

# SEKHUKHUNE TVET COLLEGE

FOR TECHNICAL & VOCATIONAL EDUCATION AND TRAINING COLLEGE



REACHING GOALS TOGETHER

## SUPPLIER / VENDOR DATABASE REGISTRATION FORM

**Company registered name:**

(In block letters)

\_\_\_\_\_

**Core Business (Commodity):**

(Select three only)

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

**Delivery address:**

**676 Motetema  
CS Barlow Campus  
MOTETEMA  
0473**

## **SUPPLIER / VENDOR DATABASE REGISTRATION FORM TO BE COMPLETED BY ALL BUSINESSES SEEKING TO CONDUCT BUSINESS WITH THE SEKHUKHUNE FET COLLEGE**

**The following important notes should be read carefully before the completion of this form**

1. It should be noted that Sekhukhune FET College reserves the right to accept or reject any application without being obliged to give any reasons in this respect. Suppliers that have been registered onto the Suppliers Database may have the opportunity to bid or quote on Sekhukhune FET College's acquisition requirements. Registration onto the Supplier Database does not guarantee business opportunities.
2. This form must be completed in full and signed by the duly authorised signatory.
3. Full signatures are required when alterations are made in this document.
4. If the information required is not applicable to your business, clearly insert the symbol "N/A" in the appropriate space.
5. Mark the appropriate square with a "✓" where it is applicable to you.
6. If the space provided is left blank, your registration form will be regarded as incomplete and your business will not be registered on the database.
7. Suppliers must comply with all the registration criteria for registration to be finalised – failure to do so may result in the application being declined.
8. No faxed or e-mailed applications will be accepted. Only original and signed copies of application will be accepted. Suppliers may not alter the Application Form in any way.
9. A company profile may accompany the registration form but will not be accepted as substitute for this application form – all fields on application form must be completed by applicant.
10. Applicants will be contacted via fax or e-mail and must therefore submit an operating fax number/e-mail address – failure to comply will result in excluding the supplier from the vendor database.
11. Suppliers that have registered onto the Supplier Database should ensure that they furnish FET college with any change to the status of the information initially provided, as and when the information changes.
12. Suppliers are to ensure the Sekhukhune FET College is always in possession of an Original Valid Tax Clearance Certificate and Valid BEE certificate accredited by SANAS. **Suppliers whose tax clearance certificates have expired will be blocked from the Sekhukhune FET College database until such time as valid documents are submitted. Suppliers whose BEE certificates have expired or who have not submitted proof from accountants with regard to annual turnover less than R5m, will be deemed to be zero.**
13. Suppliers are to attach an original certified copy of the relevant industry accreditation certificate, where applicable.
14. Suppliers that have registered onto the Supplier Database will be continuously monitored for their performance on work awarded to them by Sekhukhune FET College. This continuous monitoring process will form the basis to evaluate supplier performance which will have an impact on future opportunities with Sekhukhune FET College.
15. Please read notes below very carefully:

**Commodity:** The commodity the business wishes to register for as a supplier. (Only three commodities)

- Commodities by a supplier on the database can only be changed three times in 12 months
- Commodities quoted for must be in line with the supplier's commodities on the database system

**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 arrangements.

Where individuals are not actively involved in the management and daily business operations and do not exercise control over the enterprise commensurate with their degree of ownership, equity ownership may not be claimed.

16. **The front page of the form must be clearly marked “Supplier Database Registration”. The envelope must be hand delivered or posted via registered mail to one of the following addresses:**

**Physical Addresses:**

**HEAD OFFICE: (MOTETEMA)**

**Supplier / Vendor Database Registration**

Sekhukhune FET College:  
Central Office (CS Barlow Campus)  
Stand No.676  
Motetema  
0473

**BURGERFORT (PRAKTISEER)**

**Supplier / Vendor Database Registration**

Sekhukhune FET College  
CN Phatudi Campus  
Praktiseer  
BURGERSFORT  
1150

**Postal Address: Supplier / Vendor Database Registration,** Sekhukhune FET College: **Procurement Department, Private Bag X8660, GROBLERSDAL, 0470**

17. Please mark the back of the envelope with Sender (*Business Name*), Contact Person and Telephone Number.
18. **I have read and understood the important notes on page 2**

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Authorised signatory

**1. Business Profile** (Please complete or tick where applicable)

Registered Company Name: \_\_\_\_\_

Trading Name (if different): \_\_\_\_\_

CSD Number: \_\_\_\_\_

Business Type:

