



**MKHONDO**

LOCAL MUNICIPALITY

**QUOTATION NO. MLM QUO-01-08-2026**

**SUPPLY AND INSTALLATION OF A FLOAT VALVE FOR MARK STREET RESERVOIR.**

|                     |                        |             |       |
|---------------------|------------------------|-------------|-------|
| <b>CLOSING DATE</b> | FRIDAY, 14 AUGUST 2026 | <b>TIME</b> | 12H00 |
|---------------------|------------------------|-------------|-------|

|                                         |          |
|-----------------------------------------|----------|
| <b>NAME OF COMPANY</b>                  |          |
| <b>TOTAL AMOUNT (MBD 3.1)</b>           | <b>R</b> |
| <b>CENTRAL SUPPLIER DATABASE NUMBER</b> | MAAA     |
| <b>CONTACT PERSON</b>                   |          |
| <b>TELEPHONE NUMBER</b>                 |          |
| <b>EMAIL ADDRESS</b>                    |          |

|                                                                 |                |                                                                |                |
|-----------------------------------------------------------------|----------------|----------------------------------------------------------------|----------------|
| <b>ENQUIRIES REGARDING<br/>QUOTATION PROCEDURES</b>             |                | <b>TECHNICAL ENQUIRIES</b>                                     |                |
| DIRECTORATE: FINANCIAL SERVICES<br>SUPPLY CHAIN MANAGEMENT UNIT |                | DIRECTORATE: TECHNICAL SERVICES                                |                |
| <b>MC GUMEDE</b>                                                |                | <b>T.H.A. MAZIBUKO</b>                                         |                |
| <b>SUPPLY CHAIN MANAGER</b>                                     |                | <b>WATER &amp; SANITATION</b>                                  |                |
| <b>TEL. NUMBER</b>                                              | (017) 004-0197 | <b>TEL. NUMBER</b>                                             | (017) 004 0197 |
| <b>QUOTATION ISSUED BY</b>                                      |                |                                                                |                |
| NONDUMISO THWALA                                                |                | DIRECTORATE FINANCIAL SERVICES<br>SUPPLY CHAIN MANAGEMENT UNIT |                |
| <b>BUYER</b>                                                    |                | <b>TEL. NUMBER</b>                                             | 017 004 0197   |
| MKHONDO LOCAL MUNICIPALITY                                      |                | P.O. BOX 23, PIET RETIEF, 2380                                 |                |

# QUOTATION NOTICE AND INVITATION



**MKHONDO**  
LOCAL MUNICIPALITY

**QUOTATION NUMBER: MLM QUO-01-08-2026**

ISSUED DATE: 05 AUGUST 2026  
CLOSING DATE: 14 AUGUST 2026

## **SUPPLY AND INSTALLATION OF A FLOAT VALVE FOR MARK STREET RESERVOIR.**

In terms of Section 110 of the Municipal Finance Management Act, 2003 (No. 56 of 2003) and in accordance with the SCM regulations section 18 of the local government municipal finance act 56 of 2003. Quotations are hereby invited for the **Supply and installation of a float valve for mark street reservoir** from suitable and authorized tenderers. Adherence to minimum technical specification applies.

Detailed specifications and prescribed documentation are available on the Councils website, [www.mkhondo.gov.za](http://www.mkhondo.gov.za) under the "Quotations" section. This documentation can also be made available via email if required. Technical queries relating to this request for quotation can be addressed to Ms T.H.A. Mazibuko, Tel: 017 004 0197, Email: [tmazibuko@mkhondo.gov.za](mailto:tmazibuko@mkhondo.gov.za) and administrative queries can be addressed to Mr MC Gumede, Tel 017 004 0197, and email [mgumede@mkhondo.gov.za](mailto:mgumede@mkhondo.gov.za).

This RFQ can only be submitted on the documentation that is issued. Supporting and additional documentation are welcome as outlined. All submissions will be adjudicated in terms of the Mkhondo Local Municipality's Procurement Policy and Bids will be evaluated in accordance with the Preferential Procurement Policy Framework Act No 5 of 2000 as well as the Preferential Procurement Regulations, 2022 (PPR 2022). The 80/20 Price and Specific goals Point System will be applicable for this tender. A total of **15** preference points shall be allocated on proportional or pro rata basis for contracting an enterprise owned by historically disadvantaged persons or individuals who meet the Requirements and a total of **5** preference points shall be allocated on a proportional or pro rata basis for implementing of programmes. The Council reserves the right not to award the RFQ to the lowest bid or not at all or in part.

The RFQ Documents can be submitted during normal working hours, which are 07h30 - 16h30 Mondays to Mondays and 07h30 to 13h30 on Mondays. The closing date for receipt of this RFQ is **12h00 on Friday the 14<sup>th</sup> of August 2026**. Telegraphic, telephonic, and Late or incomplete submissions will not be accepted. Submissions must be deposited in the Tender Box situated at the main reception of the Mkhondo Local Municipality Finance Department, Corner of Mark and De Wet Streets, eMkhondo.

