



DISTRIK MUNISIPALITEIT
DISTRICT MUNICIPALITY
UMASIPALA WESITHILI

054 337 2800

SDM - C1
Verklaring
Declaration
inkcazo

VAT / BTW REG.No. : 4560104590

www.siyanda.gov.za

UPINGTON

UPINGTON

**H/V Hill & Le Roux
Strate**

Kantore

C/O Hill & Le Roux Streets

*** 6309 8800**

Offices

*** 6309 8800**

**Tel. 054 337 2800 /
Faks 054 337 2888**

liofisi

**Tel. 054 337 2800 / Fax 054 337
2888**

KREDITEURE:

1. Wet op die Raamwerk vir Voorkeurverkrygingsbeleid, 2000 (Wet No. 5 van 2000) (Goewermenskennisgewing No.97 van 03 Februarie 2000 – Staatskoerant No. 20854)

**Registrasie op
databasis ingevolge:**

**2. Voorkeurverkrygingsregulasies (No. R.725 van 10 Augustus 2001) uitgevaardig ingevolge bogemelde Wet (Staatskoerant No. 22549)
3. Wet Op Plaaslike Regering: Munisipale Finansiële Bestuur No. 56 Van 2003**

**CREDITORS:
Registration on data
base in terms of:**

**2. Preferential Procurement Regulations (No. R.725 of 10 August 2001) promulgated in terms of abovementioned Act (Government Gazette No. 22549)
3. Local Government: Municipal Finance Management Act No. 56 Of 2003**

**Abantu eninamatyala
kubo**

1. Ubume benkqubo ekhethekileyo yokufumana Umthetho ongunombolo 5 ka-2000 (Isaziso sikaRhulumente esingunombolo 97 we-3 kaFebruwari 2000-Iphepha-ndaba lombuso likaRhulumente unombolo 20854)

**Ubhaliso kwindawo
ekugcinwa kuyo
iindawo ezaziwa
ngento
ngokuphathelele..**

**2. Imithetho yenkqubo ekhethekiuleyo yokufumana (Nombolo R725 ka-Agasti 2001) umthetho owaziswe ngokubhekiselele ngumthetho ongasentla (Iphepha-ndaba lombuso likaRhulumente elingunombolo 22549)
3. Umasipala wengingqi: Umthetho wokulawula ezemali kamasipala ongunombolo 56 ka -2003**

APPLICATION FORM: SUPPLIERS / SERVICE PROVIDERS

**SECTION A
REGISTRATION FORMS**

**CORPORATE DETAILS
COMPANY REGISTRATION DOCUMENTS**

INDIVIDUALS

1. Title: (Prof/ Dr/ Mr/ Mrs/ Ms)
2. Surname:(Identity Nr.....)
(name of contact person)
3. Name of business:
(Contracts / orders will be placed on this name and invoices must reflect it)
4. Registered name of business:
5. Street address of business:
.....
6. Post/Postnet address of business:
.....
(This is the address to which an Invitation to Tender / enquiry and orders / contracts must be sent to)
7. E-mail address:
8. Telephone numbers of business: Code: Number:
9. Cell phone number of business: Code: Number:
10. Contact person fax number: Code: Number:
(Used by **Siyanda District Municipality** for electronic faxing of Request for Quotations, Contracts and Purchase orders)
11. Is this a dedicated fax number? (y/n):
12. Enterprise/ company Income Tax no.:
(Insert personal income tax number if a one person business, and personal income tax numbers of partners, if a partnership)
13. VAT registration no:
14. Corporate entity registration no.:
15. Type of enterprise:.....
(e.g. partnership, company, cc, one person business etc.)
16. Country of registration or incorporation:
17. Manner of participation:
(e.g. main contractor, supplier, professional service provider, joint venture, consortium etc.)
18. Business Sector:
19. Did your firm exist under a previous name? (y/n):

- 19.1 If yes, what was its previous name?
- 19.2 Who were the owners/partners/directors?
.....
- 19.3 Council number.:.....
- 19.4 Council Reference Number.:.....
- 19.5 UIF Number.:.....
- 19.6 Workman's Comp. Fund No.:.....
- 19.7 Security Officer's Board No.:.....
- 19.8 Proof of Disability Document.:.....
- 19.9 Regional Council Reg Doc.:.....
- 19.10 Woman's Comp. Fund Doc.:.....
- 19.11 Security officer's Board Doc.:.....
- 19.12 Proof of Income tax. Reg.:.....
- 19.13 Receive Correspondence by:.....
- 19.14 Expected delivery days:.....

20. List all the partners, proprietors and shareholders by name, identity number, citizenship and shareholding:

Name	ID number	Citizen- Ship	Date of Ownership	% Share- Holding/Ownership

Note: Where owners are themselves a corporate entity or partnership, please identify such.

21. Percentage of total shares/ownership by each of the following groups:

% Black male	% Coloured male	% Asian male	% White male
% Black female	% Coloured female	% Asian female	% White female

22. List the following information for each partner, proprietor, shareholder, director and senior officer of the enterprise:

Title	Name	Race	Gender M/F	Disabled Yes/No	% of time devoted to enterprise

23. Management structure:
(Percentage of management on executive level in each of the following groups)

% Black male	% Coloured male	% Asian male	% White male
% Black female	% Coloured female	% Asian female	% White female

SECTION B

HDI INFORMATION

The following definitions serve as a guide as to how **Siyanda District Municipality** interprets HDI, PDE women empowerment:-

“Historically Disadvantaged Enterprises (HDE)” means historically disadvantaged enterprises, where at least 50% of ownership and control vests in Historically Disadvantaged Individuals, and Historically Disadvantaged Individuals in the enterprise have not been given voting shares or interest just to capture or retain contracts, and Historically Disadvantaged Individuals participate in the day to day management and decision-making of the enterprise and have the aptitude and potential to understand all issues involved in the running of the enterprise including knowledge of the product and market within which their enterprise operates.

