



**uMshwathi MUNICIPALITY**

**Application for Listing on**

**Accredited Suppliers Database**

Completed and clearly marked registration form together with all the relevant supporting documents must be submitted to

**SUPPLY CHAIN MANAGEMENT UNIT**

**uMshwathi Municipality**

**Private Bag x29, Wartburg, 3233**

**or**

**Hand delivered to our offices in**

**New Hanover, Main Road**

**Opposite police station**

**3440**

**Faxed Application forms will not be considered**

**For further information please telephone the Supply Chain Management Unit**

**on 033 815 2249 or email [scm@uMshwathi.gov.za](mailto:scm@uMshwathi.gov.za)**

This form is also available on the Municipality's website at

[Http://www.uMshwathi.gov.za](http://www.uMshwathi.gov.za)

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Registration on data base in terms of:

1. Preferential Procurement Policy Framework Act No. 5 of 2000.
2. Preferential Procurement Regulations (No. R.725 of 10 August 2001)
3. Local Government Municipal Finance Management Act No. 56 of 2003.

This form must be duly completed, with a black pen, signed as requested and placed together with supporting documentation, in an envelope clearly marked "Data Base of Prospective Suppliers" and forwarded to the Municipal Manager, Private Bag X29, Wartburg, 3233, or handed in at the Municipal Offices at New Hanover, Main Road, Opposite Police Station, 3440.

**PLEASE NOTE**

- Registration on the uMshwathi Municipality Supplier Database does not guarantee business opportunities with the Municipality.
- All Supplier information will be treated strictly confidential.
- Please keep copies of the application form and all documentation submitted for your own records as no copies will be made by the uMshwathi Municipality.
- This form is also available on the Municipality's website at:

<http://www.uMshwathi.gov.za>

- All alterations must be initialled by the applicant.

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**FOR OFFICIAL USE:**

Business Name	
Date Received	
Accepted	
Date Captured	
Database Registration Number	

## **Section 1: Personal / Business Information**

Prof/Dr/Mr/Mrs/Ms

1.1 Title, Initials and Surname  
(if one person concern)

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1.2 Identity number

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1.3 Business Trading Name  
(must be reflected on invoices & will be  
reflected on contracts/orders/ cheques)

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1.4 Business Registered Name

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1.5 Company BBBEE Rating  
(here applicable)

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1.6 CIDB / PSIRA Certificates  
(here applicable)

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1.7 Physical Address

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1.8 Postal Address

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1.9 Ward number  
(if within uMshwathi Municipality)

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1.10 Telephone number (incl. code)

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1.11 Fax number (incl. code)

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1.12 Cell phone number

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1.13 Website address

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1.14 E-mail address

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## 2.1 Close Corporation

11/11/2019

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### 3.1 Business Registration Number.

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### 3.2 Income Tax Registration Number

### 3.3 VAT Registration Number

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### 3.4 UIF Registration Number

3.5 uMshwathi Municipal Account Number/s  
(rates number, etc - where applicable)

### 3.6 Banking Details: Bank Name

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Branch Name

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Branch No.

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Account No.

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Account Type

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Name under which account is operated

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### 3.7 Number of years in business

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### 3.8 Annual turnover

**R**\_\_\_\_\_

## **Section 4. Business Type**

Please indicate the nature of operations, products or services applicable to your business by ticking the appropriate boxes with a X:

