



APPLICATION FOR REGISTRATION: SUPPLIER DATABASE

THIS FORM MUST BE FULLY COMPLETED AND DELIVERED AND PLACE THE FOLLOWING ADDRESS:

*Attention: The Supply Chain Management Office
UMVOTI LOCAL MUNICIPALITY
41 Bell Street
Greytown
3250*

Required Documentation Checklist

Please ensure that all listed documentation below is attached (where applicable) to the registration form. All documentation is to be provided in its original format and/or certified. In the event that all required documents are not attached the application will not be processed.

Document Name	attached
Original Valid Tax Clearance Certificate / VAT Registration	<input type="checkbox"/>
Certified Copy of Company Registration Certificate	<input type="checkbox"/>
Company Profile (max 3 pages)	<input type="checkbox"/>
Certified Copies of Director's ID's	<input type="checkbox"/>
Certified Copy of Accreditation Certificates	<input type="checkbox"/>
Cancelled Cheque / Verification Letter of Bank	<input type="checkbox"/>
Any relevant independent agency ratings / industrial endorsement	<input type="checkbox"/>
Proof of Disability (Doctor's Letter)	<input type="checkbox"/>
Letter of good standing Unemployment Insurance fund	<input type="checkbox"/>
Letter of good standing Compensation Fund	<input type="checkbox"/>
Proof of Ownership/Shareholding Certificate	
Other (please specify): _____	<input type="checkbox"/>

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Captured by:

Date:

New

Update

Status:

Approved Declined Awaiting Approval

Done VAT Checked:

Yes

No

Reason if "No":

end Summary Report

Yes

No

Reason if "No":

SERVICE PROVIDER REGISTRATION FORM

All sections to be completed in black ink, submitted with an original signature commissioned by an authorized Commissioner of Oaths

Company registration details

Company Name:

Trading Name

Reg.No:

Vat No.:

e.g. 2004/140566/23

Income Tax No.:

Number of full time employees:

Accreditation / Certification

*Cidb Number

Prof.Reg.Date

*Contractor Grade

CE

GB

EE

SW

ME

e.g 5CE PE

PE Status

Yes

No

**SAACE Reg. No./ other prof. reg. no.

*Note: Cidb info. for contractors only

**Note: SAACE No. for professionals only

Company Details

Website Address:

Email Address:

Telkom area code: e.g. 012,011 etc.

Telephone No.

Fax No:

Toll free No

Postal Address:

City / Town:

Postal Code:

Physical Address:

City / Town

Postal Code:

Classification of Business: Please ✓ all the relevant boxes

ISO Listed	Importer	Services	Manufacturer	Repairer	Black owned	Distributor	Exporter	Sales
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Supplier Grouping detail: (type of firm) Please ✓ the relevant box

Public Company (Ltd)	<input type="checkbox"/>	Foreign Company	<input type="checkbox"/>
Private Company (Pty) Ltd	<input type="checkbox"/>	Partnership	<input type="checkbox"/>
Closed Corporation (cc)	<input type="checkbox"/>	Trust	<input type="checkbox"/>
Joint Venture	<input type="checkbox"/>	Section 21 Company	<input type="checkbox"/>

Consortium	<input type="checkbox"/>	Government/Parastatels/Organ of State	<input type="checkbox"/>
Sole Proprietor	<input type="checkbox"/>		

Contact Person Details

Contact Person:-

Title:

First Name:

Surname:

ID No.:

Cell No.:

Work No.:

Fax No.:

Position:

E-mail:

Please complete Page 10: List of Owners / Proprietors / Partners / Sole Proprietors / Trustees

HDI Ownership Status:

Historically Disadvantage Individuals (HDI)	% of ownership
Women Equity (WE)	% of ownership
Disabled Individuals (DA)	% of ownership

SBD Goals Information:

Skills Empowerment	% of turnover
Human Resources	% of turnover
Upliftment of Communities	% of turnover

Locality Province No Yes If "Yes" please define:

Locality Region No Yes If "Yes" please define:

Locality Municipal Area No Yes If "Yes" please define:

Locality Rural Area No Yes If "Yes" please define:

SMME Status

* Please use the table per SMME table on page 10 to determine the SMME status of your enterprise
 * Please ✓ the relevant box