Submissions must be accompanied by a formal written price quotation on a company letterhead, addressed to "THE MUNICIPAL MANAGER, MKHONDO LOCAL MUNICIPALITY, in a sealed envelope duly endorsed **"MLM QUO-01-08-2026: "DESCRIPTION"** and must contain the following Schedules **unless otherwise notified:-**

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**BIDDERS WHO ARE NOT REGISTERED ON CENTRAL SUPPLIER DATABASE WILL NOT BE CONSIDERED: TO REGISTER LOG ON TO: [WWW.CSD.GOV.ZA](http://WWW.CSD.GOV.ZA)**

**BIDDERS MUST COMPLETE THE PROPOSAL DOCUMENT WHERE ENTRIES BY THE BIDDER ARE REQUIRED, IN INDELIBLE BLACK INK, AND NOTICE MUST BE TAKEN THAT TIP-EX OR ANY OTHER CORRECTIVE MEASURES CAN NOT BE USED IN THE DOCUMENT. ALL ALTERATIONS MUST BE INITIALLED OR SIGNED BY THE PERSON AUTHORISED TO DO SO.**

QUOTATION MUST BE ACCOMPANIED BY THE FOLLOWING MANDATORY DOCUMENTS (BIDDERS THAT FAIL TO SUBMIT DOCUMENTS INDICATED AS COMPULSORY WILL BE DISQUALIFIED):

- Certified copies of all directors' Identity documents- (compulsory).
- Proof of company registration (CIPC) – (compulsory).
- Tax compliance status pin number issued by SARS – (compulsory).
- Current (most recent) municipal account (not in arrears for than 3 months) / lease agreement if renting (signed by both lessor & lessee). Bidders residing in non-billed areas must attach valid proof of residence / letter from Tribal Authority. – (compulsory).
- Central Supplier Database registration number - (Compulsory).
- Proof of authority of signatory in a company letterhead - (Compulsory).
- Duly completed and signed provided Municipal Bidding Documents (MBD) forms - (compulsory).

## EVALUATION CRITERIA

Bids will be evaluated in accordance with the Preferential Procurement Regulation, 2022 and Supply Chain Management Policy of Mkhondo Local Municipality will apply in the adjudication process. According to the Preferential Procurement Policy Framework Act No.5 of 2000, the 80/20 Price and Preference Point System will be applicable for this RFQ.

A maximum of 20 Preference Points will be allocated for specific goals. A total of 15 preference points shall be allocated on a proportional or pro-rata basis for contracting an enterprise owned by historically disadvantaged persons or individuals. A total of 5 points will be allocated to enterprises regarded as EMEs located within the local area of jurisdiction.

## RULES OF BIDDING/ INSTRUCTIONS

- Council reserves the right to withdraw, re-advertise, to award the bid wholly or partly and not to award the lowest bid offer and to appoint more than one (1) service provider.
- All certified copies of documents cannot be older than three (3) months
- Only suppliers that are registered on the Central Supplier Database will be considered for appointment. Please go to [www.csd.gov.za](http://www.csd.gov.za) to register before submission of quotations
- Valid formal signed price quotations must be submitted with the document, and all prices will be evaluated inclusive of costs.
- Price(s) quoted must be firm and valid for at least 30 days from date of offer. Quotes that do not cover the scope or specifications will be disqualified.

## NO AWARDS WILL BE MADE TO A PERSON:

- Who are in the service of the state,
- If that person is not a natural person, of which any director, manager, principal shareholder or stakeholder is a person in the service of the state,
- Who is an advisor or consultant contracted with the municipality or municipal entity and,
- When the Company is restricted to do business with the organs of the state.

**M.J. Mkhonza**  
**Municipal Manager**  
**Mkhondo Local Municipality**  
Cnr Mark and De Wet Street  
eMkhondo  
2380

## PART A

### INVITATION TO BID

|                                                                                           |                                                                     |               |                |               |       |
|-------------------------------------------------------------------------------------------|---------------------------------------------------------------------|---------------|----------------|---------------|-------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (MKHONDO LOCAL MUNICIPALITY)</b> |                                                                     |               |                |               |       |
| BID NUMBER:                                                                               | MLM QUO-01-08-2026                                                  | CLOSING DATE: | 14 AUGUST 2026 | CLOSING TIME: | 12H00 |
| DESCRIPTION                                                                               | SUPPLY AND INSTALLATION OF A FLOAT VALVE FOR MARK STREET RESERVOIR. |               |                |               |       |

