# MAKHUDUTHAMAGA LOCAL MUNICIPALITY



# SUPPLIER REGISTRATION FORM FOR 2011/2012

Enquiries Contact Supply Chain Management Unit Tel No: 013 265 1177/1262 Fax No: 013 265 1975

Municipal Building NEXT TO JANE FURSE PLAZA Groblersdal Road

Private Bag X 434 JANE FURSE 1085

<u>R 50.00</u>



# FOR OFFICIAL PURPOSE ONLY:

| Business<br>Name       |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| Registration<br>Number |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Vat Number             |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

| THE FOLLOWING DOCUMENT MUST BE ATTACHED                         | Y | Ν | NA |
|---|---|---|----|
| Company Registration (CK)                                       |   |   |    |
| Original Tax Clearance Certificate                              |   |   |    |
| A copy of a receipts (Received from the municipal cashiers when |   |   |    |
| purchasing a database form)                                     |   |   |    |
| Company Profile   |   |   |    |
| Affidavit Confirming Disability (People with Disability)        |   |   |    |
| Proof of banking details  |   |   |    |
| Certified ID copies for Shareholders                            |   |   |    |

Checked by: ......Date : .....

Signature:

Signature of Senior Official for Verification:

#### NOTE:

#### SUPPLIERS PROVIDING FALSE OR FRAUDULANT INFORMATION OR DOCUMENTATION SHALL SUBJECT THEMSELVES TO IMMEDIATE DISQUALIFICATION.

# INCOMPLETE SUBMISSIONS WILL NOT BE PROCESSED. THIS INCLUDES THE SUPPORTING DOCUMENTATION AS STIPULATED.

Makhuduthamaga Municipality will validate the information supplied in the registration form and supporting documentation as part of the accreditation process for suppliers.

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## 1. BUSINESS INFORMATION

1.1 Registered Business Name:

|   | 0 |  |  |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|--|
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1.2 Trading Name:

|     |  | <br> |  |  |  |  |  |  |  |  |
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#### 1.3 Registered Business Address:

| 0 | 1 |  |  |  |  |  |  |  |  |  |
|---|---|--|--|--|--|--|--|--|--|--|

Code:

| City | y: |  |  |  |  |  |  |  |
|------|----|--|--|--|--|--|--|--|
|      |    |  |  |  |  |  |  |  |

Province:

| 11 | 0 11 | 100. |  |  |  |  |  |  |
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Country:

| - |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|

## 1.4 Physical Address (if applicable)

Code:

## 1.5 Postal Address (if applicable)

Code:



Makhuduthamaga Municipality will validate the information supplied in the registration form 3 and supporting documentation as part of the accreditation process for suppliers.



## 2. DETAILS OF CONTACT PERSON:

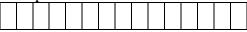
Title

| INAL | ne |  |  |  |  |  |  |  |  |  |
|------|----|--|--|--|--|--|--|--|--|--|
|      |    |  |  |  |  |  |  |  |  |  |

Surname

| Dur | iluin | · |  |  |  |  |  |  |  |     |   |
|-----|-------|---|--|--|--|--|--|--|--|-----|---|
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#### Telephone Number



#### Mobile Number

| F | ax | N | um | be | r |  |  |  |  |  |
|---|----|---|----|----|---|--|--|--|--|--|
|   |    |   |    |    |   |  |  |  |  |  |

## E-mail Address

| _ | <br> | 10010 |  |  |  |  |  |  |  |  |  |
|---|------|-------|--|--|--|--|--|--|--|--|--|
|   |      |       |  |  |  |  |  |  |  |  |  |
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## **3. BANKING DETAILS**

| Ban | Bank Name             |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
|-----|-----------------------|------|-------|-----|----|------|---|--------|-----------|-------|------|-----|--|--|--|--|
|     |                       |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
| Bra | Branch                |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
|     |                       |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
| Bra | nch d                 | code |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
|     |                       |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
| Tov | Town/city             |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
|     |                       |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
| Ban | ık Ac                 | cour | nt Nu | mbe | r  |      |   |        |           |       |      |     |  |  |  |  |
|     |                       |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
| Acc | Account Holder's name |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
|     |                       |      |       |     |    |      |   |        |           |       |      |     |  |  |  |  |
| Acc | Account Type:         |      |       |     | Ch | eque | S | Saving | <u></u> s | Trans | miss | ion |  |  |  |  |

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## 4. PRODUCTS AND SERVICES: <u>NB ONLY TWO CATEGORIES</u> <u>PER REGISTRATION FORM</u>

Please indicate by ticking an appropriate box below, in which sector of the economy your business is predominantly carried out. If other, please specify.

