KWAZULU-NATAL PROVINCE
AGRICULTURE AND RURAL DEVELOPMENT
REPUBLIC OF SOUTH AFRICA

INVITATION OF QUOTATION FROM R1 - R1 MILLION

THIS FORM MUST BE COMPLETED IN DETAIL AND MUST BE ACCOMPANIED BY A VALID BBBEE CERTIFICATE/SWORN AFFIDAVIT /CSD REPORT

QUOTATION NUMBER: R/S/2627/1763	VALIDITY PERIOD OF QUOTATION..... Days (To be completed by the Supplier)
CLOSING DATE: 15/09/2026	**CLOSING TIME:** 11H00
DESCRIPTION(SPECIFICATION/S) OF ITEMS/ SERVICE REQUIRED: **REQUEST FOR THE REMOVAL OF MEDICAL AND CHEMICAL HAZARDOUS (HEALTH CARE RISK) WASTE.** **(See attached spec)**	COMPANY NAME:_____ TEL NO: _____ FAX NO: _____ CONTACT PERSON: _____ CSD REG NUMBER MAAA.....
DOES OFFER COMPLY WITH SPECIFICATION?	YES/NO (DELETE WHICH IS NOT APPLICABLE)
DOES ARTICLE COMPLY WITH SABS SPECIFICATION? HAS IT BEEN INSPECTED BY SABS?	YES/NO YES/NO (DELETE WHICH IS NOT APPLICABLE)
DELIVERY PERIOD AFTER INITIAL ORDER?	
IS THE PRICE FIRM	
WHERE ARE THE STOCK HELD? (PHYSICAL ADDRESS, PLEASE)	
QUOTATION PRICE INCLUDING VAT (VAT TO BE ADDED BY REGISTERED VAT VENDORS ONLY)	TOTAL: R .....
COMPANY OFFICIAL STAMP/NAME	..... SIGNATURE OF BIDDER ..... DATE

Quotation to be returned to: Ntuthuko Hlengwa

Department of Agriculture & Rural Development:

Ntuthuko.Hlengwa@kzndard.gov.za

Tel. No: 033 343 8367

NB: DOCUMENT MUST BE COMPLETED IN FULL
THIS QUOTATION COVER PAGE MUST BE COMPLETED AND RETURNED WITH ALL YOUR SUPPORTING DOCUMENTS.

FOR ENQUIRY ONLY

END-USER NAME : MATHEKGANA MJ
CELLPHONE NUMBER : 076 941 1901
E-MAIL ADDRESS : Justice.mathekgana@kzndard.gov.za
PROPOSED DELIVERY DATE : 20 October 2026
DELIVERY ADDRESS : 458 Townbush road Cascades 3201 (Allerton State Vet Offices)
LOCAL MUNICIPALITY : UMsunduzi Municipality
DISTRICT : UMgungundlovu District

LINE NO.	DESCRIPTION OR SPECIFICATION OF ITEM (Please be very specific and clear)	REQUIRED QUANTITY	UNIT PRICE EXCL. VAT		TOTAL PRICE	
			R	C	R	C
1.	**Supply, Deliver and Offload of** Request for the removal of medical and chemical hazardous (Health care risk) waste in 25L at estimated 15kg. Green Liquid medical waste buckets. **The order to include the 25L Buckets to load on and replacement Buckets**	15				
2.	Request for the removal of medical and chemical hazardous (Health care risk) waste in 25L at estimated 10kg. Yellow Needles and sharps Buckets with replacement Buckets	3				
				*** LABOUR (IF APPLICABLE)**		
				***DELIVERY (IF APPLICABLE)**		
				TOTAL		
				***ONLY APPLICABLE TO VAT REGISTERED SUPPLIERS 15% VAT**		
				TOTAL PRICE		
CIDB Grading (IF APPLICABLE):						

COMPANY NAME : _____

CSD NUMBER : _____

ADDRESS : _____

CONTACT PERSON : _____

CONTACT NUMBER : _____

*VAT Registration No. (Supplier) ----------

PRICES ARE VALID FOR DAYS

Mark one Box (X)

30	60	90	120

SIGNATURE.....

DATE.....