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

**Mkhondo Local Municipality, Finance SCM Office**

**No.33 Corner market and De Wet Street**

**eMkhondo**

**2380**

#### 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:                                                                                |
| ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED? | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF] | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES /WORKS OFFERED? | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[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                                                       | .....                                                                              |                                                                          |                                                                                        |
| <b>BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO:</b>                                        |                                                                                    | <b>TECHNICAL INFORMATION MAY BE DIRECTED TO:</b>                         |                                                                                        |
| DEPARTMENT                                                                                    | FINANCE – SCM                                                                      | CONTACT PERSON                                                           | Ms T.H.A. MAZIBUKO                                                                     |
| CONTACT PERSON                                                                                | MR MC GUMEDE                                                                       | TELEPHONE NUMBER                                                         | 017 004 0197                                                                           |
| TELEPHONE NUMBER                                                                              | 017 004 0197                                                                       | FACSIMILE NUMBER                                                         | N/A                                                                                    |
| FACSIMILE NUMBER                                                                              | N/A                                                                                | E-MAIL ADDRESS                                                           | <a href="mailto:Tmazibuko@mkhondo.gov.za">Tmazibuko@mkhondo.gov.za</a>                 |
| E-MAIL ADDRESS                                                                                | <a href="mailto:mgumede@mkhondo.gov.za">mgumede@mkhondo.gov.za</a>                 |                                                                          |                                                                                        |

## PART B

### TERMS AND CONDITIONS FOR BIDDING

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. BID SUBMISSION:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.<br><br>1.2. <b>ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED–(NOT TO BE RE-TYPED).</b><br><br>1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2022, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <b>2. TAX COMPLIANCE REQUIREMENTS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.<br><br>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.<br><br>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.<br><br>2.4 FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B:3.<br><br>2.5 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.<br><br>2.6 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.<br><br>2.7 WHERE NO TCS IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.                                                                |
| <b>3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| 3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)? <span style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</span><br>3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA? <span style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</span><br>3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA? <span style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</span><br>3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA? <span style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</span><br>3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION? <span style="float: right;"><input type="checkbox"/> YES <input type="checkbox"/> NO</span><br><br><b>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.</b> |

**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: .....

## TAX CLEARANCE CERTIFICATE REQUIREMENTS

It is a condition of a bid that the taxes of the successful bidder must be in order, or that satisfactory arrangements have been made with South African Revenue Service (SARS) to meet the bidder's tax obligations.

- 1 In order to meet this requirement bidders are required to complete in full the attached form TCC 001 "Application for a Tax Clearance Certificate" and submit it to any SARS branch office nationally. The Tax Clearance Certificate Requirements are also applicable to foreign bidders / individuals who wish to submit bids.
- 2 SARS will then furnish the bidder with a Tax Clearance Certificate that will be valid for a period of 1 (one) year from the date of approval.
- 3 The original Tax Clearance Certificate must be submitted together with the bid. Failure to submit the original and valid Tax Clearance Certificate will result in the invalidation of the bid. Certified copies of the Tax Clearance Certificate will not be acceptable.
- 4 In bids where Consortia / Joint Ventures / Sub-contractors are involved, each party must submit a separate Tax Clearance Certificate.
- 5 Copies of the TCC 001 "Application for a Tax Clearance Certificate" form are available from any SARS branch office nationally or on the website [www.sars.gov.za](http://www.sars.gov.za).
- 6 Applications for the Tax Clearance Certificates can also be made via eFiling. In order to use this provision, taxpayers will need to register with SARS as eFilers through the website [www.sars.gov.za](http://www.sars.gov.za).
- 7 ***Bidders are required to submit herewith this form a valid SARS TCS PIN that will be used by the Employer to verify the tax Status.***

## MBD 3.1 BID PRICE

BID NUMBER: MLM QUO-01-08-2026

| ITEM                        | ITEM DESCRIPTION                                    | UNIT RATE | QTY | UNIT RATE PER ITEM (VAT EXCL) | TOTAL COST (VAT EXCL) |
|-----------------------------|-----------------------------------------------------|-----------|-----|-------------------------------|-----------------------|
| 1.                          | Break-out Existing 100NB Mild Steel Stub            | Sum       | 1   | R                             | R                     |
| 2.                          | Supply New 100NB Stainless-steel Puddle Pipe T1600  | Sum       | 1   | R                             | R                     |
| 3.                          | Supply and Install 100NB Bermad Float Control Valve | Sum       | 1   | R                             | R                     |
| 4.                          | Installation                                        | Sum       | 1   | R                             | R                     |
| 5.                          | Shutter and Grout Hole                              | Sum       | 1   | R                             | R                     |
| <b>SUB-TOTAL (VAT EXCL)</b> |                                                     |           |     |                               | R                     |
| VAT @ 15% (if applicable)   |                                                     |           |     |                               | R                     |
| <b>TOTAL (INCL VAT)</b>     |                                                     |           |     |                               | R                     |

| AMOUNT IN WORDS (INCL. VAT) | AMOUNT IN FIGURES ( INCL VAT) |
|-----------------------------|-------------------------------|
|                             | R                             |

