



SERVICE PROVIDER DATABASE REGISTRATION FORM

2010/2011

POLOKWANE MUNICIPALITY

Building a prosperous and caring Municipality for a better life for all

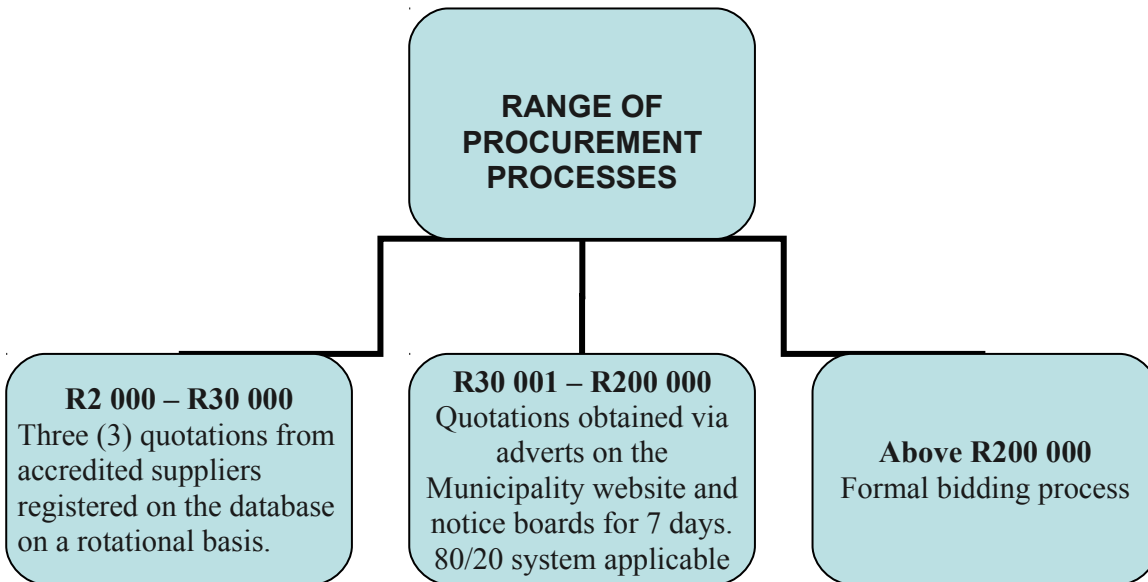
POLOKWANE MUNICIPALITY

SERVICE PROVIDER DATABASE REGISTRATION FORM

This form must be duly completed, preferably with a black pen, signed as requested and placed, together with supporting documentation, in an envelope clearly marked “**Data Base of Prospective Service Providers**” on the outside and forwarded to the Manager: Supply Chain Management Unit, P.O Box 111, Polokwane, 0700, or forward to Supply Chain Management Unit Office, Bid Administration Section Room 306, 3rd Floor at Municipal Offices, Corner Landros Mare and Bodenstein Streets, Polokwane.

PLEASE NOTE

1. **Registration on the service provider database does not entitle the supplier to any business opportunities offered by the Polokwane Municipality nor will it place any obligation of the Municipality whatsoever.**
2. Arrangements may be made for officials of Polokwane Municipality to inspect your premises in order to assess your competency before your company is accepted.
3. All service provider information will be treated strictly confidential.
4. It should be noted that should any information provided be found to be incorrect Polokwane Municipality reserves the right to exclude the service provider from the database at any time prior to or after acceptance of the database registration form.
5. kindly familiarize yourself with the supply chain management processes:



FOR OFFICIAL USE

DATE RECEIVED:
DATE CAPTURED:

FOR OFFICIAL USE (Continue)

No	DOCUMENTS REQUIRED	Yes	No	N/A
1	Company Registration (Certified Copies)			
2	Proof of Ownership			
3	Proof of Banking			
4	Original Tax Clearance Certificate			
5	Proof of P.A.Y.E Registration			
6	VAT 103 Registration			
7	U.I.F Certificate			
8	Workman's Compensation			
9	Proof of registration to a Professional Body Regulating your Industry			
10	Affidavit Confirming Disability (People with disability)			
11	Certified copy of ID			
12	Skills Development Levy			
13	Audited Financial Statement			
14	Compensation for Occupational Injuries and Diseases Certificate			
15	CIDB Registration Certificate			

Checked by: _____ **Signature:** _____ **Date:** _____

Approved	Not Approved

Captured by: _____ **Signature:** _____ **Date:** _____

1. SECTION 1: PARTICULARS OF THE ORGANISATION

Please note that all information will be treated confidentially. Provide details regarding the organisation. Where organisation is a joint venture the individual members of the joint venture are to separately provide information of their organization.