SPECIFICATIONS FOR CONTRACT:
COLLECTION AND DISPOSAL OF HEALTH CARE RISK WASTE
DEPARTMENT OF AGRICULTURE AND RURAL DEVELOPMENT:
VETERINARY SERVICES

1. BACKGROUND

Poor management of Health Care Risk Waste (HCRW) poses a health risk to society. It is therefore of utmost importance that a **certified** service provider is procured to collect and safely dispose of HCRW for the Department of Agriculture and Rural Development.

2. SPECIFICATIONS

2.1 SERVICE PROVIDER REQUIREMENTS

2.1.1 The service provider must be registered/authorized according to and be in possession of:

- Environmental Conservation Act, 1989 (act no 73 of 1989).
- Either have a Waste License as per NEMA Waste Act 59 of 2005 or Section 20 Permit as per Environmental Conservation Act 73 of 1989 and a Record of Decision issued by DEA.
- Trade Effluent Permit allowing service provider to wash and clean their healthcare risk waste vehicles and reusable containers.
- Schedule Trade Permit.
- Be registered on the National WIS System and have the necessary certificate.
- Be a member of IWMSA or AMWA.
- Letter of Good Standing from the Compensation Commissioner.
- References of 3 large current customers to be provided within the province.

2.1.2 Transportation:

- Vehicles used for transporting/collecting HCRW must be equipped with spill kits.
- Vehicles must be registered with the Department of Transport as dangerous goods' carriers (reflecting two valid licence discs).
- Vehicles used for transporting/collecting must be clearly marked as transporting HCRW.
- Vehicles must meet the requirements of the National Road Traffic Act 93 of 1996 and the applicable SANS codes:
  - SANS 10231: 2010
  - SANS 1518: 2008
  - SANS 10232 part 1 to 4 of 2007
- All drivers must be hazmed trained.
- All drivers to have PrdP driver's license.
- Regular microbial testing must be carried out on service provider's vehicles and proof provided thereof.
- Record of all drivers and load assistants registered with the bargaining council.
- No 3rd party transportation will be allowed.
- Vehicles are required to have a "clean" and "dirty" compartment.
- All vehicles are required to have tracking devices.
- All staff (drivers, load assistants and staff) visiting laboratories or state veterinary offices are required to be on a medical surveillance program.

2.1.3 Treatment Facility:

- The provider must be able to prove that the process of destruction of HCRW and residues do not pose a health risk to human health or environment.
- The service provider must provide the HCRW destruction facility compliance certificate provided by the authority concerned before payment will be done.
- External audits of the treatment facility must be taken on a regular basis, including sterility testing of the treated waste.

- Service provider must have a contingency plan in place if their treatment facility is unable to process the waste.
- Anatomical and pharmaceutical waste (schedules 5 & 6) must be incinerated as per legislation. Proof provided thereof.
- Ash from the incineration of anatomical and pharmaceutical waste (schedules 5 & 6) must go to a high hazardous (H: H) landfill site. Proof provided thereof.
- Majority of the HCRW (Infectious & Sharps, Pharmaceutical S0- 4) needs to be treated within the KZN borders and only waste streams that have to be incinerated as per legislation may leave the province.

2.1.4 Waste Containers:

- Healthcare risk waste containers must be SABS tested and approved as meeting the United Nations' recommendations for the Transportation of Dangerous Goods (Chapter 6) and must be issued with a CT number.
- Healthcare risk waste containers must be correct color coded and labelled; thereby indicating the correct category of healthcare risk waste contained therein.
- Healthcare risk waste containers must be electronically tracked from cradle to grave.
- Regular microbial testing must be carried out on service provider's reusable containers and proof provided thereof.

2.1.4.1 Sharps Containers:

- Single-use sharps containers, to be made available in different sizes dependent on needs and volumes of waste generated e.g. 2.5lts, 5lts, 10lts or 25lts.
- Containers must be tamper proof, puncture proof and spill proof.

- Containers must have an indicator for maximum fill level. The opening to insert SHARPS should be user-friendly to prevent prick injuries while trying to force items in.
- Containers must meet SANS 452: 2008 and SANS 10229 -1 packing requirements.