**NB : YOU ARE ALLOWED A MAXIMUM OF FIVE TICKS (X) PER COMPANY.**

<b>CODE</b>	<b>COMMODITY</b>	<b>X</b>	<b>CODE</b>	<b>COMMODITY</b>	<b>X</b>
<b>00100:</b>	<b>CONSTRUCTION EQUIPMENT AND SUPPLIERS</b>		<b>00400:</b>	<b>GENERAL SERVICES</b>	
<b>00101</b>	Air conditioning and temperature control equipment		<b>00401</b>	Accommodation and lodging	
<b>00102</b>	Building equipment and accessories (cement mixers, scaffolding, trowels, levels, etc)		<b>00402</b>	Advertising, communication, design, editorial, publication and marketing services	
<b>00103</b>	Building materials (bricks, cement, sand, painting, plastic, stone, steel, tiles, etc		<b>00403</b>	Auctioneering services	
<b>00104</b>	Ceiling boards, skirting, etc		<b>00404</b>	Bookkeeping and accounting services	
<b>00105</b>	Construction machinery		<b>00405</b>	Catering and refreshments	
<b>00106</b>	Doors and windows		<b>00406</b>	Cleaning services	
<b>00107</b>	Electrical systems, lighting, components accessories and suppliers		<b>00407</b>	Conferencing facilities and facilitation	
<b>00108</b>	Flooring materials (Carpets, tiles, etc)		<b>00408</b>	Contract administration	
<b>00109</b>	Glass		<b>00409</b>	Courier services	
<b>00110</b>	Plumbing ware and materials		<b>00410</b>	Education and training	
<b>00111</b>	Roofing materials		<b>00411</b>	Environmental impact studies	
<b>00112</b>	Sanitation ware and equipment		<b>00412</b>	Freight forwarding and clearing services	
	<b>OTHER SPECIFY</b>		<b>00413</b>	General maintenance services	
			<b>00414</b>	General wholesale	
			<b>00415</b>	Health care	
			<b>00416</b>	Horticulture	
			<b>00417</b>	Infrastructural maintenance	
			<b>00418</b>	Inspection services	
<b>00200:</b>	<b>CONSTRUCTION SERVICES</b>		<b>00419</b>	Insurance	
<b>00201</b>	Burglar proofing and system		<b>00420</b>	IT, broadcasting, telecommunication services	
<b>00202</b>	Civil Engineering Structures		<b>00421</b>	Interior decorating, refurbishment and upholstery	
<b>00203</b>	Concrete manufacture and works		<b>00422</b>	Land valuation	
<b>00204</b>	Construction-related transport		<b>00423</b>	Laundry and dry-cleaning services	
<b>00205</b>	Demolition services		<b>00424</b>	Locksmith services	
<b>00206</b>	Earthworks, drilling and landscaping		<b>00425</b>	Mailing services	
<b>00207</b>	Electrical installation		<b>00426</b>	Management services	

[illegible]

00313	Small tools			00713	Consulting Engineering: Water systems	
00314	Transformer services			00714	Engineering services	
00315	Valves, couplings			00715	Financial services	
00316	Water meter, pipes, fittings, galvanised PVC, uPVC, mPVC, polyethylene, etcetera			00716	Land surveying	
	<b>OTHER SPECIFY</b>			00717	Legal services – contracts	
				00718	Legal services – conveyance	
				00719	Legal services – litigation	
				00720	Legal services – other	
				00721	Medical services	
00500:	<b>OFFICE AND FACILITATIES EQUIPMENT AND SUPPLIES</b>			00722	Project Management	
00501	Computer equipment, networks and software			00723	Quantity surveying	
00502	Consumables			00724	Town and regional planning	
00503	Corporate gifts				<b>OTHER SPECIFY</b>	
00504	Domestic, industrial and cleaning equipment and supplies					
00505	Electronic equipment, including audio-visual equipment					
00506	Fire protection equipment					
00507	Flowers and plants			00800:	<b>VEHICLE SUPPLY AND TRANSFORMATION SERVICES</b>	
00508	Food and refreshments			00801	Alarm and tracking systems	
00509	Household furniture and equipment			00802	Auto electrical repairs	
00510	Office furniture and equipment			00803	Batteries	
00511	Office supplies and stationery			00804	Engine overhauls	
00512	Printing, copying and photographic equipment and supplies			00805	Fuel, oils and lubrications	
				00806	Hydraulics	
00600:	<b>MISCELLANEOUS GOODS AND SUPPLIES</b>			00807	Panel beating	
00601	Environmental cleansing equipment, goods and supplies			00808	Radio repairs	
00602	Fire protection equipment, goods and supplies			00809	Radio and electronic equipment	
00603	Garden tools			00810	Spares and parts	
00604	Gas			00811	Towing services	
00605	Laboratory chemical			00812	Transmissions	
00606	Materials and warehousing machinery, equipment and goods			00813	Tyres and tubes	
00607	Measuring, testing and observation equipment			00814	Upholstery	
00608	Pharmaceutical			00815	Vehicle fleet management	
00609	Protective clothing and uniforms			00816	Vehicle supply	

<b>00610</b>	Security equipment, goods and services			<b>00817</b>	Windscreens	
<b>00611</b>	Specialized imported chemicals				<b>OTHER SPECIFY</b>	
<b>00612</b>	Sport and recreation equipment and goods					
	<b>OTHER SPECIFY</b>					



