



MAKANA
MUNICIPALITY | EASTERN CAPE
...a great place to be

MAKANA MUNICIPALITY SUPPLIER DATABASE REGISTRAION

This form must be completed and submitted to one of the following:

Makana Municipality
Supply Chain Management Office
P.O. Box 176
GRAHAMSTOWN
6140

Makana Municipality
Finance Directorate
86 High Street
GRAHAMSTOWN
6139

Enquiries:

Supplier Database Office: 046 603 6222
Email: NandiMabutya@makana.gov.za

Fax: 046 636 2472

Name of Supplier : _____

Registration Number: _____

Documentation attached:

- | | |
|--|--|
| <input type="checkbox"/> Business Registration | <input type="checkbox"/> B-BBEE Certificate |
| <input type="checkbox"/> Cheque/Bank Verification Letter | <input type="checkbox"/> ID of Directors |
| <input type="checkbox"/> Original SARS Tax Clearance Certificate | <input type="checkbox"/> Billing Clearance Certificate |
| <input type="checkbox"/> CIDB | <input type="checkbox"/> Other: _____ |

FOR OFFICIAL PURPOSE ONLY:

Supplier Number: _____

Input by : _____ **Checked by :** _____ **Approved by :** _____

Signature : _____ **Signature :** _____ **Signature :** _____

Date : _____ **Date :** _____ **Date :** _____

SUPPLIER DATABASE

COMPLETING THE REGISTRATION FORM

- 1. All relevant sections of this form must be completed by prospective suppliers only in black ink.**
- 2. Corrections can be made by drawing a line across the incorrect statement, writing in the correct details above the same, and subsequently endorsing the entry with the applicant's signature.**
- 3. Applicants are advised that only an Original Database form will be processed. Any document that have been retyped or redrafted or faxed will be disregarded and returned to the applicant.**
- 4. A supplier registered on the Supplier Database MUST notifies the Supply Chain Management Office of any changes to the information provided.**
- 5. Please refer to the attached table to determine the mandatory documentation required by your business type. Please ensure that all copies of mandatory documentations (certified copies, where applicable) are attached. If a field is not applicable to your business type, mark it as N/A and supply applicable documentation or proof of exemption.**
- 6. Clearly state Yes, No or N/A to question asked. Do not leave any fields blank.**
- 7. Please ensure that a Commissioner of Oaths has clearly certified all documentation required.**
- 8. An Original Valid SARS Tax Clearance Certificate is to be submitted.**
- 9. Please keep copies of the registration documentation for your own records and to ensure that all data is maintained and up to date on a continual basis.**
- 10. Completed registration forms and supporting documentation can either be delivered or posted to one of the addresses on the registration form.**
- 11. Please notify the Makana Municipality immediately of any changes to the verified information submitted. Failure to do so may result in such a supplier being removed from the Supplier Database.**

☐ New Supplier

☐ Re-registration Information Update

☐ Existing Supplier Registration No

☐ Existing Supplier

A – 1 BASIC SUPPLIER INFORMATION

| | | | | | | | |
|---|----|-------------------------------------|----|--|--|---|--|
| Registered Business Name of Supplier | | | | | | | |
| Trading Name of Supplier | | | | | | | |
| Registration Number (CIPRO, etc) | | | | | | | |
| Year of Registration | | | | Years of Operation | | | |
| Business Type (Tick Box) | 1 | Public Company Ltd | | | Attach Certified copy of Incorporation (CM3) | | |
| | 2 | Private Company (Pty) Ltd | | | Attach Certified copy of incorporation (CM3) | | |
| | 3 | Close Corporation CC | | | Attach Certified copy of CK 1 & CK 2 | | |
| | 4 | Sole Proprietor | | | Attach Certified copy of ID Document | | |
| | 5 | Partnership | | | Attach Certified copy of Partnership Agreement | | |
| | 6 | Trust | | | Attach Certified copy of Trust Document | | |
| | 7 | Co-operative | | | Attach Certified copy of Co-Op Registration | | |
| | 8 | Voluntary Associations | | | Attach Certified copy of constitution | | |
| | 9 | Other | | | | | |
| Supplier Group Details (Tick box) | 10 | Construction Equipment and Supplies | 20 | Construction Services | 30 | Electrical and Mechanical Equipment, Services | |
| | 40 | General Services | 50 | Office and Facilities Equipment | 60 | Miscellaneous Goods and Supplies | |
| | 70 | Professional Services | 80 | Vehicle Supply and Transportation Services | | | |
| | | other | | | | | |
| Preferential Procurement IND Codes (Tick all that Apply) | DI | Disability | GE | Women | YO | Youth (18-35) | |
| | HD | Historical Disadvantage Individuals | LC | Local Content | LL | Local & Regional Based | |
| | SM | Small Medium Micro Enterprise | LM | Local Municipality | | | |