1.1 REGISTERED NAME OF THE ORGANISATION:

1.2 TRADING NAME:

1.3 CONTACT PERSON

1.4 POSTAL ADDRESS:

POSTAL CODE:

1.5 PHYSICAL ADDRESS:

POSTAL CODE:

1.6 TELEPHONE NUMBER

FAX NUMBER

1.7 CELL PHONE NUMBER

E-MAIL:

TYPE OF ORGANISATION:

CLOSE CORPORATION	
SOLE TRADER	
PARTNERSHIP	
OTHER SPECIFY	

(PTY) LTD	
TRUST	

1.9 **COMPANY REGISTRATION NUMBER:**

1.10 **INCOME TAX REGISTRATION NUMBER**

1.11 **VAT REGISTRATION NUMBER:**

1.12 **UIF REGISTRATION NUMBER:**

1.13 **NAME OF BANKING INSTITUTION:**

1.14 **NAME UNDER WHICH ACCOUNT IS OPERATED:**

ACCOUNT NUMBER:

TYPE OF ACCOUNT:

BRANCH CODE:

1.15 **PREVIOUS NAME OF BUSINESS:**

1.16 **LIST OF FIRMS OR PERSONNEL PROVIDING THE FOLLOWING SERVICES TO YOUR ENTERPRISE/ORGANISATION**

Service	Business Name	E-mail	Contact Person	Telephone
Legal				
Auditing				
Banking				
Insurance				
Sales				
Accounting				

2. SECTION 2: EVALUATION SECTION

2.1 PLEASE INDICATE THE JURISDICTION OF INTEREST:

CODE	AREA	Tick
PM	POLOKWANE MUNICIPAL AREA	
LP	OUTSIDE POLOKWANE MUNICIPAL AREA BUT IN LIMPOPO PROVINCE	
OLP	OUTSIDE LIMPOPO PROVINCE	

2.2 PLEASE INDICATE SIZE OF THE ORGANISATION BASED ON ANNUAL TURNOVER IN THE PAST THREE YEARS:

TURNOVER	3/ 8
< R1 000 000	
R1 000 001 – R5 000 000	
R5 000 001 – R10 000 000	
R10 000 001 – R20 000 000	
R20 000 001 – R30 000 000	
R30 000 001 – R40 000 000	
R40 000 001 – R50 000 000	
> R50 000 000	

2.3 PLEASE INDICATE THE YEAR OF THE ORGANISATON ESTABLISHED:

2.4 PLEASE INDICATE THE LEVEL OF OWNERSHIP OF YOUR ORGANISATION BY HISTORICALLY DISADVANTAGED INDIVIDUALS (HDI) IN THE FORM OF A PERCENTAGE:

("Historically Disadvantaged Individual (HDI) means a South African citizen –

- (1) who, due to the apartheid policy that had been in place, had not 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, 1983 (Act No 200 of 1993) ("the interim Constitution") and / or
- (2) who is female; and / or
- (3) who has a disability

(Please state the actual percentage)

HDI %	
0%	
1% – 9%	
10% - 19%	
20% - 29%	
30% - 39%	
40% - 49%	
50% - 59%	
60% - 69%	
70% - 79%	
80% - 89%	
90% - 100%	

2.5 PLEASE PROVIDE DETAILS OF OWNERSHIP OF THE ORGANISATION BY LISTING NAMES OF DIRECTORS, SHAREHOLDERS, OWNERS AND PARTNERS INCLUDING THEIR OWNERSHIP PERCENTAGE:

If total number exceeds 15 please attach a separate list.

	NAME	ID NUMBER	CITIZENSHIP	HOLDING% SHARE	Y / NHDI	Y / NDISABLED	Y / NFEMALE	Y / NYOUTH
1								
2								
3								
4								
5								
6								
7								
8								
9								
10								

	NAME	ID NUMBER	CITIZENSHIP	HOLDING% SHARE	Y / NHDI	Y / NDISABLED	Y / NFEMALE	Y / NYOUTH
11								
12								
13								
14								
15								

2.6 PLEASE PROVIDE TOTAL NUMBER OF STAFF MEMBERS:

2.7 PLEASE PROVIDE DETAILS ON THE CURRENT STAFFING IN THE ORGANISATION IN A FORM OF A PERCENTAGE:

GRADE	% OF FEMALE	% OF PEOPLE WITH DISABILITY	% OF HDI STAFFING
DIRECTORS / PARTNERS / MEMBERS			
ASSOCIATES			
PROFESSIONALS			
TECHNICIANS			
ADMIN STAFF			
OTHER			

2.8 PLEASE PROVIDE BUSINESS TYPE:

SERVICE CODE	DESCRIPTION	
CON	CONSULTING SERVICES	
TOR	CONTRACTOR	
SUP	SUPPLIER	

3. SECTION 3: SERVICE PROVIDER PROFILE

3.1 COMMERCIAL:

Name three (3) commercial references/referees of previous project or clients and provide contact name (s):

PROJECT(S)	CLIENT	VALUE	CONTACT PERSON	TELEPHONE

3.2 FINANCIAL

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:

Indicate annual average turnover excluding VAT during the last three years

Annual Turnover	Year
R	
R	
R	

NB: attach latest audited copies of financial statements.