**Section 5: List all Directors / Owners / Partners / Members**

NAME	ID NUMBER	DATE RSA CITIZENSHIP OBTAINED	DATE/ POSITION OCCUPIED IN ENTERPRISE	% TIME DEVOTED TO ENTERPRISE	NO FRANCHISE PRIOR TO ELECTIONS	WOMEN	DISABLED	% OF BUSINESS/ ENTERPRISE OWNED

\* Indicate Yes or No

“Historically Disadvantaged Individual (HDI)” means a South African 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 Constitution of the Republic of South Africa, 1983 (Act No 110 of 1983) or the Constitution of the Republic of South Africa, 1993 (Act No 200 of 1993) (“the Interim Constitution”); and/or

(2) who is a female; and/or

(3) who has a disability;

provided that a person who obtained South African citizenship on or after the coming to effect of the Interim Constitution, is deemed not to be an HDI.

## **Section 6 : Employment Information:**

6.1 How many full time and part time staff members do you employ?

Gender	Historical Disadvantage Individuals		Other	
	Full Time	Part Time	Full Time	Part Time
Male				
Female				

## **Section 7 : Supplier Profile**

7.1 Are there any pending legal proceedings or previous judgements against your business or has your business ever been declared bankrupt:

Yes / No

If yes, please elaborate:

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7.2 Is your business a permit holder under the SABS mark scheme?

Yes / No

If yes, indicate product(s) for which permits are held, including permit numbers

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7.3 Does your business operate a Quality Management System covering the product / service you provide?

Yes / No

If yes, please elaborate:

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Does your business have an Occupational Health and Safety Policy complying with the Occupational Health and Safety Act?

Yes / No

7.5 Are you registered with the Compensation for Occupational Injuries and Diseases.

Act (COID)?

Yes / No.

If yes. provide COID Registration No: \_\_\_\_\_

7.6 Do you have Environmental Policy in place?

Yes / No

**Section 8 : Disclosure of State / Municipal interests:**

8.1 Please indicate whether you or a director, manager, principal shareholder of your enterprise is/are or has/have been in the service of the State, the uMshwathi Municipality or another Municipality in the previous twelve months. If YES, please provide full details, in which capacity it was:

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8.2 Please indicate whether your spouse, child, parent, brother or sister or the spouse, child, parent, brother or sister of a director, manager, shareholder or stakeholder of your enterprise is/are or has/have been in the service of the State, the uMshwathi Municipality or another Municipality in the previous twelve months. If YES, please provide details, including names, relationships and capacities:

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**Section 9 : Declaration of Correctness of information provided:**

I / We the undersigned, warrant that I am/we are duly authorised to do so and on behalf of

\_\_\_\_\_  
declare that:

1. That the information contained in this document is correct.
2. All copies of relevant documentation are attached.
3. The Historically Disadvantaged status of individuals as stated is correct and based on owners/shareholders/partners actively involved in the day-to-day management of this enterprise.

If the information supplied is found to be incorrect then the uMshwathi Municipality in addition to any remedies, it may have; may

- (i) recover from you/your enterprise all costs, losses or damages incurred or sustained by the Municipality as a result of the award of the contract, and/or;
- (ii) cancel the contract and claim any damages which the Municipality may suffer by having to make favourable arrangements after such cancellations, and/or;
- (iii) Impose a penalty as provided in the Tender Documents, and/or;
- (iv) Take any other action as may be deemed necessary.

Signature	_____	Signature	_____
Name	_____	Name	_____
ID number	_____	ID number	_____
Capacity	_____	Capacity	_____
Telephone no	_____	Telephone no	_____
Date	_____	Date	_____
Address	_____	Address	_____
	_____		_____

Commissioner of Oaths:

Signed and sworn to, before me at.....

On this.....day of.....20..... by the Deponent(s), who acknowledged that he/she/they know(s) and understand(s) the contents of this document, that it is true and correct to the best of his/her/their knowledge and that he/she/they have no objection to taking the prescribed oath, and that the prescribed oath will be binding on his/her/their conscience.

Signature and Official stamp: .....