- |   |   |
|---|---|
| <input type="checkbox"/> Sole Trader            | <input type="checkbox"/> Partnership                  |
| <input type="checkbox"/> Close Corporation      | <input type="checkbox"/> Company (Private/Public)     |
| <input type="checkbox"/> Government Institution | <input type="checkbox"/> Other (please specify) _____ |

Business Registration Number: 

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*(please attach certified copy of proof of registration)*

Income Tax Number: 

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Vat Number: 

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PAYE Number: 

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UIF number: 

--	--	--	--	--	--	--	--	--	--

Skills Development number: 

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Compensation for Occupational Injuries and Diseases (COID) number: 

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Original Tax Clearance Certificate Attached 

YES	NO
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Expiry Date: 

Y	Y	Y	Y	/	M	M	/	D	D
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Valid BEE Certificate Attached 

YES	NO
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Expiry Date: 

Y	Y	Y	Y	/	M	M	/	D	D
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Enterprise Profile Attached 

YES	NO
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Share certificates / Cipro documents attached 

YES	NO
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Number of Years in Business 

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Postal Address: _____	Physical Address: _____
_____	_____
_____	_____

Province: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Tel Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Web Address: \_\_\_\_\_

**NB! Communication with regard to sourcing will be done via e-mail**

**CONTACT PERSONS**

**Finance Department**

**Sales Department**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Surname: \_\_\_\_\_

Surname: \_\_\_\_\_

Designation: \_\_\_\_\_

Designation: \_\_\_\_\_

Tel: \_\_\_\_\_

Tel: \_\_\_\_\_

Cell: \_\_\_\_\_

Cell: \_\_\_\_\_

**Documentation to be attached to this application form**

Item No	Documentation required	Included	If not included provide reason
1	Copy of company registration certificate		
2	Valid tax clearance certificate		
3	Originally certified copies of shareholder certificates / CIPRO documents		
4	Originally certified copies of shareholders / directors / owners / members' identity documents.		
5	<b>Current</b> BBEE Certificate issued by SANAS accredited rating agency or letter from auditor/accountant confirming annual turn-over or sworn affidavit by SAPS		
6	Company Profile		
7	Declaration of interest (SBD 4)		
8	Declaration of bidder's past SCM practices (SBD 8)		

## DECLARATION OF INTEREST

1. Any legal person, including persons employed by the state<sup>1</sup>, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid (includes a price quotation, advertised competitive bid, limited bid or proposal). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where-
  - the bidder is employed by the state; and/or
  - the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation and or adjudication of the bid.
  
2. **In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.**
  - 2.1 Full Name of bidder or his or her representative: \_\_\_\_\_
  - 2.2 Identity Number: \_\_\_\_\_
  - 2.3 Position occupied in the Company (director, trustee, shareholder<sup>2</sup>): \_\_\_\_\_
  - 2.4 Company Registration Number: \_\_\_\_\_
  - 2.5 Tax Reference Number: \_\_\_\_\_
  - 2.6 VAT Registration Number: \_\_\_\_\_
  - 2.6.1 The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / personnel numbers must be indicated in paragraph 3 below.

<sup>1</sup>"State" means –

- (a) 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);
- (b) any municipality or municipal entity;
- (c) provincial legislature;
- (d) national Assembly or the national Council of provinces; or
- (e) Parliament.

<sup>2</sup>"Shareholder" means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

2.7 Are you or any person connected with the bidder presently employed by the state? **YES / NO**

2.7.1 If so, furnish the following particulars:

Name of person / director / trustee / shareholder/ member \_\_\_\_\_

Name of state institution at which you or the person connected to the bidder is employed:

\_\_\_\_\_

Position occupied in the state institution: \_\_\_\_\_

Any other particulars:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2.7.2 If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector? **YES / NO**

2.7.2.1 If yes, did you attach proof of such authority to the bid document? **YES / NO**

Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the bid.

2.7.2.2 If no, furnish reasons for non-submission of such proof:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2.8 Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses conduct business with the state in the previous twelve months? **YES / NO**

2.8.1 If so, furnish particulars:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2.9 Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this bid?