2.1.4.2 Infectious Biohazardous Health Care Risk Waste Containers:

- Single-use cardboard box waste containers with lid marked biohazardous waste.
- Red heavy duty plastic bags to line the box.
- To be made available in different sizes dependent on needs and volumes of waste generated.
- The box sets must be SABS approved

2.1.4.3 Anatomical and pharmaceutical Waste Containers:

- Containers must be puncture proof and spill proof.
- Red heavy duty plastic bags to line the anatomical waste containers.
- To be made available in different sizes dependent on needs and volumes of waste generated.
- Containers must be SANS aligned, SABS / UN tested and approved.

2.1.5 Documents to be issued by service provider for each consignment:

- Dangerous Goods' Collection Document issued for each consignment of healthcare risk waste received by service provider.
- Safe Disposal Certificates issued confirming that healthcare risk waste has been treated and disposed of in accordance with legislation.
- All documents to be available electronically, as well as per post.

- Training to be done at all sites, at no additional charge on cradle to grave and segregation.
- Adhoc audits and reports will be required on tonnages / site performances.

2.1.6 Pricing

Pricing should be all inclusive and no additional charges to arise. Product to include (transport & treatment and disposal).

2.1.7 Quantity

The service provider will be responsible for providing suitable containers (as per above), collecting and disposing of the following approximate quantities of Health Care Risk Waste generated annually at the following Veterinary facilities:

SITE	WASTE STREAM			
	ANATOMICAL	INFECTIOUS	PHAMACEUTICAL	SHARPS
Allerton P.V.L.	2800 KG	2600 KG	13 KG	60 KG
Vryheid V.L.	500 KG	800 KG	N/A	20 KG
State Vet PMB	50kg	500 kg	1000 kg	500 kg
State Vet Ladysmith	10KG	4KG	400KG	200KG
SV Durban	N/A	50kg	200kg	800kg
SV Dundee	1000 KG	1000 KG	2000KG	1500KG
SV Ilembe	10KG	50KG	2000KG	80KG
SV Ixopo	1000 KG	1000 KG	2000KG	1500KG
SV Escourt			150 KG	60KG
SV Eshowe	Approx. 60kg	Approx 60kg	70 X 20litre buckets	20X 25 litre buckets
SV Jozini	300 KG	600 KG	1000KG	200KG
SV Hluhluwe	80KG	125Kg	480Kg	670Kg
SV Bergville			100KG	40KG
SV Newcastle	N/A	200KG	30KG	50KG
SV Nongoma	300 KG	600 KG	1000KG	200KG
SV Port shepstone	1000 KG	1000 KG	2000KG	1500KG
SV Vryheid	300 KG	600 KG	1000KG	200KG

KWAZULU-NATAL PROVINCE
AGRICULTURE AND RURAL DEVELOPMENT
REPUBLIC OF SOUTH AFRICA

SBD1

PART A

INVITATION TO BID

YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE *(NAME OF DEPARTMENT/ PUBLIC ENTITY)*					
BID NUMBER:	**R/S/2627/1763**	CLOSING DATE: **15/09/2026**		CLOSING TIME:	**11H00**
DESCRIPTION	See Attached Spec				
BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT *(STREET ADDRESS)*					

BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO		**TECHNICAL ENQUIRIES MAY BE DIRECTED TO:**	
CONTACT PERSON	**NTUTHUKO HLENGWA**	CONTACT PERSON	**M.J. MATHEKGANA**
TELEPHONE NUMBER	**033 343 8367**	TELEPHONE NUMBER	**076 941 1901**
FACSIMILE NUMBER	**N/A**	FACSIMILE NUMBER	**N/A**
E-MAIL ADDRESS	**Ntuthuko.Hlengwa@kzndard.gov.za**	E-MAIL 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				

SUPPLIER COMPLIANCE STATUS	TAX COMPLIANCE SYSTEM PIN:		**OR**	CENTRAL SUPPLIER DATABASE No:	MAAA

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 THE QUESTIONNAIRE BELOW]

QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS

IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?	☐ YES ☐ NO
DOES THE ENTITY HAVE A BRANCH IN THE RSA?	☐ YES ☐ NO
DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?	☐ YES ☐ NO
DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?	☐ YES ☐ NO
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 BELOW.