List all products or services your business can supply to Makhuduthamaga Municipality (Please tick appropriate box).

| 4.1 LIS | 4.1 List of Froducts and Services. TECHNICAL SERVICES |      |                                  |  |  |  |  |  |  |
|---------|---|------|----------------------------------|--|--|--|--|--|--|
| Tick    | Product/Service Name                                  | Tick | Product/Service Name             |  |  |  |  |  |  |
|         | Consulting Engineers                                  |      | Land Surveyor                    |  |  |  |  |  |  |
|         | Registered Architectural Specialist                   |      | Transport Engineering & Planning |  |  |  |  |  |  |
|         | Registered Quantity Survey                            |      | Maintenance Contractors          |  |  |  |  |  |  |
|         | Waste Management Specialist                           |      |                                  |  |  |  |  |  |  |

## 4.1 List of Products and Services: TECHNICAL SERVICES

#### 4.2 List of Products and Services: CONSULTING SERVICES

| Tick | Product/Service Name                         | Tick | Product/Service Name          |
|------|--|------|-------------------------------|
|      | Skill Development                            |      |                               |
|      |  |      | Town& Regional Planning       |
|      | Local Government Services                    |      | Research                      |
|      | Social &Economic Services                    |      | Project Management            |
|      | Municipal Labour & Conditions of<br>Services |      | Performance Management System |
|      | Knowledge Management                         |      | Statisticians                 |
|      | Intergraded Development Plan                 |      | Sustainable Development       |
|      | Policy Development & Review                  |      | LED Strategies                |

#### 4.3 List of Products and Services: HUMAN RESOURCES

| Training & Development Institutions | Assessment Councelling |
|-------------------------------------|------------------------|
| Human Resource Planning             | Human Resource Systems |
| Labour Relation                     | Wellness Management    |
| Performance Management              |                        |
| Specialized Training                |                        |

#### 4.4 List of Products and Services: OFFICE SERVICES & ADMINISTRATION

| Pri | inting &Stationery  | Garden Maintenance                             |
|-----|---------------------|--|
| Of  | ffice Furniture     | Air Conditioning Equipment Supply              |
| Se  | ecurity Services    | Business Process Analysis & Re-<br>engineering |
| Bu  | uilding Maintenance |  |
| Ca  | arpet Cleaning      |  |

Makhuduthamaga Municipality will validate the information supplied in the registration form 5 and supporting documentation as part of the accreditation process for suppliers.



## 4.5 List of Products and Services: ACCOUNTING, AUDITING & FINANCE SERVICES

|      | SERVICES             |      |                             |  |  |  |  |  |  |
|------|----------------------|------|-----------------------------|--|--|--|--|--|--|
| Tick | Product/Service Name | Tick | Product/Service Name        |  |  |  |  |  |  |
|      | Accounting           |      | Financial Services          |  |  |  |  |  |  |
|      | Audit Training       |      | Financial System Management |  |  |  |  |  |  |
|      | Auditing             |      | Internal Audit Training     |  |  |  |  |  |  |
|      |                      |      | Risk Management Consulting  |  |  |  |  |  |  |

## **4.6List of Products and Services: BUSINESS SYSTEMS AND IT**

| Hardware Products        |           | Telecommunications                        |  |  |  |  |  |
|--------------------------|-----------|---|--|--|--|--|--|
| Software Products        |           | Voice Infrastructure                      |  |  |  |  |  |
| Network Computing Inf    | rastr     | HP & IBM Partnership                      |  |  |  |  |  |
| Infrastructural & Periph | erals LAN | Microsoft, Nortell and Novell Partnership |  |  |  |  |  |
| Training Services        |           | A+, N+, MCSE, MCNE and CLP                |  |  |  |  |  |

#### 4.7 List of Products and Services: MARKETING & COMMUNICATION

| Sponsorship for Annual Awards | Communication Services                    |
|-------------------------------|---|
| Advertising                   | Editing Services                          |
| Media/Publicity               | Printing of Booklets& Publication(Design, |
|                               | Layout& Printing                          |
| Video & Photography           | Stage ,Sound & Multi-media Services       |

#### 4.8 List of Products and Services: ACTURIAL SERVICES & RISK MANAGEMENT

| Asset Management                         | Toxic Waste Disposal Management |
|--|---------------------------------|
| Risk Assessment & Management<br>Services | Auditors                        |
| Chemical                                 | Contracts Works                 |

## 4.9 List of Products and Services: LEGAL SERVICES

| Conveyance Services | Financial Law                     |
|---------------------|-----------------------------------|
| Employment Law      | Property Law                      |
| Civil Matters       | Legal Consultant                  |
| Debt Collection     | Members of Disciplinary Committee |
| Insurance Companies |                                   |

## 4.10 List of Products and Services: LOGISTICS

| Catering Services   | Courier Services    |
|---------------------|---------------------|
| Cleaning Services   | Travel Agency       |
| Protective Clothing | Event Management    |
| Office Equipment    | Transport & Storage |

Makhuduthamaga Municipality will validate the information supplied in the registration form 6 and supporting documentation as part of the accreditation process for suppliers.