A – 2 CONTACT DETAILS

Please indicate your Province by circling the abbreviation

| | | | | | |
|--|--|--------------|--------------------|-------|--|
| Registered Postal Address | | P.O. Box/Bag | | | |
| | | Suburb/Town | | | |
| EC / WC / NC / GT / MP / KZN / NP / FS / LP | | City | | Code | |
| Head Office PHYSICAL Address | | Building | | | |
| | | Street | | Floor | |
| | | Suburb/Town | | | |
| EC/ WC / NC / GT / MP / KZN / NP / FS / LP | | City | | Code | |
| Municipal District | | | Local Municipality | | |
| Head Office Contact Details (for Payments) (Circle Title below) Mr. / Mrs. / Ms. / Miss. / Other _____ | | Person | | | |
| | | Designation | | | |
| | | Telephone | | Fax | |
| | | Cell | | | |
| | | Email | | | |
| Website Address : | | | | | |
| Branch Office Physical Address | | Street | | | |
| | | Suburb/Town | | | |
| EC / WC / NC / GT / MP / KZN / NP / FS / LP | | City | | Code | |
| Municipal District | | | Local Municipality | | |
| Alternative Contact Details (Circle Title below) Mr. / Mrs. / Ms. / Miss. / Other _____ | | Person | | | |
| | | Des | | | |
| | | Telephone | | | |
| | | Cell | | | |
| | | Email | | | |
| Located At : <i>(Specify the Office)</i> | | | | | |

A – 3 BANKING INFORMATION (N.B. - Please attach Bank Verification letter from your Bank)

| | | | | | | |
|---|----------------------------|--------------------------|---------------------------|--------------------------|--------------------------|--------------------------|
| Bank Details for this Office : Official Bank Stamp (Attach a copy or original bank statement not older than 6 days) | Bank Name | | | | | |
| | Bank Location | | | | | |
| | Branch Name | | | | | |
| | Branch Code | | | | | |
| | Account Holder | | | | | |
| | Account Name | | | | | |
| | Account Number | | | | | |
| | Account Type: (Tick One) | <input type="checkbox"/> | Cheque | <input type="checkbox"/> | Tran | <input type="checkbox"/> |
| | <input type="checkbox"/> | Savings | <input type="checkbox"/> | Subscription | <input type="checkbox"/> | Bond |
| Bank Official Name : | | Designation : | | Signature : | | |
| Preferred Payment Method : | | | | | | |
| Default Payment Terms : | | | Invoice Delivery Method : | | | |

A – 4 ACCREDITATION ? CERTIFICATION (CIDB, NHBRC, PSIRA, etc.)
(Attach a copy of Accreditation)

| | | | |
|---|--|--------------------------|--|
| Document No Of Accreditation : | | Issue Date : | |
| Issuing Organization : | | Expiry Date : | |
| Issuing Organization Registration Number : | | Re fence / Member No: | |
| Name of Certificate : | | Grading | |
| Status of Certificate : | | | |
| Type of Certification : | | Membership Period | |

A – 5 TAX INFORMATION (Attach a Valid Original SARS Tax Clearance Certificate)

| | |
|--|--|
| SARS Tax Reference Number: | |
| VAT Registration Number: | |
| RSC Registration Number: | |
| Supplier's SARS Office and Telephone contact where tax file is held: | |