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 IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.**

1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2022, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.

1.4. **THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).**

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 VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS.

2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE WWW.SARS.GOV.ZA.

2.4 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.

2.5 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.

2.6 WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.

2.7 NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE."

NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.

SIGNATURE OF BIDDER: .....

CAPACITY UNDER WHICH THIS BID IS SIGNED: .....
(Proof of authority must be submitted e.g. company resolution)

DATE: .....

BIDDER'S DISCLOSURE

1. PURPOSE OF THE FORM

1.1 Any person (natural or juristic) may make an offer or offers in terms of this invitation to bid. In line with the principles of transparency, accountability, impartiality, and ethics as enshrined in the Constitution of the Republic of South Africa, 1996 (Constitution), and further expressed in the various applicable legislation, it is required for the bidder to make this declaration in respect of the details required hereunder.

1.2 If a person is listed in the Register for Tender Defaulters and/or the List of Restricted Suppliers, that person will automatically be disqualified from the bid process.

2. DECLARATION ON EMPLOYMENT BY ORGAN OF STATE

2.1 Is the bidder, or any of the directors / trustees / shareholders / members / partners of the bidder employed by an organ of state, as defined in section 239 of the Constitution? **YES/NO**

2.2 If YES, furnish particulars of the names, individual identity numbers, in the table below:

Full Name	**Identity Number**	**Name of organ of state**

1. the power, by one person or a group of persons holding the majority of the equity of an enterprise, alternatively, the person/s having the deciding vote or power to influence or to direct the course and decisions of the enterprise.

2.3 Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution? **YES/NO**

2.3.1 If so, furnish particulars:

.....
.....
.....

2.4 Does the bidder or any of its directors/trustees/shareholders members/partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise, whether or not they are bidding for this contract? **YES/NO**

2.4.1 If so, indicate all companies registered in the CSD in the table below:

Supplier registration number (MAAA)	**Status (active/inactive/deleted)**

Failure to disclose all CSD-registered active companies linked to all Directors will lead to disqualification.

3 GENERAL DECLARATION

I, ..., the undersigned, in submitting the accompanying bid, do hereby make the following statements that I certify to be true and complete in every respect:

3.1 I have read and I understand the contents of this disclosure.

3.2 I understand that the accompanying bid will be disqualified if this disclosure is found to be false.

3.3 The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor.

3.4 In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications, prices, including methods, factors or formulas used to calculate prices, market allocation, the intention or decision to submit or not to submit the bid, bidding with the intention not to win the bid and conditions or delivery particulars of the products or services to which this bid invitation relates.

3.5 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.

3.6 There have been no consultations, communications, agreements or arrangements made by the bidder with any official of the procuring institution in relation to this procurement process prior to and during the bidding process except to provide clarification on the bid submitted where so required by the institution; and the bidder was not involved in the drafting of the specifications or terms of reference for this bid.

3.7 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, 1998 (Act No. 89 of 1998) and or may be referred to law enforcement agencies for criminal investigation and or may be restricted from conducting business with the state for a period not exceeding 10 years in terms of the Prevention and Combating of Corrupt Activities Act, 2004 (Act No. 12 of 2004) or any other applicable legislation.

I CERTIFY THAT THE ABOVE IS CORRECT.

I ACCEPT THAT THE PROCURING INSTITUTION MAY REJECT THE BID OR TAKE APPROPRIATE ACTION AGAINST ME IF THIS DECLARATION IS FALSE.

.....	.....
Signature	Date
.....	.....
Designation	Name of bidder

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

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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**

(*delete whichever is not applicable for this tender*).

a) The applicable preference point system for this tender is the 90/10 preference point system.

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

c) Either the 90/10 or 80/20 preference point system will be applicable in this tender. The lowest/ highest acceptable tender will be used to determine the accurate system once tenders are received.

