INVITATION TO QUOTE – BEY-SCM-208
SUPPLY AND DELIVERY OF CLEANING MATERIAL

Quotations are hereby invited from prospective service providers for the Supply and Delivery of Cleaning Material

Quotations must be placed in the municipal tender box, Robert Sobukwe Building, in sealed envelopes clearly marked "BEY-SCM-208", not later than 12h00 on Wednesday, 6TH of November 2019 and will be opened in public immediately thereafter.

Note:
1. Faxed, e-mailed or late quotations will not be accepted.
2. Price to include VAT (if registered for vat) and delivery cost to Graaff-Reinet.
3. The tender will be evaluated on 80/20 system.
4. All suppliers must be registered on the CENTRAL SUPPLIER DATABASE. Log onto www.csd.gov.za for registration.
5. Most recent CSD registration reports must be submitted.
6. Attached declaration of interest form needs to be completed.
7. Quotations must be on Company Letterhead.
8. SARS Verification pins to be supplied if available
9. No deposit or payment upon delivery or service provided
10. General conditions (National Treasury) will apply
11. Bidders should deem themselves unsuccessful if not contacted within two weeks after closing
12. A current certified Municipal (rates & services) clearance certificate to be submitted.
13. A current certified BBBEE status level certificate must be submitted in order to claim preference points.
14. Council is not bound to accept the lowest or any tender and reserves the right to accept any tender or part thereof.
15. For further details contact, Mr. C. Wildschut at 049 807 5700

DR. E.M. RANKWANA
MUNICIPAL MANAGER
### Bill of Quantities

<table>
<thead>
<tr>
<th>ITEM</th>
<th>QUANTITY</th>
<th>DESCRIPTION</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>250</td>
<td>MULTI SURFACE FURNITURE POLISH/SPRAY</td>
</tr>
<tr>
<td>2</td>
<td>400</td>
<td>HYGIENE HAND SOAP 175G</td>
</tr>
<tr>
<td>3</td>
<td>200</td>
<td>WAX FLOOR POLISH 875ML</td>
</tr>
<tr>
<td>4</td>
<td>200</td>
<td>5 IN 1 TOILET CLEANER 500ML</td>
</tr>
<tr>
<td>5</td>
<td>200</td>
<td>48’s BALE TOILET PAPER 500 SHEETS</td>
</tr>
<tr>
<td>6</td>
<td>40</td>
<td>5KG’s WASTE RAGS</td>
</tr>
<tr>
<td>7</td>
<td>100</td>
<td>WASHING POWDER 3KG’s</td>
</tr>
<tr>
<td>8</td>
<td>50</td>
<td>OVEN CLEANER</td>
</tr>
<tr>
<td>9</td>
<td>100</td>
<td>FURNITURE OIL 500G</td>
</tr>
<tr>
<td>10</td>
<td>20</td>
<td>MULTI GUARD CLEANER 5L</td>
</tr>
<tr>
<td>11</td>
<td>40</td>
<td>BOWL CLEANER 5L</td>
</tr>
<tr>
<td>12</td>
<td>100</td>
<td>PINE GEL 5L</td>
</tr>
<tr>
<td>13</td>
<td>100</td>
<td>DISHWASHING LIQUID 5L</td>
</tr>
<tr>
<td>14</td>
<td>200</td>
<td>MULTI PURPOSE THICH BLEACH 750ML</td>
</tr>
<tr>
<td>15</td>
<td>100</td>
<td>RUBY LIQUID HAND SOAP 5L</td>
</tr>
<tr>
<td>16</td>
<td>150</td>
<td>ALL PURPOSE HOUSEHOLD CLEANING CREAM 750ML</td>
</tr>
<tr>
<td>17</td>
<td>15</td>
<td>HOUSEHOLD BLEACH 750ML</td>
</tr>
<tr>
<td>18</td>
<td>40</td>
<td>DEO BLOCKS 5L</td>
</tr>
<tr>
<td>19</td>
<td>250</td>
<td>AIR FRESHNER 180ML</td>
</tr>
<tr>
<td>20</td>
<td>150</td>
<td>FRESH MULTI INSECT SPRAY FOR CRAWLING AND FLYING</td>
</tr>
</tbody>
</table>
DECLARATION OF INTEREST

1. No bid will be accepted from persons in the service of the state\textsuperscript{*}.

1. Any person, having a kinship with persons in the service of the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid. In view of possible allegations of favouritism, 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 authorised representative declare their position in relation to the evaluating/adjudicating authority and/or take an 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.

3.1 Full Name: …………………………………………………………………………

3.2 Identity Number: …………………………………………………………………

3.3 Company Registration Number: …………………………………………………

3.4 Tax Reference Number: …………………………………………………………

3.5 VAT Registration Number: ………………………………………………………

3.6 Are you presently in the service of the state\textsuperscript{*} \hspace{1cm} YES / NO

3.6.1 If so, furnish particulars.

…………………………………………………………………………………………

…………………………………………………………………………………………

\textsuperscript{*} MSCM Regulations: "in the service of the state" means to be –

1. a member of –
   1. any municipal council;
   2. any provincial legislature; or
   3. the national Assembly or the national Council of provinces;

2. a member of the board of directors of any municipal entity;

3. an official of any municipality or municipal entity;

4. 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);

5. a member of the accounting authority of any national or provincial public entity; or

6. an employee of Parliament or a provincial legislature.
3.7 Have you been in the service of the state for the past twelve months?

   YES / NO

   1. If so, furnish particulars.

   …………………………………………………………………

   …………………………………………………………………

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

   YES / NO

   3.8.1 If so, furnish particulars.

   …………………………………………………………………

   …………………………………………………………………

3.9 Are you, aware of any relationship (family, friend, other) between a bidder and any persons in the service of the state who may be involved with the evaluation and or adjudication of this bid?

   YES / NO

   3.9.1 If so, furnish particulars

   …………………………………………………………………

   …………………………………………………………………
3.10  Are any of the company’s directors, managers, principal shareholders or stakeholders in service of the state?  
YES / NO

3.10.1 If so, furnish particulars.

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1.  Are any spouse, child or parent of the company’s directors, managers, principal shareholders or stakeholders in service of the state?  
YES / NO

3.11.1 If so, furnish particulars.

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CERTIFICATION

I, THE UNDERSIGNED (NAME) .................................................................

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

I ACCEPT THAT THE STATE MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

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

Signature  Date

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

Position  Name of Bidder