B – 1 PROPRIETORS / SHAREHOLDERS / PARTNERS / SOLE PROPRIETER / TRUSTEES / BENEFICIARIES (OWNERS)

| | | | | |
|---|-----|---------------|------------------------------------|----------------------|
| List all persons who are OWNERS in the business or trust being registered and indicate their involvement in the management / operations of the business / trust. | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| OWNERS' INFORMATION (Circle choice or fill in the required information) | | | REGARDING OWNERS AND TRUSTS | |
| Full Name : | | | Trustee? | Y N Beneficiary? Y N |
| ID Number: | | | Designation : | |
| Address : | | | | |
| Own Interest in Another Business | Y N | Ownership % : | Nationality : (Attach ID) | |
| BBBEE Level | | | | |
| Full Name : | | | Trustee? | Y N Beneficiary? Y N |
| ID Number: | | | Designation : | |
| Address : | | | | |
| Own Interest in Another Business | Y N | Ownership % : | Nationality : (Attach ID) | |
| BBBEE Level | | | | |
| Full Name : | | | Trustee? | Y N Beneficiary? Y N |
| ID Number: | | | Designation : | |
| Address : | | | | |
| Own Interest in Another Business | Y N | Ownership % : | Nationality : (Attach ID) | |
| BBBEE Level | | | | |
| Full Name : | | | Trustee? | Y N Beneficiary? Y N |
| ID Number: | | | Designation : | |
| Address : | | | | |
| Own Interest in Another Business | Y N | Ownership % : | Nationality : (Attach ID) | |
| BBBEE Level | | | | |
| Full Name : | | | Trustee? | Y N Beneficiary? Y N |
| ID Number: | | | Designation : | |
| Address : | | | | |
| Own Interest in Another Business | Y N | Ownership % : | Nationality : (Attach ID) | |
| BBBEE Level | | | | |
| Full Name : | | | Trustee? | Y N Beneficiary? Y N |
| ID Number: | | | Designation : | |
| Address : | | | | |
| Own Interest in Another Business | Y N | Ownership % : | Nationality : (Attach ID) | |
| BBBEE Level | | | | |

| | | | | | | | | | | | |
|----------------------------------|--|--|---|---------------|---------------|---|---|----------------------------------|--|---|---|
| Full Name : | | | | Trustee? | | Y | N | Beneficiary? | | Y | N |
| ID Number: | | | | Designation : | | | | | | | |
| Address : | | | | | | | | | | | |
| Own Interest in Another Business | | | Y | N | Ownership % : | | | Nationality : <i>(Attach ID)</i> | | | |
| BBBEE Level | | | | | | | | | | | |
| Full Name : | | | | Trustee? | | Y | N | Beneficiary? | | Y | N |
| ID Number: | | | | Designation : | | | | | | | |
| Address : | | | | | | | | | | | |
| Own Interest in Another Business | | | Y | N | Ownership % : | | | Nationality : <i>(Attach ID)</i> | | | |
| BBBEE Level | | | | | | | | | | | |
| Full Name : | | | | Trustee? | | Y | N | Beneficiary? | | Y | N |
| ID Number: | | | | Designation : | | | | | | | |
| Address : | | | | | | | | | | | |
| Own Interest in Another Business | | | Y | N | Ownership % : | | | Nationality : <i>(Attach ID)</i> | | | |
| BBBEE Level | | | | | | | | | | | |

LIST ANY OWNER WHO HAVE AN OWNERSHIP INTEREST IN ANOTHER BUSINESS

| | |
|--------------------------|------------|
| Name : | Position : |
| Name of Other Business : | |
| Type of Business : | % Held : |
| Name : | Position : |
| Name of Other Business : | |
| Type of Business : | % Held : |
| Name : | Position : |
| Name of Other Business : | |
| Type of Business : | % Held : |

B – 2 DECLARATION OF CONFLICT OF INTEREST BY PROSPECTIVE SUPPLIER

| | | |
|--|-----|----|
| Are any of your Owners or Senior/Executive Management Current Government Officials. If yes, Specify. | Yes | No |
| Do any of your Directors/ Owners have any previous/current association with Government? If so, please indicate by declaring such interest | Yes | No |
| | | |
| | | |
| <i>Attached please find the declaration of interest form to be completed & signed:</i> | | |