\*\*AMOUNT MUST BE IN WORDS AS WELL AS IN FIGURES



**Signature:** (of person authorized to sign the tender): .....

**Name:** (of signatory in capitals): .....

**Capacity:** (of Signatory): .....

**Name of Tenderer:** (organisation): .....

**Address:** .....  
 .....

**Contact number:** ..... **Email:** .....

**Date:** .....

[Failure of a Tenderer to sign this form will invalidate the tender]

## DECLARATION OF BIDDERS - MBD4

1. No bid will be accepted from persons in the service of the state. \*
2. Any person, having a kinship with persons in the service of the state, including a blood relationship, can make an offer or offers in terms of this invitation to bid. In view of possible allegations of favoritism, 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 authorized representative declare their position in relation to the evaluating/adjudicating authority and/or take oath declaring his/her interest.

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

Full Name: .....

Identity Number: .....

Company Registration Number: .....

VAT Registration Number: .....

Are you presently in the service of the state?

**Yes / No**

If so furnish particulars: .....

.....

Have you been in the service of the state in the last twelve months?

**Yes / No**

If so furnish particulars .....

.....

---

MSCM Regulations: "in the service of the state" means to be-

- (a) a member of
- (1) any municipal council;
- (2) any provincial legislature; or
- (3) 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
- (e) constitutional institution within the meaning of the Public Finance Management Act, 1999 (act no 1 of 1999);
- (f) a member of the accounting authority of any national or provincial

Do you, have any relationship (family, friend, other) with persons in the service of the state and who can be involved with the evaluation and or adjudication of this bid?

**Yes / No**

If so, furnish particulars.....

.....

Are *you*, aware of any relationship (family, friendly, other) between a bidder and persons in the service of the state who can be involved with the evaluation and adjudication of this bid.

**Yes / No**

If so, furnish particulars.....

.....

Are any of the company's directors, managers, principle Shareholders or stakeholders in the service of the State?

**Yes / No**

If so, furnish particulars.....

.....

Is any spouse, child, or parent of the company's directors, managers, principle shareholders or stakeholders in service of the state?

**Yes / No**

If so, furnish particulars.....

.....

## CERTIFICATION

I, THE UNDERSIGNED (FULL NAME)

.....  
CERTIFY THAT THE INFORMATION FURNISHED ON THE DECLARATION FORM IS TRUE AND CORRECT. I ACCEPT THAT, IN ADDITION TO CANCELLATION OF CONTRACT, ACTION CAN BE TAKEN AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE

.....  
SIGNATURE

.....  
DATE

.....  
CAPACITY



## PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022

This preference form must form part of all tenders invited. It contains general information and serves as a claim form for preference points for specific goals.

**NB: BEFORE COMPLETING THIS FORM, TENDERERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF THE TENDER AND PREFERENTIAL PROCUREMENT REGULATIONS, 2022**

### 1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to invitations to tender:

- the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- the 90/10 system for requirements with a Rand value above R50 000 000 (all applicable taxes included).

### 1.2 To be completed by the organ of state

The applicable preference point system for this tender is the 80/20 preference point system.

1.3 Points for this tender (even in the case of a tender for income-generating contracts) shall be awarded for:

- (a) Price; and
- (b) Specific Goals.

### 1.4 To be completed by the organ of state:

The maximum points for this tender are allocated as follows:

|                                                  | POINTS     |
|--------------------------------------------------|------------|
| PRICE                                            | 80         |
| SPECIFIC GOALS                                   | 20         |
| <b>Total points for Price and SPECIFIC GOALS</b> | <b>100</b> |

1.5 Failure on the part of a tenderer to submit proof or documentation required in terms of this tender to claim points for specific goals with the tender, will be interpreted to mean that preference points for specific goals are not claimed.

1.6 The organ of state reserves the right to require of a tenderer, either before a tender is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the organ of state.

### 2. DEFINITIONS

- (a) **“tender”** means a written offer in the form determined by an organ of state in response to an invitation to provide goods or services through price quotations, competitive tendering process or any other method envisaged in legislation;
- (b) **“price”** means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;
- (c) **“rand value”** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;

- (d) **“tender for income-generating contracts”** means a written offer in the form determined by an organ of state in response to an invitation for the origination of income-generating contracts through any method envisaged in legislation that will result in a legal agreement between the organ of state and a third party that produces revenue for the organ of state, and includes, but is not limited to, leasing and disposal of assets and concession contracts, excluding direct sales and disposal of assets through public auctions; and
- (e) **“the Act”** means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

### 3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

#### 3.1. POINTS AWARDED FOR PRICE

##### 3.1.1 THE 80/20 OR 90/10 PREFERENCE POINT SYSTEMS

A maximum of 80 or 90 points is allocated for price on the following basis:

