THABAZIMBI LOCAL MUNICIPALITY

RFQ2024/2025 – 112: REQUEST FOR SERVICE KIT

NAME OF ENTITY	
PRICE (INCL. VAT)	**R**
CSD SUPPLIER NUMBER	**MAAA**
CONTACT PERSON:	
TEL. NO:	

Prepared & Issued By: Supply Chain Management Thabazimbi Local Municipality 07 Rietbok Street **Thabzimbi** 0380 Tel: 014 772 2295	**SCM Enquiries:** **Department: Thabazimbi Supply Chain Management** Ms D Aphane Cell:064 653 7846 Mr P Selalome Cell: 082 864 8837 **Technical Services Enquiries:** Mr D Mputla Department: Thabazimbi Fleet

SUBMISSION DETAILS

QUOTATION BOX	**ALL QUOTATION WITH SUPPORTING DOCUMENTS SHOULD BE SUBMITTED TO disego.aphane@yahoo.com and selalomepetrus @gmail.com BEFORE THE CLOSING DATE AND TIME.**
CLOSING DATE AND TIME	**26th MAY 2025 @ 12:00**

RFQ2024/2025 – 112 **23 MAY 2025**

THABAZIMBI
Local Municipality

Private Bag X530
Thabazimbi
LIMPOPO
0380

TEL.: (014) 772 2295
FAX: (014) 777 1531

E-mail:
info@thabazimbi.gov.za

Thabazimbi, 07 Rietbok Street
Tel.: (014) 772 2295

REQUEST FOR FORMAL WRITTEN QUOTATION

Thabazimbi Local Municipality hereby invites suitable service providers to submit quotations on:

RFQ NUMBER	DESCRIPTION	PREFERENTIAL POINTS
RFQ2024/2025-112	**REQUEST FOR SERVICE KIT FOR 2 TOYOTA HILUX BAKKIES (Service Kit Items: Engine number: 2GD0655064) VIN number: AHTEB8CB602804712**	**80/20**

Specifications:

NO	QTY	DESCRIPTION
01	X2	• Oil filter
02	X2	• Air filter
03	X2	• Fuel Filter
04	X2	• Brake Fluid
05	X2	• Spark Plugs
06	X4	• Antifreeze 5L
07	X2	• Engine Oil 210 (15W40)
08	X1	• Gearbox Oil 210L

Quotation (with the company letterhead) documents should be accompanied by the following documents:

- Completed and signed MBD 4, 6.1,8 and 9 forms.
- BBB-E Level Certificate
- CSD Report
- Tax Clearance Certificate
- Bank Confirmation Letter

- Municipal water and lights statement confirming that municipal rates and taxes and municipal service charges of the prospective bidder and all Executive Directors of the business are not in arrears (for more than 90 days) from their respective municipality.
- Lease agreement and proof of payment for service providers renting premises, if applicable.
- Locality- Proof of residence and Municipal rates and Taxes will serve as confirmation of locality.

1. Within Thabazimbi Boundaries	10
2. Within Limpopo province Boundaries	05
3. All other Provinces	05

NB: - Failure to comply with these conditions and filling of the declaration form may invalidate your offer
- The Thabazimbi Local Municipality will run CSD compliance verification for all the quotations submitted

Submission of quotations will be received starting from Friday 23rd 2025 @08HOO. All document should be stating the RFQ number, RFQ description and be addressed to Thabazimbi Local Municipality, 07 Rietbok Street, Thabazimbi, 0380. Quotations must be submitted on the letterhead of your business and signed.

PLEASE INDICATE THE DELIVERY PERIOD ON YOUR QUOTATION.

The closing date for submission of Quotations is on Monday 26th May 2025 @12H00. All Quotation with supporting documents should be submitted at the Tender Box, Thabazimbi Local Municipality Buildings, 07 Rietbok Street, Thabazimbi, 0380 on or before the closing date and time.

