



LOCAL MUNICIPALITY – UMKHANDLU WENDAWO
SUPPLY CHAIN MANAGEMENT UNIT
259 KINGSWAY STREET, BERGVILLE, 3350
Tel: 036 448 8000 Ext. 8054 Fax: 036 448 1986/ 0867741577

Reference no: SCM79/2016 -2017

Date: 07 June 2017

**RFQ: APPOINTMENT FOR CONSULTANTS TO REVIEW HOUSING SECTOR PLAN FOR
OKHAHLAMBA LOCAL MUNICIPALITY**

Quotations are hereby invited from interested suppliers with a proven track record in terms of Section 83 of the Municipal System Act, Act 32 of 2000 (as amended) and Section 110 and 112 of the Municipal Finance Management Act, Act 56 of 2003, for consultants to review housing sector plan for Okhahlamba local Municipality.

Queries may be directed to the following officials during office hours:
Mr M Mlotshwa on 036 448 8025.

QUOTE SUBMISSION

Quotations must appear on an official letterhead or be endorsed by the official stamp of the submitting entity. Quotations must be submitted in a sealed envelope (which is clearly marked with the reference number above) in the Municipal tender box, by no later than:
19 June 2017 at 11:00.

The following conditions, read together with the Municipality's SCM Policy will apply:

- Suppliers must be registered on the Okhahlamba Local Municipality Supplier data base. Registration forms can be e-mailed on request, downloaded from our website or collected from our offices.
- Suppliers must be registered on the National Treasury Central Supplier Database (CSD). Suppliers can use the following link to register: www.csd.gov.za
- Suppliers must submit a valid Tax Clearance Certificate and their Tax Compliance Status Pin, a valid B-BBEE certificate as these are used in the evaluation processes
- Quotes will be evaluated on the 80/20 preferential points system.
- Suppliers must effect delivery within 7 (seven) working days of receiving an order.
- Where a supplier is unable to deliver within this period, the Municipality must be contacted in writing and the Municipality will determine whether the order will be cancelled or an extension for delivery will be granted.
- Delivery will only be accepted during office hours.
- The Declaration of interest (MBD4) form must be completed and attached.
- The Okhahlamba Local Municipality is not bound to accept the lowest or any bid and reserves the right to accept the whole or part of a bid.

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HOUSING SECTOR PLAN

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DECLARATION OF INTEREST

No bid will be accepted from persons in the service of the state*. 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.

1 In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

1.1 Full Name:

1.2 Identity Number:

1.3 Company Registration Number:

1.4 Tax Reference Number:

1.5 VAT Registration Number:

1.6 Are you presently in the service of the state*
YES / NO

1.6.1 If so, furnish particulars.

.....
.....

1.7 Have you been in the service of the state for the past

YES

* 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.

/ NO
twelve months?

If so, furnish particulars.

1.8 Do you, have any relationship (family, friend, other) with persons in **YES / NO**

The service of the state and who may be involved with the evaluation or adjudication of this bid?

1.8.1 If so, furnish particulars.

.....
.....

1.9 Are you, aware of any relationship (family, friend, other) between **YES / NO**
a bidder and any persons in the service of the state who may be involved with the evaluation and or adjudication of this bid?

1.9.1 If so, furnish particulars

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

1.10.1 If so, furnish particulars.

.....
.....

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

1.11 If so, furnish particulars

.....

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

.....
Position

.....
Name of Bidder