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**
Total points for Price and SPECIFIC GOALS	**100**

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**

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

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**

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

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)	Tenderer to indicate number of points to be claimed (Number of points claimed to a maximum of 10 points)
100% Black owned entities	10	
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)**	**Tenderer to indicate number of points to be claimed (Number of points claimed to a maximum of 10 points)**
Enterprises located in a specific District (Proof of residence to be attached i.e. Utility Bill, Municipal Councillor's letter applicable for procurement from R1 – R30 000)	10	
51% Black people who are women	10	
51% Black people who are youth	8	
51% Black people with disabilities (Proof to be attached)	7	
51% Black people living in rural or underdeveloped areas or townships	6	
51% Black people who are military veterans (Proof to be attached)	6	
A cooperative owned by 51% black people	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: .....

.....

.....

.....

CONTRACT FORM - PURCHASE OF GOODS/WORKS

THIS FORM MUST BE FILLED IN DUPLICATE BY BOTH THE SUCCESSFUL BIDDER (PART 1) AND THE PURCHASER (PART 2). BOTH FORMS MUST BE SIGNED IN THE ORIGINAL SO THAT THE SUCCESSFUL BIDDER AND THE PURCHASER WOULD BE IN POSSESSION OF ORIGINALLY SIGNED CONTRACTS FOR THEIR RESPECTIVE RECORDS.

PART 1 (TO BE FILLED IN BY THE BIDDER)

1. I hereby undertake to supply all or any of the goods and/or works described in the attached bidding documents to (name of institution)..... in accordance with the requirements and specifications stipulated in bid number..... at the price/s quoted. My offer/s remain binding upon me and open for acceptance by the purchaser during the validity period indicated and calculated from the closing time of bid.

2. The following documents shall be deemed to form and be read and construed as part of this agreement:

   (i) Bidding documents, *viz*
   - Invitation to bid;
   - Tax clearance certificate;
   - Pricing schedule(s);
   - Technical Specification(s);
   - Preference claims for Broad Based Black Economic Empowerment Status Level of Contribution in terms of the Preferential Procurement Regulations 2011;
   - Declaration of interest;
   - Declaration of bidder's past SCM practices;
   - Certificate of Independent Bid Determination
   - Special Conditions of Contract;

   (ii) General Conditions of Contract; and
   (iii) Other (specify)

3. I confirm that I have satisfied myself as to the correctness and validity of my bid; that the price(s) and rate(s) quoted cover all the goods and/or works specified in the bidding documents; that the price(s) and rate(s) cover all my obligations and I accept that any mistakes regarding price(s) and rate(s) and calculations will be at my own risk.

4. I accept full responsibility for the proper execution and fulfilment of all obligations and conditions devolving on me under this agreement as the principal liable for the due fulfillment of this contract.

5. I declare that I have no participation in any collusive practices with any bidder or any other person regarding this or any other bid.

6. I confirm that I am duly authorised to sign this contract.

NAME (PRINT) .....

CAPACITY .....

SIGNATURE .....

NAME OF FIRM .....

DATE .....

WITNESSES

1 .....

2. .....

Cedara Road, Pietermaritzburg, 3200
Department of Agriculture & Rural Development, Private Bag X9059, Pietermaritzburg, 3200
033 355 9568 / 9369

Procurements from R1 up to R 30 000.00, the Department will allocate (80/20) points as follows:

80 points for price

10 points for black owned entities

10 points for entities located in a District where goods/services are required.

If the entity is 100% owned by black people, this must be supported by a BBBEE certificate or affidavit or share register or CSD report.

Historically Disadvantaged Individuals	**Black Owned**	**Districts**	**Total Points**
An EME or QSE which is at least 100% owned by black people			
Enterprises located in a specific District for work to be done or services to be rendered in that District (Proof of residence to be attached)	**10**	**10**	**20**

Procurements from R30 000 – R1M the Department will allocate the points as follows

Historically Disadvantaged Individuals	Black Owned	Points
0An EME or QSE which is at least 100% owned by black people		
51% Black people who are women	10	10
51% Black people who are youth	10	8
51% Black people with disabilities (Proof to be attached)	10	7
51% Black people living in rural or underdeveloped areas or townships	10	6
51% Black people who are military veterans (Proof to be attached)	10	6
A cooperative owned by 51% black people	10	5

If the entity is 100% owned by black people, this must be supported by a BBBEE Certificate or Affidavit or Share Register or CSD report.

Should the service provider qualify for more than one (1) specific goal points as per the above table, the Department will allocate the points to the goal with highest score.