**NOTE: ALL PAGES OF THIS DOCUMENT MUST BE INITIALED BY THE DEPONENT AS WELL AS THE COMMISSIONER OF OATHS.**

## ANNEXURE A

### INFORMATION AND GUIDELINES FOR COMPLETING AND SUBMITTING THE UMSHWATHI MUNICIPALITY DATA BASE LISTING APPLICATION FORM

- **Completion of Questions:** Please use a black pen and complete form in block letters. Complete all fields. If a field is not applicable to your business or situation clearly mark it as "Not Applicable" or "N/A." Clearly state YES/NO by circling your choice or N/A to questions asked. Do not leave any fields blank as this may result in the rejection of your application.
- **Signatures:** Please ensure that the form is signed by an authorised person(s) and that the signatories as well as the Commissioner of Oaths initial all pages.
- **Owners, Shareholders and Partners:** Please ensure that the percentages of ownership, amount to 100% and that every field is completed for each of the business owners.
- **Declaration of Correctness:** Please ensure that the Declaration of Correctness (Section 9) is signed and dated once all required documents and information have been submitted.
- **Processing of registration:** Your completed registration will be processed and, following verification and approval, you will be issued with a Supplier Database Registration Code to be used in all future communication with uMshwathi Municipality. This letter of verification will be dispatched to the correspondence details supplied by you on the application form.
- **Business Opportunities:** Please note that registration on the uMshwathi Municipality Supplier Database does not guarantee business opportunities. All procurement will be subjected to the SCM Policy of the uMshwathi Municipality.
- **Amendments or changes:** Please notify the uMshwathi Municipality Supply Chain Management (SCM) immediately of any changes to the information submitted.
- **Multiple offices:** If a company has more than one office, each office must fill in a separate form, unless the point of transaction is centralised in the company's head office.
- **Commodity classification:** Please note that the key facilities in the database are classified as commodities and each potential supplier must indicate the commodities in which it would like to register for Request for Quotations (Please refer to Section 4)
- **Taxes:** It's a condition of bidding or tendering for the delivery of goods and services that a provider's taxes must be in order, or satisfactory arrangements must have been made with the South African Receiver of Revenue to meet his/her tax obligations. In bids where partnerships/consortia/joint ventures/sub - contractors are involved, each party must submit a separate Tax Clearance Certificate.
- **Municipal obligations:** No listing will take place if a provider is not in good standing in as far as his/her tax and municipal service obligations (e.g. water, electricity, etc.) are concerned.
- **Proof of Disability** has to be submitted and can be obtained from: Department of Social Welfare – Disability Grant registration; Medical Assessment report.
- **Required documentation:** Please ensure that all copies of mandatory documents (certified copies, where applicable) are attached. Failure to submit requested documentation may result in the rejection of the application. ***The onus is on the applicant to ensure that all such documentation is submitted and certified where necessary*** and the Municipality is under no obligation nor does it accept responsibility for contacting applicants in any way should all required documents not be attached.

**All or some of the following documentation may be relevant to your application:**

- ❖ Certified company registration documents (including CK1 and CK2)
- ❖ Certified identity documents of directors, owners, partners, members or shareholder
- ❖ Certified proof of shareholding documents (shareholder certificates or share allocation documents for CC members) if claiming HDI points.
- ❖ Valid original tax clearance certificate.
- ❖ Proof of banking document / cancelled cheque.
- ❖ Partnership agreements in the case of partnerships – certified
- ❖ Certificate of incorporation if Public Company (CM3) – certified
- ❖ Trust agreement, trustee details and letter of authority in the case of business trust – certified
- ❖ Certificate of Incorporation (Section 21 Company) – certified
- ❖ Proof of Disability
- ❖ Value Added Tax (VAT) Registration Certificate (if applicable)
- ❖ Compensation of Occupational Injuries and Diseases (COID) Registration Certificate
- ❖ Any other relevant registration certificate pertaining to your business, e.g. NHBRC, SAACE, etcetera.
- ❖ Proof of Municipality Levy Registration
- ❖ Certified copy of BBBEE rating certificate
- ❖ Company profile
  - **Copies of Documents:** Please keep copies of the registration form and all supporting documentation submitted, for your own records and to ensure that all data is maintained and up to date on a continual basis.
  - **Return of documents:** Documents submitted to the Municipality in support of this application will not be returned if an application is unsuccessful or under any other circumstances.