Mr T CHETTY

_____

Acting Chief Financial Officer
07 Rietbok Street
Thabazimbi
0380

INVITATION TO BID

YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (*NAME OF MUNICIPALITY/ MUNICIPAL ENTITY*)					
BID NUMBER:		CLOSING DATE:		CLOSING TIME:	
DESCRIPTION					
THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7).					

BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT *(STREET ADDRESS*

SUPPLIER INFORMATION					
NAME OF BIDDER					
POSTAL ADDRESS					
STREET ADDRESS					
TELEPHONE NUMBER	CODE		NUMBER		
CELLPHONE NUMBER					
FACSIMILE NUMBER	CODE		NUMBER		
E-MAIL ADDRESS					
VAT REGISTRATION NUMBER					
TAX COMPLIANCE STATUS	TCS PIN:		**OR**	CSD No:	
B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE [TICK APPLICABLE BOX]	☐ Yes ☐ No		B-BBEE STATUS LEVEL SWORN AFFIDAVIT	☐ Yes ☐ No	

[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]
SIGNATURE OF BIDDER	……	**DATE**	
CAPACITY UNDER WHICH THIS BID IS SIGNED			

BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO:		**TECHNICAL INFORMATION MAY BE DIRECTED TO:**	
DEPARTMENT		CONTACT PERSON	
CONTACT PERSON		TELEPHONE NUMBER	
TELEPHONE NUMBER		FACSIMILE NUMBER	
FACSIMILE NUMBER		E-MAIL ADDRESS	
E-MAIL ADDRESS			

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 OF BIDDER: .....

CAPACITY UNDER WHICH THIS BID IS SIGNED: .....

DATE: .....

MBD 4

DECLARATION OF INTEREST

1. Any legal person, including persons employed by the state[1], or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid (includes a price quotation, advertised competitive bid, limited bid or proposal). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where-

   - the bidder is employed by the state; and/or
   - the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the bid.

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

2.1 Full Name of bidder or his or her representative: ……

2.2 Identity Number: ……...

2.3 Position occupied in the Company (director, trustee, shareholder[2]):

……..

2.4 Company Registration Number : ……

2.5 Tax Reference Number : …….

2.6 VAT Registration Number: …….

2.6.1 The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / persal numbers must be indicated in paragraph 3 below.

[1]"State" means –

(a)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);

(b) any municipality or municipal entity;
(c) provincial legislature;
(d) national Assembly or the national Council of provinces; or
(e) Parliament.

[2]"Shareholder" means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

2.7 Are you or any person connected with the bidder presently employed by the state? **YES / NO**

2.7.1 If so, furnish the following particulars:

Name of person / director / trustee / shareholder/ member:
.. ……. ……. ……..……
Name of state institution at which you or the person connected to the bidder is employed:
……
Position occupied in the state institution:
……

Any other particulars:
……

……
……

2.7.2 If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector? **YES / NO**

2.7.2.1 If yes, did you attached proof of such authority to the bid document? **YES / NO**

(Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the bid.

2.7.2.2 If no, furnish reasons for non-submission of such proof:

…….
…….
…….

2.8 Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses conduct business with the state in the previous twelve months? **YES / NO**

2.8.1 If so, furnish particulars:
……..
……..
……..

2.9Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this bid? **YES / NO**

2.9.1If so, furnish particulars.

……...

……..….

……

2.10 Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this bid? **YES/NO**

2.10.1 If so, furnish particulars**.**

……

……

……

2.11 Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract? **YES/NO**

2.11.1 If so, furnish particulars:

……

……

.

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

Full Name	**Identity Number**	**PersonalTax Reference Number**	**State Employee Number / Persal Number**

4 DECLARATION

I THE UNDERSIGNED (NAME)……

CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 2 and 3 ABOVE IS CORRECT.
I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME

IN TERMS OF PARAGRAPH 23 OF THE GENERAL CONDITIONS OF

CONTRACT SHOULD THIS DECLARATION PROVE TO BE FALSE.

…….. ……
Signature Date

……. ……
Position Name of bidder

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