3.3 TECHNICAL (IF APPLICABLE)

3.3.1 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 number:

3.3.2 Are you working to National or International Standards? **YES/NO**
If yes, indicate products and to which standards:

3.4 QUALITY

3.4.1 Does your business operate a Quality Management System covering the product/service you provide: **YES/NO** if yes, please elaborate:

3.4.2 Has your Quality Management System been assessed and certified by any national/international recognised accredited: **YES/NO** if yes, please provide copy of certificate

3.5 SAFETY

3.5.1 Does your business have an Occupational Health and Safety Policy complying with the Occupational Health and Safety Act (OSHA): **YES/NO**

3.5.2 Are you registered with the Compensation for Occupational Injuries and Diseases Act (COID) **YES/NO**

COID Registration Number: _____

3.6 FACILITIES, PLANT AND EQUIPMENT (IF APPLICABLE)

6.1 Please give a summary of your plant and facilities:

6.2 Please give a summary of your equipment:

3.7 CONTRACT EXPERIENCE

3.7.1 Have you or your organisation supplied any goods or services to the Polokwane Municipality during the past five years: **YES/NO**. If yes, please provide details, including values:

GOODS/SERVICES RENDERED	VALUE	CONTACT PERSON

SECTION 5: NATURE OF OPERATION, PRODUCTS OR SERVICES

Please indicate the nature of operations, products or services applicable to your business by ticking the appropriate box:

NB: SERVICE PROVIDERS ARE EXPECTED TO CHOOSE NOT MORE THAN THREE COMMODITIES/CATEGORIES.

CODE	COMMODITY	√
00100	CONSTRUCTION EQUIPMENT AND SUPPLIES	
00101	Air conditioning and temperature control equipment	
00102	Building equipment and accessories (cement mixers, scaffolding, trowels, levels, .etc.)	
00103	Building materials (bricks, cement, sand, painting, stone, steel, tiles, etc.)	
00104	Ceiling boards, skirting, etc.	
00105	Construction machinery	
00106	Doors and windows	
00107	Electrical systems, lighting, components accessories and supplies	
00108	Flooring materials (carpets, tiles, etc.)	
00109	Plumbing ware and materials	
00110	Roofing materials	
00111	Sanitation ware and equipments	
00200	CONSTRUCTION SERVICES	
00201	Burglar proofing and systems	
00202	Concrete manufacture and works	
00203	Construction-related transport	
00204	Demolition services	
00205	Earthworks, drilling and landscaping	
00206	Electrical installation	
00207	Fencing	
00208	General building works	
00209	Glazing	
00210	Mechanical contracts	
00211	Metalwork	
00212	Painting	
00213	Paving	
00214	Plumbing	
00215	Pre-cast concrete manufacture	
00216	Pump installation	
00217	Road works	
00218	Sewerage systems and construction	
00219	Water works and pipelines	
00300	ELECTRICAL AND MECHANICAL EQUIPMENTS, SERVICES AND SUPPLIES	√
00301	Bearing supplies	
00302	Bolts, nuts and fasteners	
00303	Electrical cables	
00304	Electrical component supplies	
00305	Electrical equipment repairs	
00306	Hardware supplies	
00307	Lifting equipment	
00308	Mechanical seals and packing	
00309	Pipe and irrigation supplies	
00310	Power generation and distribution machinery and accessories	
00311	Pump spares	
00312	Small tools	
00313	Transformer services	
00314	Valves, coupling	
00315	Water meters, pipes ,fittings, galvanised PVC, uPVC, polyethylene, etc.	
00400	PROFESSIONAL SERVICES	√
00401	Accounting, auditing and management services	
00402	Architectural services	
00403	Consulting engineering – Electrical	
00404	Consulting engineering – Environmental	
00405	Consulting engineering – Other	
00406	Consulting engineering – Project Management	
00407	Consulting engineering – Roads & storm water	
00408	Consulting engineering – Sewerage Systems	
00409	Consulting engineering – Structures, Building, bridges, etc.	