Please be more specific in terms of what you can supply, e.g. Consultants: Architects and IT

| 1. | 3. |
|----|----|
|    |    |
| 2. | 4. |

# MUNICIPAL WARD NUMBER IF THE COMPANY IS FROM AROUND THE MAKHUDUTHAMAGA MUNICIPALITY DEMARCATION/JURISDICTION:

## IF NOT FROM AROUND WRITE NOT APPLICABLE (N/A)

\_\_\_\_\_

# 5. BLACK ECONOMIC EMPOWERMENT (BEE) COMPLIANCE

#### 5.1Enter the total number and the percentage shareholding who are in Ownership

| Category                 | Number | % Shareholding |
|--------------------------|--------|----------------|
| Youth                    |        |                |
| Woman                    |        |                |
| Workers                  |        |                |
| Females                  |        |                |
| People with Disabilities |        |                |

## 5.2 List all the Persons who are directly empowered by your Business

| Name | ID | Race | Citizenship | %Shareholding | Effective date of shareholder |
|------|----|------|-------------|---------------|-------------------------------|
|      |    |      |             |               |                               |
|      |    |      |             |               |                               |
|      |    |      |             |               |                               |
|      |    |      |             |               |                               |
|      |    |      |             |               |                               |
|      |    |      |             |               |                               |
|      |    |      |             |               |                               |
|      |    |      |             |               |                               |

# **5.3 List all Directors, Partners, Members, or Shareholders who are black in Management**

| Name | ID | Citizenship | Gender | Capacity |
|------|----|-------------|--------|----------|
|      |    |             |        |          |
|      |    |             |        |          |
|      |    |             |        |          |
|      |    |             |        |          |
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Total Number of People in Management Positions .....and blacks.....

| Level            | Black/Coloured/Asians | White | Women | Disabled |
|------------------|-----------------------|-------|-------|----------|
| Senior           |                       |       |       |          |
| Management       |                       |       |       |          |
| Middle           |                       |       |       |          |
| Management       |                       |       |       |          |
| Supervisor Level |                       |       |       |          |
| Other            |                       |       |       |          |
|                  |                       |       |       |          |
| Total            |                       |       |       |          |

## 5.4 List the total number of People Employed by your Business

#### 6. TRADE EXPERIENCE

Do you have any previous contract work or tendering experience?



If yes, please complete the fields below. List the last contracts awarded to you (the tendering business) or previous experience with other business related to this type of work or supply.

## **COMMERCIAL**

Name (3) Commercial references of previous projects completed and provide their names and telephone numbers.

| Business Name | Contact<br>Number | Contact<br>Person | Number of<br>Years/Month | Value of<br>Business |
|---------------|-------------------|-------------------|--------------------------|----------------------|
|               |                   |                   |                          |                      |
|               |                   |                   |                          |                      |
|               |                   |                   |                          |                      |

Total number of years the company has been in business?

| Makhuduthamaga Municipality will validate the information supplied in the registration form | 8 |
|---|---|
| and supporting documentation as part of the accreditation process for suppliers.            |   |



## 7. DECLARATION OF INTEREST

Any person, having a relationship with persons in the service of the Makhuduthamaga Municipality, may apply to register. Disclosure is required in the interest of fairness and transparency.

1. Are you presently in the service of the Makhuduthamaga Municipality? YES/NO

If so, furnish particulars.

.....

2. Have you been in the service of the Makhuduthamaga Municipality for the past twelve months?

If so, furnish particulars.

YES/NO

.....

3. Do you have any close relationship (parent, child, or spouse) with persons in the service of the Makhuduthamaga Municipality? YES/NO

If so, furnish particulars.

.....

4. Are any spouse, child or parent of the company's directors, managers, principle shareholders or stakeholders in service of the Makhuduthamaga Municipality? YES/NO

If so, furnish particulars.

.....

## CERTIFICATION

I, UNDERSIGNED (NAME) ..... CERTIFIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS CORRECT. I ACCEPT THAT THE MAKHUDUTHAMAGA MUNICIPALITY MAY ACT AGAINST ME SHOULD THIS DECLARATIION PROVE TO BE FALSE.

Signature.....

Date....

Position.....

Name.....

Makhuduthamaga Municipality will validate the information supplied in the registration form 9 and supporting documentation as part of the accreditation process for suppliers.