80/20 or 90/10

$$Ps = 80 \left( 1 - \frac{Pt - P_{min}}{P_{min}} \right) \text{ or } Ps = 90 \left( 1 - \frac{Pt - P_{min}}{P_{min}} \right)$$

Where

Ps = Points scored for price of tender under consideration  
 Pt = Price of tender under consideration  
 Pmin = Price of lowest acceptable tender

#### 3.2. FORMULAE FOR DISPOSAL OR LEASING OF STATE ASSETS AND INCOME GENERATING PROCUREMENT

##### 3.2.1. POINTS AWARDED FOR PRICE

A maximum of 80 or 90 points is allocated for price on the following basis:

80/20 or 90/10

$$Ps = 80 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right) \text{ or } Ps = 90 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right)$$

Where

Ps = Points scored for price of tender under consideration  
 Pt = Price of tender under consideration  
 Pmax = Price of highest acceptable tender

### 4. POINTS AWARDED FOR SPECIFIC GOALS

- 4.1. In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential Procurement Regulations, preference points must be awarded for specific goals stated in the tender. For the purposes of this tender the tenderer will be allocated points based on the goals stated in table 1 below as may be supported by proof/ documentation stated in the conditions of this tender:
- 4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the tender documents, stipulate in the case of—

- (a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or
- (b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system, then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

**Table 1: Specific goals for the tender and points claimed are indicated per the table below.**

**(Note to organs of state: Where either the 90/10 or 80/20 preference point system is applicable, corresponding points must also be indicated as such.)**

**Note to tenderers: The tenderer must indicate how they claim points for each preference point system.)**

| The specific goals allocated points in terms of this tender                                                                      | Number of points allocated (80/20 system) (To be completed by the organ of state) | Number of points claimed (80/20 system) (To be completed by the tenderer) |
|----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| 100% black person or people owned enterprise. (verified via CSD under ownership information)                                     | 5                                                                                 |                                                                           |
| 30% woman or woman shareholding or owned enterprise. (verified via CSD under ownership information)                              | 5                                                                                 |                                                                           |
| 30% youth shareholding or owned enterprise. (verified via CSD under ownership information)                                       | 2.5                                                                               |                                                                           |
| 30% people living with disability shareholding or owned enterprise. (verified via CSD under ownership information)               | 2.5                                                                               |                                                                           |
| Enterprise regarded as EMEs located within the local area of jurisdiction. (verified via CSD under supplier address information) | 5                                                                                 |                                                                           |

#### DECLARATION WITH REGARD TO COMPANY/FIRM

4.3. Name of company/firm.....

4.4. Company registration number: .....

4.5. TYPE OF COMPANY/ FIRM

- ☐ Partnership/Joint Venture / Consortium
- ☐ One-person business/sole propriety
- ☐ Close corporation
- ☐ Public Company
- ☐ Personal Liability Company
- ☐ (Pty) Limited
- ☐ Non-Profit Company
- ☐ State Owned Company

[TICK APPLICABLE BOX]

4.6. I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I acknowledge that:

- i) The information furnished is true and correct;
- ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;
- iv) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may have –
  - (a) disqualify the person from the tendering process;
  - (b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
  - (c) cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;
  - (d) recommend that the tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted from obtaining business from any organ of state for a period not exceeding 10 years, after the *audi alteram partem* (hear the other side) rule has been applied; and
  - (e) forward the matter for criminal prosecution, if deemed necessary.

.....

**SIGNATURE(S) OF TENDERER(S)**

**SURNAME AND NAME:** .....

**DATE:** .....

**ADDRESS:** .....

.....

.....

## DECLARATION OF BIDDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES – MBD 8

- 1 This Standard Bidding Document must form part of all bids invited.
- 2 It serves as a declaration to be used by institutions in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
- 3 The bid of any bidder can be disregarded if that bidder, or any of its directors have-
  - a. abused the institution's supply chain management system;
  - b. committed fraud or any other improper conduct in relation to such system; or
  - c. failed to perform on any previous contract.