- Micro
- Very Small
- Small
- Medium
- Large

Business Information

Please indicate your appropriate sector with ✓

Agriculture	<input type="checkbox"/>	Wholesale Trade, Commercial	<input type="checkbox"/>
Mining and Quarrying	<input type="checkbox"/>	Catering, Accommodation, Other	<input type="checkbox"/>
Manufacturing	<input type="checkbox"/>	Transport and Storage	<input type="checkbox"/>
Electricity, Gas and Water	<input type="checkbox"/>	Finance and Business Services	<input type="checkbox"/>
Construction	<input type="checkbox"/>	Community, Social and Personal	<input type="checkbox"/>
Retail, Motor Trade and Repair	<input type="checkbox"/>		



Declaration of any Conflict of Interest

Are you currently working as an employee in any organ of state? Yes No

If "Yes", give details:

Have you worked in any organ of state for the past 12 months? Yes No

If "Yes", give details:

Do you have any relative working for an organ of state? Yes No

If "Yes", give details:

Do you have any close relationship with any official working in our establishment? Yes No

If "Yes", give details:

Is there any other relevant information that you would like to disclose? Yes No

If "Yes", give details:

Are you currently servicing on any structures of our establishment? Yes No

If "Yes", give details:

Is there any other relevant information that you would like to disclose? Yes No

If "Yes", give details:

Declaration

Verification of information supplied, including information relating to preferences that the Applicant or Business may apply for:

I/we, the undersigned, who warrants that I/we are duly authorised to do so on behalf of the supplier, certifies that the information supplied in terms of this document including the Annexure(s) with additional information, is correct and accurate and acknowledges that:

1. The supplier will be required to furnish documentary proof of the information relating to preferences if requested to do so.
2. If the information supplied is found to be incorrect, then may, in addition to any remedies it may have:
 - (i) Disqualify the supplier/contractor for a particular bid/contract/project it may be considered for, or which had been awarded to the supplier/contractor;
 - (ii) Recover from the supplier/contractor for all costs, losses or damages incurred or sustained by as a result of breach of contract;
 - (iii) Cancel the contract and claim any damages which may suffer by favourable arrangements after such cancellation and/or;
 - (iv) De-register the supplier registered on the Supplier Database
3. A registered supplier MUST notify Supply Chain Management Office of any changes to information supplied on this form. Failure to do so may result in such a supplier being removed from the Supplier database and / or the cancellation of contracts awarded to the supplier, on the basis of misrepresentation.

Signed on this _____ day of _____ 20__ at _____

Signature of Authorised Representative

Name in Block Letters

Commissioner of Oaths

Business Address

Capacity

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Area

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Commissioner of Oaths Signature	Commissioner of Oaths Full Name

SUPPLY CHAIN MANAGEMENT DATABASE COMMODITY LIST

Please indicate with ✓ Please note: only 2 commodities will be registered

Construction

Airconditioning Systems	<input type="checkbox"/>	Electrical Contracts	<input type="checkbox"/>	Plumbing	<input type="checkbox"/>
Alarm/Security/Access Control	<input type="checkbox"/>	Evacuation Systems	<input type="checkbox"/>	Precast Concrete Manufacture	<input type="checkbox"/>
Autoclaves	<input type="checkbox"/>	Fencing	<input type="checkbox"/>	Pumping Installations	<input type="checkbox"/>
Automatic Hanger Doors	<input type="checkbox"/>	General Building Work	<input type="checkbox"/>	Road Marking & Signage	<input type="checkbox"/>
Automatic Sliding Doors	<input type="checkbox"/>	Glazing	<input type="checkbox"/>	Road works & Cleaning	<input type="checkbox"/>
Auto Sprinkle Fire Protection Systems	<input type="checkbox"/>	Hauling/Heavy Equip/Transport	<input type="checkbox"/>	Roofing & Waterproofing	<input type="checkbox"/>
Brickwork/Masonry	<input type="checkbox"/>	Hot Water Installations	<input type="checkbox"/>	Sewerage Installations/Reticulations	<input type="checkbox"/>
Cabinet/Furniture Making	<input type="checkbox"/>	Incinerators	<input type="checkbox"/>	Steam Installations & Ancillary Equipment	<input type="checkbox"/>
Carpeting/Tiling/Floor covering	<input type="checkbox"/>	Landscaping/Earthworks	<input type="checkbox"/>	Steel Fabrication & Erection	<input type="checkbox"/>
Ceilings, Partitioning and Shopfitting	<input type="checkbox"/>	Lift & Escalator Equipment	<input type="checkbox"/>	Storm water Draining	<input type="checkbox"/>
Cladding Contracts	<input type="checkbox"/>	Mechanical Contracts	<input type="checkbox"/>	Water installations/reticulations	<input type="checkbox"/>
Cooking & Related Systems	<input type="checkbox"/>	Metalwork & Burglar Bars	<input type="checkbox"/>	Other (Specify)	<input type="checkbox"/>
Compressed Air Installations	<input type="checkbox"/>	Painting	<input type="checkbox"/>		<input type="checkbox"/>
Concrete works	<input type="checkbox"/>	Paving	<input type="checkbox"/>		<input type="checkbox"/>
Demolition	<input type="checkbox"/>	Plastering	<input type="checkbox"/>		<input type="checkbox"/>

