

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: SCM16/2022 - 2023 Date: 06 October 2022

RFQ- FOR AN APPOINTMENT OF ACCREDITED SERVICE PROVIDER TO TRAIN OHS COMMITTEE IN FIRST AID

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 an appointment of accredited service provider to train OHS committee in First Aid.

The details of the specification attached:

Queries may be directed to the following officials during office hours: Ms Dudu Dlamini @ 036 448 8044

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:

18 October 2022 at 11:00am

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 or
- An income Tax number and Tax clearance Certificate number / tax Compliance Status Pin
- An original or certified copy of 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. S
- Delivery will only be accepted during office hours.
- The Declaration of interest (MBD4) form must be completed and attached.
- The Declaration of interest (MBD1) Invitation to bid 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.

Reputable, suitable qualified, experienced, and accredited service providers are requested to submit a written quotation to facilitate training of 30 members on Occupational Health and Safety committee.

Specification

The training must cover the following unit standards

- 9964 : Apply health and safety to a work area
- 113852 : Apply occupational health, safety, and environmental principles

The service provider/s should provide the following:

- Training Manual and material
- Training facilitation for five (4) days
- Assessment and moderation of learners
- · Certificate of competency to learners

The Qualifying service provider must meet the following Criteria:

Invalid or non-submission of the following documents will lead to immediate disqualification of the tender

- Valid tax clearance certificate or SARS Pin
- Central Supplier database registration
- SETA accreditation certificate with listing of required unit standards
- Training methodology
- A registered assessor in possession of at least NQF Level 5 Project Management qualification
- Three (3) reference letters must be attached as the proof of experience
- Proof of Learner SOR on similar training.

INVITATION TO BID – PART A YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE OKHAHLAMBA LOCAL MUNICIPALITY

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BID NUMBER: SCM016-2022/2023		18 OCTO				TIME: 11H00		
	REDIDATE SERVICE PROVIDER TO TR							
	REQUIRED TO FILL IN AND SIGN A WEED DEPOSITED IN THE BID BOX SITUATE		NTRAC	T FORM (MB	D7).			
AT (STREET ADDRESS	E DEPOSITED IN THE BID BOX SITUATE	.U						
259 KINGSWAY STREET (OPPOSITE	CALTEX GARAGE)							
PO BOX 71								
BERGVILLE								
3350	3350							
SUPPLIER INFORMATION	w							
NAME OF BIDDER								
POSTAL ADDRESS								
STREET ADDRESS					ī .			
TELEPHONE NUMBER	CODE			NUMBER				
CELLPHONE NUMBER	ii ii				T			
FACSIMILE NUMBER	CODE			NUMBER				
E-MAIL ADDRESS								
VAT REGISTRATION NUMBER			r					
TAX COMPLIANCE STATUS	TCS PIN:		OR	CSD No:				
B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE [TICK APPLICABLE BOX]	Yes		B-BBEE STATUS LEVEL SWORN AFFIDAVIT					
[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/ SWORN AFFIDAVIT (FOR EMES & QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE!								
ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED?	Yes No [IF YES ENCLOSE PROOF]		ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES /WORKS OFFERED?			Yes No [IF YES, ANSWER PART B:3]		
TOTAL NUMBER OF ITEMS OFFERED			TOTAL BID PRICE			R		
SIGNATURE OF BIDDER				DATE				
CAPACITY UNDER WHICH THIS BID IS SIGNED								
BIDDING PROCEDURE ENQUIRIES M		TECH	NICAL I	NFORMATIO	N MA	AY BE DIRECTED TO:		
DEPARTMENT	FINANCE – SUPPLY CHAIN MANAGEMENT DEPT ZANDI MQADI/		CONTACT PERSON			MS D E DLAMINI		
CONTACT PERSON	ZINHLE SHABALALA					036 448 8044		
TELEPHONE NUMBER	036 – 448 8054		FACSIMILE NUMBER		-	036 448 8046		
FACSIMILE NUMBER			IL ADDR					
E-MAIL ADDRESS	zinhle.shabalala@okhahlamba.gov.za				nahl	amba.gov.za		

PART B

TERMS AND CONDITIONS FOR BIDDING

1. BID SUBMISSION:

- 1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.
- 1.2. ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED-(NOT TO BE RE-TYPED) OR ONLINE
- 1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.

2. TAX COMPLIANCE REQUIREMENTS

- 2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.
- 2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VIEW THE TAXPAYER'S PROFILE AND TAX STATUS.
- 2.3 APPLICATION FOR THE TAX COMPLIANCE STATUS (TCS) CERTIFICATE OR PIN MAY ALSO BE MADE VIA E-FILING. IN ORDER TO USE THIS PROVISION, TAXPAYERS WILL NEED TO REGISTER WITH SARS AS E-FILERS THROUGH THE WEBSITE WWW.SARS.GOV.ZA.
- 2.4 FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B:3.
- 2.5 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.
- 2.6 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.
- 2.7 WHERE NO TCS IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.

3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS

3.1.	IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)? YES NO	
3.2.	DOES THE ENTITY HAVE A BRANCH IN THE RSA? YES NO	
3.3.	DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?	YES NO
3.4.	DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA? YES NO	
3.5.	IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION? YES NO	

IF THE ANSWER IS "NO" TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 ABOVE.

NB: FAILURE TO PROVIDE ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID. NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE.

SIGNATURE C	OF BIDDER:
CAPACITY UN	IDER WHICH THIS BID IS SIGNED:
DATE:	

MBD 4

DECLARATION OF INTEREST

- 1. No bid will be accepted from persons in the service of the state1.
- Any person, having a kinship with persons in the service of the state, including a blood 2. 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 bmitted with the bid.	d
	3.1	Full Name of bidder or his or her representative:	
	3.2	Identity Number:	
	3.3	Position occupied in the Company (director, trustee, hareholder²):	
	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.	
MSC (a)	MR ame	egulations: "in the service of the state" means to be –	
	(i)	any municipal council;	

- - any provincial legislature; or
 - 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
- (e) a member of the accounting authority of any national or provincial public entity; or
- (f) an employee of Parliament or a provincial legislature.
- ² 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	
3.1	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?	
	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? 3.12.1 If yes, furnish particulars.	YES / NO
		**
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:	

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

F	ull Name	ide	entity Number	State Employe Number	e
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Capacity	Name of Ridder
Signature	Date
FALSE	STOCK TION PROVE TO BE
I ACCEPT THAT THE STATE MAY ACT AGAINS	T ME SHOULD THIS DECLARATION PROVE TO BE
CERTIFY THAT THE INFORMATION FURNISHE	D ON THIS DECLARATION FORM IS CORRECT.
I, THE UNDERSIGNED (name)	