B – 2 PREVIOUS BUSINESS INFORMATION

| | | |
|--|--------|-----------|
| Did your business exist under a previous name? | Yes | No |
| IF “Yes” what previous name (s) | Year : | |
| Why was the name changed? | | |
| Previous Supplier Database number? | | |
| Owners, Partners, members an shareholders now de-registered: | | |
| Name | Title | ID Number |
| | | |
| | | |
| | | |
| | | |
| | | |

B – 3 PREVIOUS CONTRACT OR TENDER EXPERIENCE (*Mark with X*)

| | | | | |
|--|--|------------------------------------|-----|----|
| Do you have any previous contract work or tender experience? | | | Yes | No |
| If “Yes”, Please complete below: | | | | |
| Employer / Department | | | | |
| Contact Person | | | | |
| Contact Number | | | | |
| Estimated Contract Value in Rands | | | R | |
| Year awarded | | Year Completed / Still in Progress | | |
| Proof documents attached | | | Yes | No |

| | | | | |
|--|--|------------------------------------|-----|----|
| Do you have any previous contract work or tender experience? | | | Yes | No |
| If “Yes”, Please complete below: | | | | |
| Employer / Department | | | | |
| Contact Person | | | | |
| Contact Number | | | | |
| Estimated Contract Value in Rands: | | | R | |
| Year awarded | | Year Completed / Still in Progress | | |
| Proof Documentation attached | | | Yes | No |

DOCUMENTATION CODES

1 Bank Details Verification
2 BEE Certificate Doc
3 CC Reg Doc
4 CIDB Reg Doc
5 Company Profile
6 Identity Document
7 Identity Document 2
8 Identity Document 3
9 Identity Document 4
10 Identity Document 5
11 Identity Document 6
12 Identity Document 7
13 Identity Document 8
14 Identity Document 9
15 Income Tax Number
16 IRP6 Provisional Of Registration
17 IT 150 Notification of Registration
19 Municipal Account / Lease Agreement
20 PAYE Registration
22 Private Security Industry Regulatory AUT
21 Resolution of Signatories
23 Tax Clearance
25 UIF Registration
26 Vat Registration Doc
32 WCA Registration

NATIONALITY CODE

R RSA
S SADEC COUNTRY
Z ZIMBABWEAN
B BRITISH

POSITION IN COMPANY

1 Member
2 Director
3 Managing Director MD
4 Owner
5 Partner
6 Trustee

D -1 GOODS AND SERVICES SUPPLIED BY YOUR BUSINESS

Please mark commodities with X in numbered column next to the commodity

| CODE 1000 | CONSTRUCTION EQUIPMENT AND SUPPLIES | CODE 4000 | GENERAL SERVICES continue |
|----------------------|---|----------------------|--|
| 1010 | Air conditioning and temperature control equipment | 4370 | Security and Safety Services |
| 1020 | Building equipment and accessories (cement mixers, scaffolding, trowels, levels etc.) | 4380 | Site Cleaning |
| 1030 | Building materials (bricks, cement, sand, planting, plastic, stone, steel tiles etc.) | 4390 | Social Facilitating |
| 1040 | Ceiling boards, skirting's etc. | 4400 | Storage |
| 1050 | Construction machinery | 4410 | Translation and Interpreting Services |
| 1060 | Doors and windows | 4420 | Transport Services, General |
| 1070 | Electrical systems, lighting, components, accessories and supplies | 4430 | Travel Services |
| 1080 | Flooring materials (carpets, tiles, etc.) | 4440 | Vehicle Hire |
| 1090 | Glass | 4450 | Vending Services |
| 1100 | Plumbing ware and materials | 4460 | Area Cleaning |
| 1110 | Roofing materials | 4470 | Traffic Signs |
| 1120 | Sanitation ware and equipment | 4480 | Hairdressing |
| 2000 | CONSTRUCTION SERVICES | 4490 | HR Services |
| 2010 | Burglar proofing and systems | 5000 | OFFICE AND FACILITIES EQUIPMENT AND SUPPLIES |
| 2020 | Civil Engineering structures | 5010 | Office Computer Equipment, Networks and Software |
| 2030 | Concrete manufacture and works | 5020 | Consumables |
| 2040 | Construction-related transport | 5030 | Corporate Gifts |
| 2050 | Demolition services | 5040 | Domestic, Industrial and Cleaning Equipment and Supplies |
| 2060 | Earthworks, drilling and landscaping | 5050 | Electric Equipment, Including Audiovisual Equipment |
| 2070 | Electrical installation | 5060 | Fire Protection Equipment |
| 2080 | Fencing | 5070 | Flowers and Plants |
| 2090 | General building work | 5080 | Food and Refreshments |
| 2100 | Glazing | 5090 | Households Furniture and Equipment |

