

DATABASE REGISTRATION FORM

VAT/BTW REG. NO: 4140106396

www.overstrand.gov.za

OM-C1

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CREDITORS/SUPPLIERS: Registration on the database in terms of:	Overstrand Municipality Supply Chain Management Policy Preferential Procurement Policy Framework Act No. 5 Of 2000 (Government Notice No.97 of 03 February 2000 – Government Gazette No. 20854) Preferential Procurement Regulations, 2022 Local Government: Municipal Finance Management Act No. 56 Of 2003										
Enterprise's Legal name											
Trade name of enterprise											
Postal address									Postal Code		
Firm/Business address									Postal Code		
Nature of activities conducted											
Type of enterprise (Mark with X)	1	Sole Proprietor	2	Partnership	3	Public Sector	4	Company /Close Corporation	5	Other: Club, Trust, etc.	
CIDB (Construction Industry Development Board)											
Sars Compliance Tax Status Pin											
VAT number											
Income Tax reference number of person/enterprise											
Particulars of responsible person or owner											
Surname											
First name											
Designation											
Particulars of liaison officer											
Name and surname											
Designation											
Cell phone number											
Telephone number											
Fax no.											
E-mail address											
I declare that the information herein furnished, is true and correct:											
Signature of person responsible for this declaration											
Name	Designation					Date					

PREFERENTIAL PROCUREMENT REGULATIONS 2022

1. POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTION

1.1 In terms of Regulation 4; 5; 6 and 7 of the Preferential Procurement Regulations, preference points will be allocated in accordance with the claim below and valid evidence or for specific goals as stated in a particular tender:

B-BBEE Status Level of Contributor	Number of points (90/10 system)	Number of points (80/20 system)
1	10	20
2	9	18
3	6	14
4	5	12
5	4	8
6	3	6
7	2	4
8	1	2
Non-compliant contributor	0	0

- 1.2 Bidders who qualify as EMEs in terms of the B-BBEE Act must submit a valid sworn affidavit or an originally certified copy thereof or a valid affidavit/certificate issued by Companies Intellectual Property Commission (CIPC) or a valid original B-BBEE status level verification certificate or a certified copy thereof, substantiating their B-BBEE rating issued by a verification agency accredited by SANAS.
- 1.3 Bidders who qualify as QSEs in terms of the B-BBEE Act must submit a valid sworn affidavit or an originally certified copy thereof confirming annual turnover and level of black ownership or a valid original B-BBEE status level verification certificate or a certified copy thereof, substantiating their B-BBEE rating issued by a verification agency accredited by SANAS
- 1.4 Bidders other than EMEs and QSEs must submit their original and valid B-BBEE status level verification certificate or a certified copy thereof, substantiating their B-BBEE rating issued by a verification agency accredited by SANAS.
- 1.5 A trust, consortium or joint venture, will qualify for points for their B-BBEE status level as a legal entity, provided that the entity submits an original copy of their B-BBEE status level certificate or a copy thereof.
- 1.6 A trust, consortium or joint venture will qualify for points for their B-BBEE status level as an unincorporated entity, provided that the entity submits their consolidated B-BBEE scorecard as if they were a group structure and that such a consolidated B-BBEE scorecard is prepared for every separate bid.
- 1.7 Tertiary institutions and public entities will be required to submit their B-BBEE status level certificates in terms of the specialized scorecard contained in the B-BBEE Codes of Good Practice.

2 BID DECLARATION

2.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:

2.1.1 B-BBEE STATUS LEVEL OF CONTRIBUTION CLAIMED IN TERMS OF PARAGRAPHS 1	
2.1.1.1 B-BBEE Status Level of Contribution as reflected on the B-BBEE Certificate	
2.1.1.2 Points claimed in respect of Level of Contribution (maximum of 10 or 20 points)	
Is your business established within the area of jurisdiction of the Municipality?	In
	Out

I/We hereby certify that the abovementioned information is correct signed by myself/ourselves and the witnesses and should there be any changes I/we will inform/update the Municipality.