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

5

| Item  | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Yes                             | No                             |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------|
| 1.1   | Is the Tenderer or any of its directors listed on the National Treasury's database as a company or person prohibited from doing business with the public sector?<br>(Companies or persons who are listed on this database were informed in writing of this restriction by the National Treasury after the <i>audi alteram partem</i> rule was applied).                                                                                                                      | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 1.1.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                                |
| 1.2   | Is the Tenderer or any of its directors listed on the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004)?<br>(To access this Register enter the National Treasury's website, <a href="http://www.treasury.gov.za">www.treasury.gov.za</a> , click on the icon "Register for Tender Defaulters" or submit your written request for a hard copy of the Register to facsimile number 012 3265445). | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 1.2.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                                |
| 1.3   | Was the Tenderer or any of its directors convicted by a court of law (including a court of law outside the Republic of South Africa) for fraud or corruption during the past five years?                                                                                                                                                                                                                                                                                     | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 1.3.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                                |
| 1.4   | Does the Tenderer or any of its directors owe any municipal rates and taxes or municipal charges to the municipality / municipal entity, or to any other municipality / municipal entity, that is in arrears for more than three months?                                                                                                                                                                                                                                     | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 1.4.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                                |
| 1.5   | Was any contract between the Tenderer and the municipality / municipal entity or any other organ of state terminated during the past five years on account of failure to perform on or comply with the contract?                                                                                                                                                                                                                                                             | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 1.5.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 |                                |

\*where the entity tendering is a joint venture, each party to the joint venture must sign a declaration in terms of the Municipal Finance Management Act and attach it to this schedule

**CERTIFICATION**

I, THE UNDERSIGNED (FULL NAME).....  
CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS TRUE AND CORRECT.

I ACCEPT THAT, IN ADDITION TO CANCELLATION OF A CONTRACT, ACTION CAN BE TAKEN AGAINST ME SHOULD THIS  
DECLARATION PROVE TO BE FALSE.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_ Position \_\_\_\_\_

Bidder \_\_\_\_\_



## CERTIFICATE OF INDEPENDENT BID DETERMINATION

- 1 This Municipal Bidding Document (MBD) must form part of all bids<sup>1</sup> invited.
- 2 Section 4 (1) (b) (iii) of the Competition Act No. 89 of 1998, as amended, prohibits an agreement between, or concerted practice by, firms, or a decision by an association of firms, if it is between parties in a horizontal relationship and if it involves collusive bidding (or bid rigging).<sup>2</sup> Collusive bidding is a *pe se* prohibition meaning that it cannot be justified under any grounds.
- 3 Municipal Supply Regulation 38 (1) prescribes that a supply chain management policy must provide measures for the combating of abuse of the supply chain management system, and must enable the accounting officer, among others, to:
  - a. take all reasonable steps to prevent such abuse;
  - b. reject the bid of any bidder if that bidder or any of its directors has abused the supply chain management system of the municipality or municipal entity or has committed any improper conduct in relation to such system; and
  - c. cancel a contract awarded to a person if the person committed any corrupt or fraudulent act during the bidding process or the execution of the contract.
- 4 This MBD serves as a certificate of declaration that would be used by institutions to ensure that, when bids are considered, reasonable steps are taken to prevent any form of bid-rigging.
- 5 In order to give effect to the above, the attached Certificate of Bid Determination (MBD 9) must be completed and submitted with the bid:

<sup>1</sup> Includes price quotations, advertised competitive bids, limited bids and proposals.

<sup>2</sup> Bid rigging (or collusive bidding) occurs when businesses, that would otherwise be expected to compete, secretly conspire to raise prices or lower the quality of goods and / or services for purchasers who wish to acquire goods and / or services through a bidding process. Bid rigging is, therefore, an agreement between competitors not to compete.

## CERTIFICATE OF INDEPENDENT BID DETERMINATION

I, the undersigned, in submitting the accompanying bid:

**MLM QUO-01-08-2026 (SUPPLY AND INSTALLATION OF A FLOAT VALVE FOR MARK STREET RESERVOIR)**  
(Bid Number and Description)

in response to the invitation for the bid made by:

**MKHONDO LOCAL MUNICIPALITY**

(Name of Municipality / Municipal Entity)

do hereby make the following statements that I certify to be true and complete in every respect:

I certify, on behalf of: \_\_\_\_\_ that:

(Name of Bidder/Company)

1. I have read and I understand the contents of this Certificate;
2. I understand that the accompanying bid will be disqualified if this Certificate is found not to be true and complete in every respect;
3. I am authorized by the bidder to sign this Certificate, and to submit the accompanying bid, on behalf of the bidder;
4. Each person whose signature appears on the accompanying bid has been authorized by the bidder to determine the terms of, and to sign, the bid, on behalf of the bidder;
5. For the purposes of this Certificate and the accompanying bid, I understand that the word "competitor" shall include any individual or organization, other than the bidder, whether or not affiliated with the bidder, who:
  - (a) has been requested to submit a bid in response to this bid invitation;
  - (b) could potentially submit a bid in response to this bid invitation, based on their qualifications, abilities or experience; and
  - (c) provides the same goods and services as the bidder and/or is in the same line of business as the bidder
6. The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However communication between partners in a joint venture or consortium<sup>3</sup> will not be construed as collusive bidding.
7. In particular, without limiting the generality of paragraphs 6 above, there has been no consultation, communication, agreement or arrangement with any competitor regarding:
  - (a) prices;
  - (b) geographical area where product or service will be rendered (market allocation)
  - (c) methods, factors or formulas used to calculate prices;
  - (d) the intention or decision to submit or not to submit, a bid;
  - (e) the submission of a bid which does not meet the specifications and conditions of the bid; or
  - (f) bidding with the intention not to win the bid.
8. In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications and conditions or delivery particulars of the products or services to which this bid invitation relates.