Services

Accommodation	<input type="checkbox"/>	Fire Hydrants	<input type="checkbox"/>	Performance Management	<input type="checkbox"/>
Advertising/Public Relations	<input type="checkbox"/>	Food & Beverage	<input type="checkbox"/>	Printing/Photography/Graphic Design	<input type="checkbox"/>
Auto Repairs & Services	<input type="checkbox"/>	Funeral Services	<input type="checkbox"/>	Promotional Material	<input type="checkbox"/>
Auto Electrical and Hydraulic Repairs	<input type="checkbox"/>	Florist	<input type="checkbox"/>	Publishing	<input type="checkbox"/>
Bookkeepers	<input type="checkbox"/>	Garden Services	<input type="checkbox"/>	Real Estate	<input type="checkbox"/>
Carpet Cleaning	<input type="checkbox"/>	Handyman	<input type="checkbox"/>	Radio Publicity/TV Publicity	<input type="checkbox"/>
Cartridges	<input type="checkbox"/>	Horticultural Services	<input type="checkbox"/>	Road Maintenance	<input type="checkbox"/>
Catering/Vending/Food Supply	<input type="checkbox"/>	HV Fault Finding, Jointing & Terminations	<input type="checkbox"/>	Recruitment Agencies	<input type="checkbox"/>
Cleaning Services	<input type="checkbox"/>	Insurance/Employee Benefits	<input type="checkbox"/>	Safety & Security Services	<input type="checkbox"/>
Computer Supplies/Services	<input type="checkbox"/>	Interior/Industrial Design	<input type="checkbox"/>	Security & Access Control	<input type="checkbox"/>
Corporate Gifts/Corporate Clothing	<input type="checkbox"/>	IT Maintenance	<input type="checkbox"/>	Services HV&LV	<input type="checkbox"/>
Copywriting	<input type="checkbox"/>	IT Management	<input type="checkbox"/>	Switchgear/Transformers	<input type="checkbox"/>
Courier Services	<input type="checkbox"/>	IT Networking	<input type="checkbox"/>	Site Cleaning	<input type="checkbox"/>
Cleaning Equipment/Materials	<input type="checkbox"/>	IT Programming	<input type="checkbox"/>	Solid Waste Disposal	<input type="checkbox"/>
Data Backup Services & Software	<input type="checkbox"/>	Laundry Service/Dry Cleaning	<input type="checkbox"/>	Telecommunication	<input type="checkbox"/>
Data Capturing & Management Services	<input type="checkbox"/>	Locksmith Services	<input type="checkbox"/>	Transport Services Goods	<input type="checkbox"/>
Diesel & Petrol Engines	<input type="checkbox"/>	Media Liaison	<input type="checkbox"/>	Transport Services Passengers	<input type="checkbox"/>
Debt Collection	<input type="checkbox"/>	Mailing/Courier Service	<input type="checkbox"/>	Transportation Services	<input type="checkbox"/>
Distribution	<input type="checkbox"/>			Travel Agencies	<input type="checkbox"/>
				Timber Contractor	<input type="checkbox"/>