**YES / NO**

2.9.1 If so, furnish particulars.

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2.10 Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this bid? **YES/NO**

2.10.1 If so, furnish particulars.

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2.11 Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract? **YES/NO**

2.11.1 If so, furnish particulars:

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3 *Full details of directors / trustees / members / shareholders.*

<b>Full Name</b>	<b>Identity Number</b>	<b>Personal Tax Reference Number</b>	<b>State Employee Number / Personnel Number</b>

4 **DECLARATION**



I, THE UNDERSIGNED (NAME) \_\_\_\_\_

CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 2 and 3 ABOVE IS CORRECT.  
I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 23  
OF THE GENERAL CONDITIONS OF CONTRACT SHOULD THIS DECLARATION PROVE TO BE FALSE.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Position

\_\_\_\_\_  
Name of bidder

**SBD 8**

***DECLARATION OF BIDDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES***

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 may be disregarded if that bidder, or any of its directors have-
- abused the institution's supply chain management system;
  - committed fraud or any other improper conduct in relation to such system; or
  - 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.**

Item	Question	Yes	No
4.1	Is the bidder or any of its directors listed on the National Treasury's database as companies or persons prohibited from doing business with the public sector? (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 <input type="checkbox"/>	No <input type="checkbox"/>
4.1.1	If so, furnish particulars:		
4.2	Is the bidder 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)? <b>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.</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.2.1	If so, furnish particulars:		
4.3	Was the bidder or any of its directors convicted by a court of law (including a court outside of the Republic of South Africa) for fraud or corruption during the past five years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.3.1	If so, furnish particulars:		
4.4	Was any contract between the bidder and any organ of state terminated during the past five years on account of failure to perform on or comply with the contract?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.4.1	If so, furnish particulars:		

**SBD 8**

**CERTIFICATION**



**CONFIRMATION OF BANKING DETAILS**

**ACCOUNT HOLDER:** .....

**NAME OF BANK:** .....

**ACCOUNT NO:** .....

**BRANCH CODE:** .....

**DATE:** .....

**SIGNED BY:**  
(Name).....at.....

On the .....of..... 20.....

Bank stamp:

## LIST OF COMMODITIES

Please mark clearly with a “ ✓ ” the entity’s **Core Business** below (select a maximum of THREE) and write the selection on the cover page of this application form.

1	BUILDING & CIVIL
2	ELECTRICAL(GLOBS,PLUGS,WIRE,ETC)
3	ELECTRONICS
4	MECHANICAL
5	AUTOMOTIVE
6	BOILERMAKING, FITTING & TURNING
7	CAPENTRY
8	OTHER
9	TRANSPORT
10	MOBILE TOILETS
11	BUILDING
12	PLANT HIRE
13	PHOTOCOPIER MACHINES
14	SANITARY
15	FIRE FIGHTING SYSTEMS INSTALLATION
16	CCTV SYSTEMS INSTALLATIONS
17	FIRST AID BOXES AND CONTENTS
18	PROTECTIVE CLOTHING
19	STATIONERY
20	SECURITY
21	FURNITURE
22	IT
23	PRINTING AND RELATED
24	BRANDING AND RELATED
25	CATERING AND DECORATION
26	SOUND SYSTEM
27	CLEANING SERVICE & MATERIALS
28	GARDEN SERVICE AND SUPPLIES
29	GLAZING
30	AIR CONDITIONING (SUPPLY AND SERVICE)
31	PEST CONTROL
32	TELECOMMUNICATION

33	BOOKSHOPS
34	TRAINING PROVIDERS
35	DRAIN AND SEWAGE
36	HORTICULTURE & LANDSCAPING
37	PLUMBING
38	ELECTRICAL EQUIPMENTS
39	REFRIGERATION (COOLROOMS)
40	OFFICE ALTERATIONS / RENOVATIONS
41	CARPET AND UPHOLSTERY CLEANING
42	REPAIR OF ELECTRICAL EQUIPMENT
43	REPAIRS OF PRINTERS
44	GENERATORS
45	BUSINESS ADVISORY CONSULTANTS
46	BUSINESS MANAGEMENT CONSULTANTS
47	AUCTIONEERS
48	ACCOMMODATION
49	PAINTING
50	EVENTS MANAGEMENT
51	CONSTRUCTION MAINTENANCE SERVICE
52	ACCOUNTING
53	AUDITING
54	ALARM SYSTEMS
55	ATTORNEYS
56	AUDIO AND VIDEO SYSTEMS
57	PRINT MEDIA
58	CAR HIRE
59	MEDICAL
60	COMPUTERS
61	CONFERENCE HIRE
62	CORPORATE CLOTHING
63	DRY CLEANING SERVICES
64	EDUCATION SOLUTIONS
65	HARDWARE
66	OFFICE FURNITURE
67	KITCHEN UTILITIES
68	ADVERTISE
69	COURIER

**OTHER** (Please specify)


\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Position

\_\_\_\_\_  
Name of bidder

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Witness

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Date