9. The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening or of the awarding of the contract.
10. I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act No 89 of 1998 and or can be reported to the National Prosecuting Authority (NPA) for criminal investigation and or can be restricted from conducting business with the public sector for a period not exceeding ten (10) years in terms of the Prevention and Combating of Corrupt Activities Act No 12 of 2004 or any other applicable legislation.

.....  
**Signature**

.....  
**Date**

.....  
**Capacity**

.....  
**Name of Bidder**



## PROOF OF CSD REGISTRATION

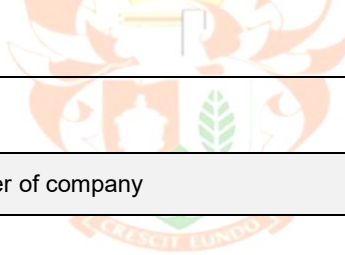
### NOTICE OF SUPPLY CHAIN MANAGEMENT CENTRAL SUPPLIER DATABASE REGISTRATION

Par 14(1)(a) of the municipal supply chain management policy states that the municipality must keep a list of accredited prospective providers of goods and services that must be used for procurement requirements.

The purpose of this notice is to obtain proof that the service provider is registered on the Central Supplier Database. **Registration is COMPULSORY in order to conduct business with Mkhondo Local Municipality.**

The database will be used to verify the accreditation of a supplier before an award can be made.

Each bidder must complete the below checklist (please tick with an X where appropriate).

| QUESTIONS                                                                                             |                                                                                                                                                      | YES                                                                                 | NO |
|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----|
| 1.                                                                                                    | Is your company registered on the Central Supplier Database?                                                                                         |                                                                                     |    |
| 2.                                                                                                    | If yes, provide the following details:                                                                                                               |                                                                                     |    |
| 2.1                                                                                                   | CSD registration number                                                                                                                              |                                                                                     |    |
| 2.2                                                                                                   | Tax Compliance Status Pin Number                                                                                                                     |                                                                                     |    |
| 3.                                                                                                    | Enquiries related to par. 2.1 and 2.2 can be made to Mr MC Gumede at 017 285 0309                                                                    |                                                                                     |    |
| 4.                                                                                                    | If no, please register on Central Supplier Database ,website, <a href="http://www.csd.gov.za">www.csd.gov.za</a> , before submitting tender document |                                                                                     |    |
| I, (insert full name)                                                                                 |                                                                                                                                                      |  |    |
| of (insert physical address)                                                                          |                                                                                                                                                      |                                                                                     |    |
| being a Director, Principal Shareholder, owner of company                                             |                                                                                                                                                      |                                                                                     |    |
| of (insert company name)                                                                              |                                                                                                                                                      |                                                                                     |    |
| hereby confirms that, the information submitted in this form is accurate, to the best of my knowledge |                                                                                                                                                      |                                                                                     |    |
| SIGNATURE                                                                                             |                                                                                                                                                      |                                                                                     |    |

## CLEARANCE CERTIFICATE FOR WATER & LIGHTS

**Section 45(1)(d) of Municipal Supply Chain Regulations requires that the municipality must reject a bidder whose municipal rates and taxes are in arrears for more than three months.**

The purpose of this schedule is to obtain proof that municipal services, rates and taxes of the service provider are not in arrears for more than three months, with the relevant municipality in the municipal area where the service provider conduct his / her business or if the bidder is a tenant, a Letter from the Landlord stipulating the office space leased and the payment status of the service charges. Should the above not be applicable NO AFFIDIVIT will be acceptable ONLY AN OFFICIAL COUNCIL LETTER OF RESIDENCE from bidders residing in non-billed areas will be acceptable (subject to verification)

**Each bidder must complete the checklist below. Important: if you fail to complete this form, the bid will be non-responsive.** (Please tick with **X** where appropriate):