Digging of Graves		Medical/Ambulance/Health Care		Telephone & Data Line Maintenance	
Document Binding Services		Municipal Services		Training & Development	
Educational Services		Medical Equipment/Instruments		Upholsterers	
Entertainment		Office Maintenance		Web pages & Design	
Exhibition Centres		Personnel Services		Wind Socks for the Aerodome	
Fire Extinguishers & Refills		Pest Removal Services		Other (Specify)	

Professional Services

Accountants/Financial Advisory Services		EDMS Consultants		Pre-Employment Assessment Consultants	
Architects		EAP Consultants		Project Managers	
Attorneys/Legal Services		Economists		Quantity Surveyors	
Archival Services Consultants		Industrial Relations Consultants		Statisticians	
Business Information Management Consulting Engineers (Geotechnical)		Job Description Consultants		Teachers	
Consulting Engineers (Civil/Structure)		Land Surveyors		Town Planners	
Consulting Engineers (Electrical)		Legal Compliance Consultants		Training Providers	
Consulting Engineers (Mechanical)		Medical Practitioners		Translation Services	
Consulting Engineers (Multidisciplinary)		OHS Consultants		Other (Specify)	
Contractors		Organisation Development Consultants			
		Pharmacists			

Wholesalers/Traders

Automotive Parts		Fuel Supplies		Refuse Bulk Containers	
Air Pollution Measuring Equipment		Furniture		Protective Clothing/Uniforms	
Books		Fencing		Radio/Radio Equipment	
Building Materials/Hardware		Fire Fighting Equipment and Consumables		Supply Plants, Flowers and Seeds	
Batteries		Food for Game Animals		Toilet Paper Wrapped/Unwrapped	
Cartridges		Generating Sets		Traffic Signs/Materials	
Cleaning Supplies/Chemicals/Pesticides		Health Safety and Environmental Suppliers		Vehicles	
Clothing		IT Hardware and Software		Vehicles, Equipment, Trailers & Tractors	
Computer Equipment/Software		Industrial Catering Equipment		Workshop Equipment	
Curtains		Laundry Equipment		Other (Specify)	
Consumables		Linen, Pillows & Blankets			
Domestic Appliances		Medical Supplies & Equipment			
Envelopes		Medicines			
Groceries		NGO's/NBO's			
Electrical Supplies & Equipment		Office Consumables			
Fire Extinguishing		Office Equipment			
Fire Protection & Detection		Paint Supplies			
Floor Coverings		Paper & Stationery			
Food Supplies		Recreational Supplies			
Fertilisers		Refridgeration & Air Conditioning			

Summary: Core Business

In your own words, please state your your core business:

1

2

Trade Name (= sole supplier of specific brand name)

Fill the specific **brand names** that the company **own** or **solely distribute**, which you wish to register:

Banking Information

AFFIX OFFICIAL BANK
STAMP HERE

Bank Name:

Bank Location:

Branch Name:

Branch Code:

Account Holder:

Account Number:

Account Type:

Bank Official Name:

Designation:

Signature:

Reference Number / Description to be used:

Cancelled cheque

AFFIX A CANCELLED CHEQUE HERE

Banking Information

AFFIX OFFICIAL BANK STAMP HERE	Bank Name:	
	Bank Location:	
	Branch Name:	
	Branch Code:	
	Account Holder:	
	Account Number:	
	Account Type:	
	Bank Official Name:	
	Designation:	
	Signature:	
Reference Number / Description to be used:		

Cancelled cheque

AFFIX A CANCELLED CHEQUE HERE

SMME table

Values of following items dependent on most recent Financial Statement

Item	Value
Total number of full time Employees	
Total Annual Turnover	R
Total Gross Asset Value	R

The following table must be completed to establish whether a business can be classified as an SMME in terms of the National Small Business Act 102 of 1996.