**Please consult attached schedule.**

## DOCUMENTS REQUIRED

DOCUMENTS REQUIRED	Sole Proprietor	CC's and Private Companies	Partnerships	Public Company	Business Trust	Non-Profit Organization (NPO)	Where to get documents
<b>COMPANY REGISTRATION CERTIFICATE COPIES</b>	N/A	Certificate of Incorporation CK1/ CK2	Partnership agreement	Certificate of Incorporation CM3	Trust agreement	Certificate of Incorporation Section 21	Registrar of CC's & Companies
<b>PROOF OF OWNERSHIP CERTIFICATE COPIES</b>	N/A	Shareholding CK1/ CK2	Partnership agreement	Shareholding CM3	Trustees details: Letter of Authority	Auditor's letter – no shareholding	Registrar of CC's & Companies
<b>PROOF OF BANKING</b>	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
<b>TAX CLEARANCE CERTIFICATE</b>	For the owner or the business	For the company/ CC	For each individual shareholder	For the company	For the trust	For the NPO	SARS
<b>P.A.Y.E</b>	If staff are employed	If staff are employed	If staff are employed	If staff are employed	If staff are employed	If staff are employed	SARS
<b>VAT REGISTRATION</b>	Yes	Yes	Yes	Yes	Yes	Yes	SARS
<b>U.I.F. Certificate</b>	Yes	Yes, if staff remunerated	Yes, if staff remunerated	Yes, if staff remunerated	Yes, if staff remunerated	Yes, if staff remunerated	Department of Labour
<b>Workman's Compensation</b>	Yes, if staff remunerated	Yes, if staff remunerated	Yes, if staff remunerated	Yes, if staff remunerated	Yes, if staff remunerated	Yes, if staff remunerated	Department of Labour
<b>Security Officer's Board</b>	If applicable for security industry	If applicable for security industry	If applicable for security industry	If applicable for security industry	If applicable for security industry	If applicable for security industry	Security Service Regulatory Authority
<b>Proof of Disability</b>	If owner is disabled	If shareholder is disabled	If shareholder is disabled	If shareholder is disabled	If shareholder is disabled	If shareholder is disabled	Department of Social Welfare Disability Grant Registration
<b>Proof of Identity CERTIFIED</b>	Owner	Directors/ Members	Partners	Directors	Trustees	Directors	

## DECLARATION OF INTEREST

1. No bid will be accepted from persons in the service of the state<sup>1</sup>.
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.
- 3 **In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.**

3.1. Full Name of bidder or his or her representative: .....

3.2. Identity Number: .....

3.3. Position occupied in the Company (director, trustee, hareholder<sup>2</sup>):.....

3.4. Company Registration Number: .....

3.5. Tax Reference Number:.....

3.6. VAT Registration Number: .....

3.7. The names of all directors / trustees / shareholders members, their individual identity numbers and state employee numbers must be indicated in paragraph 4 below.



3.8 Are you presently in the service of the state?

**YES / NO**

3.8.1 If yes, furnish particulars. ....

.....

<sup>1</sup>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.

<sup>2</sup> Shareholder” means a person who owns shares in the company and is actively involved in the management of the company or business and exercises control over the company.

3.9 Have you been in the service of the state for the past twelve months? .....**YES / NO**

3.9.1 If yes, furnish particulars.....

.....

3.10 Do you have any relationship (family, friend, other) with persons  
in the service of the state and who may be involved with  
the evaluation and or adjudication of this bid? ..... **YES / NO**

3.10.1 If yes, furnish particulars.

.....  
.....

3.11 Are you, aware of any relationship (family, friend, other) between  
any other 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**

3.11.1 If yes, furnish particulars

.....  
.....

3.12 Are any of the company's directors, trustees, managers,

principle shareholders or stakeholders in service of the state?

**YES / NO**

3.12.1 If yes, furnish particulars.

.....  
.....

3.13 Are any spouse, child or parent of the company's directors

trustees, managers, principle shareholders or stakeholders

in service of the state?

**YES / NO**

3.13.1 If yes, furnish particulars.

.....  
.....

3.14 Do you or any of the directors, trustees, managers,  
principle shareholders, or stakeholders of this company  
have any interest in any other related companies or  
business whether or not they are bidding for this contract.

**YES / NO**

3.14.1 If yes, furnish particulars:

.....  
.....

4. Full details of directors / trustees / members / shareholders.

Full Name	Identity Number	State Employee Number

.....  
**Signature**

.....  
**Date**

.....  
**Capacity**

.....  
**Name of Bidder**