00410	Consulting engineering – Water Systems	
00411	Consulting engineering – Geo-technical	
00412	Consulting engineering – Solid waste	
00413	Engineering services	
00414	Financial services	
00415	Land surveying	
00416	Legal services – contracts	
00417	Legal services – conveyance	
00418	Legal services – litigation	
00419	Legal services – other	
00420	Consulting engineering – Mechanical	
00421	Quantity surveying	
00422	Town and regional planning	
00423	Employee Assistance Program	
00500	GENERAL SERVICES	√
00501	Accommodation and lodging	
00502	Advertising, communication, design, editorial, publication and marketing services	
00503	Auctioneering services	
00504	Bookkeeping and accounting services	
00505	Catering (HEALTH CERTIFICATE REQUIRED)	
00506	Cleaning services	
00507	Conferencing facilities and facilitation	
00508	Contract administration	
00509	Courier services	
00510	Education and training	
00511	Environmental impact studies	
00512	Freight forwarding and cleaning services	
00513	General maintenance services	
00514	Health care	
00515	Horticulture	
00516	Infrastructural maintenance	
00517	Inspection services	
00518	Insurance	
00519	IT, broadcasting and telecommunication services	
00520	Interior decorating, refurbishment and upholstery	
00521	Land valuation services	
00522	Laundry and dry-cleaning services	
00523	Locksmith services	
00524	Mailing services	
00525	Management services	
00526	Miscellaneous equipment and goods hiring	
00527	Personnel services	
00528	Pest control and removal services	
00529	Photographic and graphic design services	
00530	Picture framing	
00531	Printing	
00532	Procurement services	
00533	Real estate services	
00534	Research services	
00535	Security and safety services	
00536	Site cleaning	
00537	Social facilitation	
00538	Storage	
00539	Translation and interpreting services	
00540	Transport services	
00541	Travel services	
00542	Vehicle hire	
00543	Vending services	
00600	OFFICE AND FACILITIES EQUIPMENT AND SUPPLIES	√
00601	Computer equipment, networks and software	
00602	Consumables	
00603	Corporate gifts	
00604	Domestic, industrial and cleaning equipment and supplies	
00605	Electronic equipment , including audio-visual equipment	
00606	Fire protection equipment	
00607	Flowers and plants	
00608	Refreshments	
00609	House furniture, appliances and goods	
00610	Office furniture and equipment	
00611	Office supplies and stationery	
00612	Printing, copying and photographic equipment	
00700	MISCELLANEOUS GOODS AND SUPPLIES	√
00701	Environmental cleansing equipment, goods and supplies	

00702	Fire protection equipment, goods and supplies	
00703	Garden tools	
00704	Material and warehousing machinery, equipment and goods	
00705	Measuring, testing and observation equipment	
00706	Protective clothing and uniforms	
00707	Security equipment, goods and services	
00708	Sports and recreational equipment and goods	
00800	VEHICLES (ONLY ACCREDITED SERVICE PROVIDERS ONLY)	√
00801	Alarm and tracking systems	
00802	Batteries	
00803	Engine overhauls	
00804	Fuel, oils and lubrications	
00805	Hydraulics	
00806	Panel beating	
00807	Radiator repairs	
00808	Spares and parts	
00809	Towing services	
00810	Transmissions	
00811	Tyres and tubes	
00812	Upholstery	
00813	Vehicle fleet management	
00814	Vehicle supply	
00815	Windscreens	
00816	Gearbox specialists	
00817	Auto electronics	
00818	Clutch and brakes specialists	

SECTION 6: DECLARATION OF CORRECTNESS OF INFORMATION PROVIDED

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

Declare that:

The information contained in this document is correct.
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 Polokwane 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 bid/quotation documents and/or
- (iv) take any other action as may be deemed necessary.

SIGNATURE: _____ SIGNATURE: _____

NAME: _____ NAME: _____

CAPACITY: _____ NAME: _____

ID NO: _____ ID NO: _____

TEL NO: _____ TEL NO: _____

ADDRESS: _____ ADDRESS: _____

COMMISSIONER OF OATHS

Signed and sworn to before me at _____

On this _____ day of _____ by the Deponent(s), who acknowledge 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 AFFIDAVIT MUST BE INITIALLED BY THE DEPONENT(S) AS WELL AS THE COMMISSIONER OF OATHS



SUPPLIER ENTITY REGISTRATION FORM

Supplier Name: _____
Address : _____
Postal Code : _____
Contact Person : _____
Telephone Number: _____
Signature and Date: _____

Bank Name: _____
Account Number: _____
Branch Code: _____
Type of Account: _____ (Current, Bond, Savings, Cheque)
I _____ (Bank Official) hereby certify that the bank details for supplier are correct.

Bank Stamp

Date: _____

Office use

Supplier Number: _____
Captured By: _____ Approved By: _____
Date: _____

Finest System Controller