Select the Sector and tick ✓ the appropriate blocks in Column 2, 3 and 4 next to your chosen sector

Column 1	Column 2 (tick applicable)				Column 3 (tick applicable)				Column 4 (tick applicable)			
Sectors in accordance with the standard Industrial Council	Total full time paid employees				Total Annual turnover (millions)				Total Gross asset value (property excluded) (millions)			
	Medium	Small	Very Small	Micro	Medium	Small	Very Small	Micro	Medium	Small	Very Small	Micro
Agriculture	100	50	10	5	4m	2m	0.4m	0.15m	4m	2m	0.4m	0.1m
Catering, Accommodation & other trade	100	50	10	5	10m	5m	1m	0.15m	2m	1m	0.2m	0.1m
Community, Social and Personal	100	50	10	5	10m	5m	1m	0.15m	5m	2.5m	0.5m	0.1m
Construction	200	50	20	5	20m	5m	2m	0.15m	4m	1m	0.4m	0.1m
Electricity, Gas and Water	200	50	20	5	40m	10m	4m	0.15m	15m	3.75m	1.5m	0.1m
Finance and Business Services	100	50	10	5	20m	10m	2m	0.15m	4m	2m	0.4m	0.1m
Manufacturing	200	50	20	5	40m	10m	4m	0.15m	15m	3.75m	1.5	0.1m
Mining and Quarrying	200	50	20	5	30m	7.5m	3m	0.15m	18m	4.5m	1.8m	0.1m
Other Trade	100	50	10	5	10m	5m	1m	0.15m	2m	1m	0.2m	0.1m
Retail, Motor Trade and Repair Services	100	50	10	5	30m	15m	3m	0.15m	5m	2.5m	0.5m	0.1m
Transport, Storage and Communications	100	50	10	5	20m	10m	2m	0.15m	5m	2.5m	0.5m	0.1m
Wholesale Trade, Commercial Agents, and Allied Services	100	50	10	5	50m	25m	5m	0.15m	8m	4m	0.5m	0.1m

For office use only	
Summary of results	SMME Status as per above (✓ appropriate block)
Column 2	medium <input type="checkbox"/> small <input type="checkbox"/> very small <input type="checkbox"/> micro <input type="checkbox"/>
Column 3	medium <input type="checkbox"/> small <input type="checkbox"/> very small <input type="checkbox"/> micro <input type="checkbox"/>
Column 4	medium <input type="checkbox"/> small <input type="checkbox"/> very small <input type="checkbox"/> micro <input type="checkbox"/>

General information & Definitions

HDI Ownership Status: Please read notes below very carefully

Instructions and Definitions:

Legislation:

- Procedures are set out in the **Accounting Officers Procurement Procedures (AOPP)**, as referred to in the **Municipal Finance Management Act, 2003 (Act 56 of 2003)**, to give all prospective suppliers an equal opportunity to submit quotations to a Municipality

Terminology:

- **Commodities:**
The commodities the company wishes to be registered for as a supplier. Please define your principal business to a maximum of **2** commodities.
- **Trade Names:**
The trade names that the company own or distribute, which you wish to be registered for.
- **Owned:**
Having all the customary elements of ownership, including the right of decision-making and sharing all the risks and profits commensurate with the degree of ownership interests as demonstrated by an examination rather than the form of ownership arrangements.
- **Historically Disadvantaged Individuals (HDI):**
For the purpose of registering as a supplier for the Department, the refutable presumption shall be made that SA citizens who fall into population groups that had no franchise in national elections prior to the introduction of the 1983 and 1993 constitution are Historically Disadvantaged Individuals. It is incumbent on individuals to demonstrate their claims to fall into such population groups on the basis of identification and association with and recognition by the members of such a group.
- **Women:**
A female person who is a SA citizen.
- **Disability:**
In respect of a person, a permanent or physical, intellectual, or sensory function, which result in restricted, or lack of ability to perform an activity in the manner, or which is considered normal for a human being.
- **Establishment of HDI / Women Equity Ownership in a enterprise:**
Equity ownership shall be equated to the percentage of an enterprise which is owned by individuals, or in the case of a company, the percentage shares that are owned by individuals who are actively involved in the management and daily business operations of the enterprise and exercise control over the enterprise, commensurate with their degree of ownership.
- **Fronting:**
Companies with **no** Black Economic Empowerment (BEE) status **illegally** claiming to be headed by **previously disadvantaged individuals*** and claim false BEE credentials in order to win tenders/contracts.