BIDDER(S) SIGNATURE:			
WITNESS 1:		WITNESS 2:	
DATE:			
ADDRESS:			

DECLARATION BY SUPPLIER

1.	This document serves as a declaration to be used by the municipality 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. No registration will be accepted from persons in the service of the state*.
2.(a)	Any prospective supplier having a kinship with persons in the service of the state, including a blood relationship, may in terms of current legislation register on the Municipality's Database. In view of possible allegations of favouritism, should a resulting bid, or part thereof, be awarded to suppliers connected with or related to persons in the service of the state, it is required that the supplier or his/her authorised representative declare their position in relation to the evaluating/adjudicating authority and/or take an oath declaring his/her interest.
2.(b)	The request for registration on the Municipality's database may be rejected if the supplier or any of its directors/members/partners have: <ul style="list-style-type: none"> (i) abused the municipality's supply chain management system or committed any improper conduct in relation to such system; (ii) been convicted for fraud or corruption during the past five years; (iii) wilfully neglected, reneged on or failed to comply with any government, municipal or other public sector contract during the past five years; (iv) being a person whose tax matters are not cleared by the South African Revenue Services; or (v) been listed in the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004).

3. FULL DETAILS OF THE COMPANY/PERSON, MEMBERS, DIRECTORS, SHAREHOLDERS, TRUSTEES AND NECESSARY DECLARATIONS					
3.1	Owner's/Company's Name:				
3.2	ID Number/Company Registration Number:				
3.3	Are you presently <i>in the service of the state</i> ? *	YES	NO		
3.3.1	If so, furnish particulars.				
3.4	Have you been <i>in the service of the state</i> for the past twelve months?	YES	NO		
3.4.1	If so, furnish particulars.				
3.5	Do you, have any relationship (family, friend, other) with persons <i>in the service of the state</i> and who may be involved with the evaluation and or adjudication of any prospective bid?	YES	NO		
3.5.1	If so, furnish particulars.				
3.6	Are you, aware of any relationship (family, friend, other) between a supplier and any persons <i>in the service of the state</i> who may be involved with the evaluation and or adjudication of any bid?	YES	NO		
3.6.1	If so, furnish particulars.				
3.7	Are any of your company's directors, managers, principle shareholders or stakeholders <i>in the service of the state</i> ?	YES	NO		
3.7.1	If so, furnish particulars.				
3.8	Is any spouse, child or parent of your company's directors, managers, principle shareholders or stakeholders <i>in the service of the state</i> ?	YES	NO		
3.8.1	If so, furnish particulars.				
3.9	Is the supplier or any of its directors/partners listed on the National Treasury's database as a company or person prohibited from doing business with the public sector?	YES	NO		

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

- (a) a member of –
 - (i) any municipal council;
 - (ii) any provincial legislature; or
 - (iii) 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 constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999);
- (e) a member of the accounting authority of any national or provincial public entity; or (f) an employee of Parliament or a provincial legislature.

COMMISSIONER OF OATHS

Signed and sworn to before me at _____,
 on this _____ day of _____ 20____

by the Deponent, who has acknowledged that he/she knows and understands the contents of this Affidavit, it is true and correct to the best of his/her knowledge and that he/she has no objection to taking the prescribed oath, and that the prescribed oath will be binding on his/her conscience.

COMMISSIONER OF OATHS:-

Position: _____

Address: _____

Tel: _____

Apply official stamp of authority on this page:

ETHICS COMMITMENT FOR SUPPLIERS OF THE OVERSTRAND LOCAL MUNICIPALITY

In our dealings with the Overstrand Local Municipality we commit to uphold high standards of ethics. Among other things this means:

- We will be honest and deal in good faith;
- We will not improperly try to influence any municipal official or decision; we will avoid all conflicts of interest;
- We will not engage in any form of corruption (e.g. paying bribes, giving kickbacks); we will not give gifts to municipal officials or councillors;
- We will not be involved in collusion with other service providers (i.e. price-fixing);
- We will ensure that all information we submit to the municipality is accurate and truthful (e.g. we will not engage in BBBEE fronting);
- We will ensure and take accountability to keep our database records up to date, avoiding misrepresentation;
- We will ensure to comply with legislative requirements applicable;
- We will inform the Overstrand of any unethical behaviour known, either from other suppliers or Overstrand officials, supported by the protection of our Whistle Blowing policy.
- We will contribute by all means necessary, in building a positive ethical culture in the Overstrand.

This is our commitment to help build an ethical Overstrand.