| | | | |
|-------------|--|-------------|---|
| 2110 | Mechanical contracts | 5100 | Office Furniture and Equipment |
| 2120 | Metalwork | 5110 | Office Suppliers and Stationery |
| 2130 | Painting | 5120 | Printing, Copying and Photographic Equipment and Supplies |
| 2140 | Paving | 6000 | <u>MISCELLANEOUS GOODS AND SUPPLIES</u> |
| 2150 | Plumbing | 6010 | Environmental Cleaning Equipment, Goods and Supplies |
| 2160 | Pre-cast concrete manufacture | 6020 | Fire Protection Equipment, Goods and Supplies |
| 2170 | Pump Installation | 6030 | Garden Tools |
| 2180 | Road works | 6040 | Gas |
| 2190 | Sewerage systems and construction | 6050 | Material and Warehousing Machinery, Equipment and Goods |
| 2200 | Water works and pipelines | 6060 | Measuring, Testing and Observation Equipment |
| 2210 | Specialist Trade Contractors | 6070 | Pharmaceutical |
| 2220 | Forestry Cleaning | 6080 | Protective Clothing and Uniforms |
| 2230 | CCTV Inspection | 6090 | Security Equipment , Goods and Services |
| 2240 | Asphalt Paving | 6100 | Sports and Recreational Equipment and Goods |
| 2250 | Traffic Systems and Signage | 6110 | Laboratory Chemicals |
| 2260 | Road Marking Painting | 6120 | Specialized Imported Chemicals |
| 3000 | <u>ELECTRICAL AND MECHANICAL EQUIPMENT, SERVICES AND SUPPLIES</u> | 6130 | Pharmacy |
| 3010 | Bearing supplies | 6140 | Swim and Water Support Training |
| 3020 | Bolts, nuts, fasteners | 7000 | <u>PROFESSIONAL SERVICES</u> |
| 3030 | Electric cables | 7010 | Accounting, Auditing and Management Services |
| 3040 | Electrical component supplies | 7020 | Architectural Services |
| 3050 | Electrical Equipment | 7030 | Consulting Engineering Electrical |
| 3060 | Electrical equipment repairs | 7040 | Consulting Engineering Environmental |
| 3070 | Hardware supplies | 7050 | Consulting Engineering Other |
| 3080 | Lifting equipment | 7060 | Consulting Engineering Project Management |
| 3090 | Mechanical seals and parking | 7070 | Consulting Engineering Roads & Storm Water |

