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 Name															
Registration 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:

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1	1									

1.2 Trading Name:

- F										
. Г										

1.3 Registered Business Address:

0	1									

Code:

City	y:							

Province:

11	0 11	100.						

Country:

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1.4 Physical Address (if applicable)

Code:

1.5 Postal Address (if applicable)

Code:



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2. DETAILS OF CONTACT PERSON:

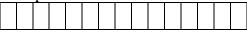
Title

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Surname

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Telephone Number



Mobile Number

F	ax	N	um	be	r					

E-mail Address

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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 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- 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 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

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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 Positionsand 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 Number	Contact Person	Number of Years/Month	Value of Business

Total number of years the company has been in business?

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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.

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

If so, furnish particulars.

YES/NO

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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.

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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.

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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.....

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