Owner's/company's name:	
Name of authorised person:	
Signature:	
Date:	

MBD 15 – CERTIFICATE FOR PAYMENT OF MUNICIPAL SERVICES

DECLARATION IN TERMS OF PARAGRAPH 38(1)(d)(i) OF SUPPLY CHAIN MANAGEMENT POLICY OF THE OVER-STRAND MUNICIPALITY (To be signed in the presence of a Commissioner of Oaths)

I, _____, _____ (full name and ID No.), hereby acknowledge that according to SCM Regulation 38(1)(d)(i), the Municipality may reject the tender of the tenderer if any municipal rates and taxes or municipal service charges owed by the tenderer or any of its directors/members/partners to the Overstrand Municipality, or to any other municipality or municipal entity, are in arrears for more than 3 (three) months.

I declare that I am duly authorised to act on behalf of _____ (name of the firm) and hereby declare, that to the best of my personal knowledge, neither the owner/firm nor any director/member/partner of said firm is in arrears on any of its municipal accounts with any municipality in the Republic of South Africa, for a period longer than 3 (three) months.

I further hereby certify that the information set out in this schedule and/or attachment(s) hereto is true and correct. The Tenderer acknowledges that failure to properly and truthfully complete this schedule may result in the tender being disqualified, and/or in the event that the tenderer is successful, the cancellation of the contract.

PHYSICAL BUSINESS ADDRESS(ES) OF THE TENDERER	MUNICIPAL ACCOUNT NUMBER

FURTHER DETAILS OF THE BIDDER'S: Owner/Director/Shareholder/Partners, etc.:

Owner/Director/Shareholder/Partner	Physical residential address of the owner/director/shareholder/partner	Municipal Account number(s)
Signature	Position	Date

<p align="center">COMMISSIONER OF OATHS</p> <p>Signed and sworn to before me at _____ on this _____ day of _____ 20__ by the Deponent, who has acknowledged that he/she knows and understands the contents of this Affidavit, it is true and correct to the best of his/her knowledge and that he/she has no objection to taking the prescribed oath, and that the prescribed oath will be binding on his/her conscience.</p> <p>COMMISSIONER OF OATHS:-</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Position: _____</p> <p>Address: _____</p> <p>Tel: _____</p>	<p align="center">Apply official stamp of authority on this page:</p>
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CREDITOR/SUPPLIER BAKING DETAILS

<p>It is the policy of the Overstrand Municipality to pay all creditors by means of direct bank transfers. Please complete this information and acquire your banker's confirmation. No payment will be made to a different bank account except of those of the company reflecting on the registration form. It is the responsibility of the creditor/supplier to inform the Municipality of any changes to its bank or any other details. No banking details will be changed or update through an invoice</p>											
<p>BESONDERHEDE VAN FIRMA/INSTANSIE / DETAILS OF FIRM/INSTITUTION / IINKCUKACHA ZEFEMU/IZIKO:</p>											
Name											
Address											
<p>DETAILS OF MY/OUR BANK ACCOUNT ARE AS FOLLOWS:</p>											
NAME OF BANK											
NAME OF BRANCH											
BANK ACCOUNT NUMBER											
BRANCH CODE											
Type of Bank	1	Cheque	2	Transmission	3	Savings	4	Bond	5	Other	
<p>I/we hereby request and authorise the Overstrand Municipality to pay any amounts that may accrue to me/us to the credit of my/our bank account.</p> <p>I/we understand that a payment advice will be supplied by the Overstrand Municipality in the normal way that will indicate the date on which funds will be available in my/our bank account and details of payment.</p> <p>I/we further undertake to inform the Overstrand Municipality in advance of any change in my/our bank details and accept that this authority may only be cancelled by me/us by giving thirty days' notice by prepaid registered post or via email.</p>											
AUTHORISED SIGNATURE											
INITIALS AND SURNAME											
TELEPHONE NUMBER								DATE			
<p>FOR BANK USE ONLY</p>											
<p>I/WE HEREBY CERTIFY THAT THE DETAILS OF OUR CLIENTS BANK ACCOUNT AS INDICATED ON THE CREDIT ORDER INSTRUCTION IS CORRECT:</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">NAME & SURNAME OF BANK OFFICIAL (PRINT NAME)</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">SIGNATURE OF A BANK OFFICIAL</p>						<p style="text-align: center;">OFFICIAL DATE STAMP OF BANKING INSTITUTION</p> 					