| | | | |
|------|---|--------------------|---|
| 3100 | Pipe and irrigation supplies | 7080 | Consulting Engineering Sewerage Systems |
| 3110 | Power generation and distribution machinery and accessories | 7090 | Consulting Engineering Structures, Building, Bridges etc. |
| 3120 | Pump spares | 7100 | Consulting Engineering Water Systems |
| 3130 | Small tools | 7110 | Consulting Engineering Geo Technical |
| 3140 | Transformer services | 7120 | Consulting Engineering Solid Waste |
| 3150 | Valves, couplings | 7130 | Engineering Services |
| 3160 | Water meter, pipes, fittings, galvanized PVC, uPVC, mPVC, polyethylene etc. | 7140 | Financial Services |
| 4000 | <u>GENERAL SERVICES</u> | 7150 | Land Surveying |
| 4010 | Accommodation and lodging | 7160 | Legal Services Contracts |
| 4020 | Advertising, communication, design, editorial, publication and marketing services | 7170 | Legal Services Conveyance |
| 4030 | Auctioneering services | 7180 | Legal Services Litigation |
| 4050 | Bookkeeping and accounting services | 7190 | Legal Services Other |
| 4060 | Catering and refreshments | 7200 | Consulting Engineering Mechanical |
| 4070 | Cleaning servicers | 7210 | Medical Services |
| 4080 | Conferencing facilities and facilitation | 7220 | Project Management |
| 4090 | Contract administration | 7230 | Quantity Surveying |
| 4100 | Courier services | 7240 | Town and regional Planning |
| 4110 | Education and training | 7250 | Tax Consulting Services |
| 4130 | Freight forwarding and cleaning services | 7260 | Aerial Survey & Digital Mapping |
| 4140 | General maintenance services | 7270 | Occupational Health & Safety |
| 4150 | General Wholesale | <u>8000</u> | <u>VEHICLE SUPPLY AND TRANSPORTATION SERVICES</u> |
| 4160 | Health care | 8010 | Alarm and Tracking Systems |
| 4170 | Horticulture | 8020 | Batteries |
| 4180 | Infrastructural maintenance | 8030 | Engine Overhauls |
| 4190 | Inspection services | 8040 | Fuel, Oils and Lubrications |
| 4200 | Insurance | 8050 | Hydraulics |

| | | | |
|------|--|--------------------|--------------------------------------|
| 4210 | IT, Broadcasting and Telecommunication Services | 8060 | Panel Beating |
| 4220 | Interior Decorating Refurbishment and Upholstery | 8070 | Radiator Repairs |
| 4230 | Land Valuation | 8080 | Radio & Electronic Equipment |
| 4240 | Laundry and Dry-cleaning Services | 8090 | Spares and Parts |
| 4250 | Locksmith Services | 8100 | Towing Services |
| 4260 | Mailing Services | 8110 | Transmission |
| 4270 | Management Services | 8120 | Tyres and Tubes |
| 4280 | Miscellaneous Equipment and Goods Hiring | 8130 | Upholstery |
| 4290 | Personnel Services | 8120 | Vehicle fleet Management |
| 4300 | Pest Control and Removal Services | 8150 | Vehicle supply |
| 4310 | Photographic and Graphic Design Services | 8160 | Windscreens |
| 4320 | Picture Framing | 8170 | Auto Electrical Repairs |
| 4330 | Printing | 8180 | Pros haft Repairs and Balancing |
| 4340 | Procurement Services | 8190 | Rental of Crane Trucks and Forklifts |
| 4350 | Real Estate Services | 8200 | Rigging |
| 4360 | Research Services | Others not listed: | |
| | | | |
| | | | |

E – 1 CERTIFICATION OF CORRECTNESS OF INFORMATION SUPPLIED

I /We, the undersigned, who warrants that he/she is duly authorized to do so on behalf of the Supplier, certifies that the information supplied in terms of this document, including the supporting documentation, is correct and accurate and acknowledges that:-

1. The supplier will be required to furnish documentary proof of the claims if requested to do so.
2. If the information supplied is found to be incorrect then the client may, in addition to any remedies it may have:-
 - I. Recover from the contractor all costs, losses or damages incurred or sustained by the client as a result of the award of the contract, and / or
 - ii. Cancel the contract and claim any damages which the client may suffer by having to make less favorable arrangements after such cancellations; and / or
 - iii. Impose a penalty on the contractor as provided for in the relevant organization's regulations.
 - iv. Take any other action as may be deemed necessary.

SIGNED ON THIS _____ DAY OF _____ 20__ AT _____

AUTHORIZED SIGNATURE

IN HIS / HER CAPACITY AS

PLEASE PRINT NAME OF AUTHORISED SIGNATURE

I.D.NUMBER OF AUTHORISED PERSON

DULY AUTHORISED TO SIGN ON BEHALF OF _____
(SUPPLIER NAME)

ADDRESS : _____

TELEPHONE NUMBER : _____