“Historically Disadvantaged Individuals (HDI)” means a South African citizen who falls into the population groups that had no franchise under the previous dispensation, women of all races and a person with a disability. It is incumbent on individuals to demonstrate their claims to fall into such population groups on the basis of identification and association with and recognition by the members of such group.

“Small, Medium and Micro Enterprises (SMME’s)” bears the same meaning as assigned to this expression in the Small Business Act 102 of 1996.

“Women” means a female person who is a South African citizen, and includes women from all racial groups.

“Women-owned Enterprises (WOE)” means an enterprise where at least 50% of the voting shares or interests are held and controlled by Women, and Women in the enterprise have not been given voting shares or interest just to capture or retain contracts, and Women participate in the day to day management and decision-making of the enterprise and have the aptitude and potential to understand all issues involved in the running of the enterprise including knowledge of the product and market within which their enterprise operates. The WOE must have a sales or turnover of less than R25 million a year.

WOMEN EMPOWERMENT PROFILE

Based on the above definitions, does your enterprise qualify as:-

- 1. A Historically Disadvantaged Enterprise (y/n):
- 2. A Women-owned Enterprise (y/n):
- 3. A Small Medium and Micro Enterprises (y/n):
- 4. Annual average Turnover

BUSINESS INFORMATION

- 1. Business Operation.....
- 2. Credit Limit.....
- 3. Settlement Discount.....

SECTION C

SERVICE PROVIDER PROFILE

Please note: *Where any specific query does not apply to your enterprise, please mark the relevant query as not applicable (NA), and do not just leave the query blank.*

PART A – BANKING INFORMATION

- 1. Please attach an original cancelled cheque or an original bank verification letter.
- 2. Bank:
- 2.1. Branch number/code:
- 2.2. Branch location:
- 2.3. Bank Account number:
- 2.4. Account type:
- 3. Terms of payment::
- 3.1. Payment will be effected via ACB transfer.
- 4. Mark against the appropriate category or categories listed in Annexure A attached hereto, the products/services your business can supply to **Siyanda District Municipality**.

SECTION D

1. Each service provider must sign this service provider declaration in order to be considered for listing on the **Siyanda District Municipality** service provider panel.
2. **Siyanda District Municipality** reserves the right to require of any service provider at any time to substantiate any information provided in any manner **Siyanda District Municipality** may require.

SERVICE PROVIDER DECLARATION

I, the undersigned,
warrant that I am authorised by my organisation/enterprise/firm/company to provide the information contained in this application and that all information it is both true and correct.

I further specifically declare that the claims made regarding Historically Disadvantaged Individuals, Previously Disadvantaged Enterprises, Women-owned Enterprises and Small Medium and Micro Enterprises status are true and correct, and that I, or any member of my organisation, will immediately inform **Siyanda District Municipality** of any change in the mentioned status, irrespective of the consequences it may have regarding continued or future placement on the service provider panel of **Siyanda District Municipality**.

I agree that in the event that any claims made or information provided in this application is found to be false or fraudulently provided, **Siyanda District Municipality** may in addition to any other remedy it may have:

- recover all costs, losses or damages incurred or sustained by **Siyanda District Municipality** as a result of the provision of false or fraudulent information from my organisation; and/or
- cancel any contract which may have been concluded with the service provider; and/or
- claim any damages that **Siyanda District Municipality** may suffer by having to make less favourable arrangements after such cancellation; and/or
- prohibit the organisation or individual from future contracts with **Siyanda District Municipality** (black listing).

Signature **Date**

Capacity

Duly authorised to sign on behalf of

SECTION E

LABOUR BROKER INFORMATION

1. Do you render the service to the council through a company, Close Corporation or Trust?
2. Are you a independent Contractor?
3. Are you a labour broker?
4. Are the services personally rendered by a person who is a connected person of in the relation to the company/cc or trust?
5. Does the entity employ four or more full-time employees who render services to clients on a full-time basis?
6. Would the person who is rendering the services be regarded as any 'employee' of the council?
7. Is the person rendering the services controlled or supervised by the council concerning duties performed or hours of work.
8. Are you in the service of state or have you been in the service of the state in the previous 12 months?
9. Is a spouse, child or parent of a director, manager, shareholder or stakeholder in the service of the state or have they been in the service of the state in the previous 12 months?
10. Does your name/Firms name appear in the National Treasury's database as a person prohibited from doing business with the public sector?

SECTION F

DOCUMENTATION TO BE PROVIDED

Please attach copies of the following documents to your application (where applicable):

- Service Provider Application Form duly completed and signed.
- Company/CC/Trust/other Registration documents.
- VAT registration certificate (where applicable).
- Tax clearance certificate (where applicable).
- Copy of COID registration certificate (where applicable).
- Any other registration certificate pertaining to your relevant industry, e.g. SOB for Security companies; ECB (Electrical Contractors Board) etc.
- Original cancelled cheque or an original bank verification letter.
- Company Organogram, showing Holding and Subsidiary company(s) as well as operating divisions.
- Corporate Profile.
- Proof of P.A.Y.E Document.