| QUESTIONS                                                                                             |                                                                                                                                                            | YES | NO |
|-------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|
| 1.                                                                                                    | Do you own a property?                                                                                                                                     |     |    |
| 2.                                                                                                    | Do you receive a municipal rates account?                                                                                                                  |     |    |
| 3.                                                                                                    | Is your municipal rates and taxes account up to date / current (not in arrears for more than three months)?                                                |     |    |
| 4.                                                                                                    | If yes, provide the following details:                                                                                                                     |     |    |
| 4.1                                                                                                   | <input type="checkbox"/> Municipality name                                                                                                                 |     |    |
| 4.2                                                                                                   | <input type="checkbox"/> Municipal account number                                                                                                          |     |    |
| 5.                                                                                                    | <b>If yes, please attach proof in the form of the original or certified copy of the bidder's municipal rates and taxes account not older than 3 months</b> |     |    |
| 6.                                                                                                    | Does the bidder lease / rent the property where the business is situated?                                                                                  |     |    |
| 7.                                                                                                    | If yes, provide the following details:                                                                                                                     |     |    |
| 7.1                                                                                                   | <input type="checkbox"/> Landlord name                                                                                                                     |     |    |
| 7.2                                                                                                   | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Address property is situated                           |     |    |
| 7.3                                                                                                   | <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> Contact number of landlord                             |     |    |
| 8.                                                                                                    | <b>Please attach the copy of the lease agreement signed by the landlord / lessor and the tenant / lessee as proof</b>                                      |     |    |
| I, (Insert full name)                                                                                 |                                                                                                                                                            |     |    |
| of (insert physical address)                                                                          |                                                                                                                                                            |     |    |
| being a Director, Principal Shareholder, owner of company                                             |                                                                                                                                                            |     |    |
| of (insert company name)                                                                              |                                                                                                                                                            |     |    |
| Hereby confirms that, the information submitted in this form is accurate, to the best of my knowledge |                                                                                                                                                            |     |    |
| <b>SIGNATURE</b>                                                                                      |                                                                                                                                                            |     |    |

**\* IMPORTANT:** IF YOU FAIL TO COMPLETE THIS FORM, YOUR QUOTE MAY BE NON-RESPONSIVE.

**Names of all directors, their ID numbers and municipal account number.**

| Director / Shareholder / partner | ID Number of Director / Shareholder / Partner | Physical residential address of the Director / shareholder / partner | Municipal Account number(s) | Municipality where the account is held |
|----------------------------------|-----------------------------------------------|----------------------------------------------------------------------|-----------------------------|----------------------------------------|
|                                  |                                               |                                                                      |                             |                                        |
|                                  |                                               |                                                                      |                             |                                        |
|                                  |                                               |                                                                      |                             |                                        |
|                                  |                                               |                                                                      |                             |                                        |
|                                  |                                               |                                                                      |                             |                                        |

- Bidder to affix copies of municipal accounts mentioned of each Director, Shareholder, and partner listed above (Not older than 3 months).

### CERTIFICATION

I, (AUTHORISED SIGNATORY) THE UNDERSIGNED

(FULLNAME).....

CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS TRUE AND CORRECT.

I FURTHER UNDERTAKE FULL REPSONSIBILITY FOR ANY INCORRECT INFORMATION PROVIDED AND THAT THE EMPLOYER (MKHONDO LOCAL MUNICIPALITY) CAN NOT BE HELD ACCOUNTABLE FOR INCORRECT INFORMATION PROVIDED.

Signed .....

Date .....

Name .....

Position .....

**Bidder** .....

## CERTIFICATE FOR AUTHORITY OF SIGNATORY

**(Bidders MUST attach an additional Resolution signed by All Members under the Official Company Letterhead)**

The following Resolution in terms of section 74 of the Companies Act of a meeting of the Board of \*Directors / Members / Partners of:

|                   |         |
|-------------------|---------|
| (Enterprise Name) |         |
| Held at           | (place) |
| on                | (date)  |

### RESOLVED THAT:

|    |                                                                                                                                                                                                                                                                                                                   |                              |
|----|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|
| 1. | The enterprise submits a bid / tender to the Mkhondo Local Municipality in respect of the following project:<br><b>SUPPLY AND INSTALLATION OF A FLOAT VALVE FOR MARK STREET RESERVOIR.</b>                                                                                                                        |                              |
| 2. | Mr / Mrs / Ms                                                                                                                                                                                                                                                                                                     |                              |
|    | in his/her capacity a:                                                                                                                                                                                                                                                                                            | (Position in the Enterprise) |
|    | and who will sign as follows:                                                                                                                                                                                                                                                                                     | (Authorized Signature)       |
|    | be, and is hereby, authorized to sign the bid / tender, and any and all other documents and/or correspondence in connection with and relating to the bid /tender, as well as to sign any contract, and any and all documentation, resulting from the award of the bid / tender to the enterprise mentioned above. |                              |

### Directors / Members / Partners of:

| # | NAME | CAPACITY | SIGNATURE |
|---|------|----------|-----------|
| 1 |      |          |           |
| 2 |      |          |           |
| 3 |      |          |           |
| 4 |      |          |           |
| 5 |      |          |           |
| 6 |      |          |           |

### Note:

1. *\*Delete which is not applicable*
2. **NB.** *This resolution must be signed by all the directors / members / partners of the bidding enterprise.*
3. *Should the number of directors / members / partners exceed the space available above, additional names and signatures must be supplied on a separate page.*