name:	_		
Cell Number:			
T 11 4 11			
E-mail Address:			
Telephone:			
ranches in Eastern C	ape		
Branch Name:			
Area/Town/City:			
Physical Address:			
Telephone:			
Branch Name:			
Area/Town/City:			
Theat Towns City.	_		_
Physical Address:			
	_		
Telephone:			
Branch Name:			
Area/Town/City:			
Physical Address:			
Telephone:			

8. PREVIOUS EXPERIENCE (IF APPLICABLE)

List at least 4 contracts awarded to you (the supplier) or other previous experience related to your core business.

EMPLOYER/DEPARTMENT	CONTACT	CONTACT	CONTRACT	COMPLETED	YEAR
	PERSON	TELEPHONE	VALUE	SUCCESSFULLY	
			R	YES/NO	

8.1 Have you or your organisation during the last five years failed to perform satisfactory on a previous contract with this Municipality or any other organ of state.

YES/NO

If yes, please supply details

10. <u>CERTIFICATION OF CORRECTNESS OF INFORMATION SUPPLIED IN</u> THIS DOCUMENT

I/WE, THE UNDERSIGNED, WHO WARRANTS THAT HE/SHE IS DULY AUTHORISED TO DO SO ON BEHALF OF THE SUPPLIER, CERTIFIES THAT THE INFORMATION SUPPLIED IN TERMS OF THIS DOCUMENT INCLUDING THE ANNEXURE/S WITH ADDITIONAL INFORMATION, IS CORRECT AND ACCURATE AND ACKNOWLEDGES THAT:

- 1. The supplier will be required to furnish documentary proof of the claims, if requested to do so.
- 2. If the information supplied is found to be incorrect then the Ndlambe Municipality may, in addition to any remedies it may have:
 - (i) Disqualify the supplier/contractor for a particular tender/contract/project it may be considered for, or which had been awarded to the supplier/contractor;
 - (ii) Recover from the supplier/contractor all cost, losses or damages incurred or sustained by the Ndlambe Municipality as a result of breach of the contract;
 - (iii) Cancel the contract and claim any damages which the Ndlambe Municipality may suffer by having to make less favourable arrangement after such cancellation: and/or
 - (iv) De-register the supplier registered on the Supplier Database

SIGNED ON THIS	DAY OF	20AT
SIGNATURE OF AUTI	IORIZED REPRESENTATIVE	NAME IN BLOCK LETTER
INHIS/HERS CAPACIT	Y AS	
ON REHALE OF THE (SUPPLIER'S NAME)	

Declaration

In terms of Registration 44 and 45 of the MFMA Supply Chain Management Regulations by

(the "Supplier") vis a vis the Ndlambe Municipality

Whereas:

- (a) the Supplier deliver goods or renders services to Ndlambe Municipality; or is in the process of tendering to deliver goods or services to Ndlambe Municipality
- (b) the Ndlambe Municipality may not, in terms of this Supply Chain Management Policy, make any award to a person
 - (i) who is in the service of the state
 - (ii) If that person is not a natural person, of which any director, manager principal shareholder or stakeholder is a person in the service of the state; or
 - (iii) who is an advisor or consultant contracted with the Ndlambe Municipality; and
- © the MFMA Supply Chain Management Regulations contain, inter alia, the following disclosure requirements in terms of Regulation 45

Now therefore:

1. The supplier declares, in terms of Regulation 44 of the MFMA Supply Chain Management Regulations, that he or she is not –

in the services of the state

a director, manager, principal shareholder or stakeholder of legal person in the service of the state; or

an advisor or consultant contracted with the Ndlambe Municipality.

2. If an award is made to a person to the value of more than R 2 000; and that person is either –

a spouse, child or parent of a person in the service of the state, or has been in the service of the state in the previous twelve months;

the Supplier must, in terms of Regulation 45 of the MFMA Supply Chain Management Regulations, disclose the following particulars

the name of that person		
the capacity in which that person is in the service	e of the state	
the particulars of the award:		
the amount of the award R		
thus done and signed by the Supplier at	on	20
SIGNATURE	WITNESS	

Full name and Surname of the above signatory

Undertaking

By

(the Supplier)

vis a vis

Ndlambe Municipality

Whereas:

- (a) the Supplier delivers or renders services to Ndlambe Municipality
- (b) Ndlambe Municipality is liable to pay the Supplier for goods delivered or services rendered; and
- (c) The Supplier is liable to pay Ndlambe Municipality any due municipal rates and taxes or municipal services charges and any other indebtedness owed by the Supplier to the Ndlambe Municipality.

Now therefore the Supplier undertakes the following:

- 1. In the event of the Supplier being in arrears in respect of any municipal rates and taxes, municipal services charges or any other indebtedness owed by the Supplier to the Ndlambe Municipality; which is / are due:
 - 1.1 the Supplier shall make satisfactory and reasonable written settlement arrangements with the Ndlambe Municipality for the payment thereof; and
 - 1.2 failing which, the Ndlambe Municipality may set-off any such due indebtedness owed by the Supplier to the Ndlambe Municipality, from any amount owed by the Ndlambe Municipality to the Supplier;
- 2. To co-operate with the Ndlambe Municipality and to do all things and sign all such documents (and/or procure same to be done) as may be necessary or requisite in order to give proper and due effect to the terms of this undertaking or any matter arising there from in accordance with its intent and purpose;
- 3. No extension of time or indulgence granted by the Ndlambe Municipality shall be deemed in any way to affect, prejudice or derogate from its rights in any respect in terms of this undertaking, nor shall it in anyway be regarded as a waiver of the Ndlambe Municipality's right hereunder; and
- 4. The Supplier shall not be entitled to cede any of its right's nor delegate any of its obligations in terms of this undertaking to any other person without the prior written consent of the Ndlambe Municipality.

hus done and signed by the Supplier at	on
20	
(The Supplier) duly authorised	Witness