

# FETAKGOMO LOCAL MUNICIPALITY



## REGISTRATION ON THE SUPPLIER DATABASE

Existing and prospective service providers are hereby invited to apply for listing as preferred suppliers on the database of Fetakgomo Local Municipality for the 2014/2015 to 2016/2017 financial year

In compliance with the Municipal Finance Management Act, Preferential Procurement Framework Act and the Municipal Supply Chain Management regulation, the Fetakgomo has developed a supplier register that will be used in its acquisition process.

**Note: Registration on the supplier database does not guarantee business opportunity**

**It is the responsibility of the service provider to resubmit a valid tax clearance certificate if tax clearance certificate expiry date has lapsed, failure to resubmit will result in your company not being considered in the acquisition process**

**The closing date for submission of completed database registration forms is the 30th of April 2014 at 16h00, forms that are not completed and submitted after the closing date will not be accepted**

**The following documents must accompany the database registration form, failure to do so your forms will not be accepted.**

- Valid Original Tax Clearance Certificate
- Business Profile
- Certificate from the registrar of companies and close corporation
- Proof of registration with professional body
- Proof of banking details
- Certified copies of ID of the authorized person/s
- Proof of residence
- BBBEE verification certificate (Certified)

## PRODUCTS AND SERVICES

**Please tick the product that you offer**

**Note You are allowed to register for only one (1) field of your specialisation**

Project and Construction Managers				
Consulting Engineers (Civil,Structural)				
Mechanical Engineers				
Chemical Engineers				
Electrical Engineers				
Enviromental Engineers				
Architects				
Land Sarvey				
Quantity Survey				
Town and Regional Planners				
Others, Please specify				

**When completed registration forms can be hand delivered to supply chain office**

Fetakgomo Local Municipality  
Stand No. 1 Mashung  
P O Box 818  
Apel  
0739

**Official date stamp of the municipality**

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**COMPANY NAME:** \_\_\_\_\_

List of all Shareholders by Name, Position, I dentity Number, Citizenship, HDI statust and ownership, as relevant.

Name	Date/Position occupied in Enterprise	ID Number	Date RSA Citicenship obtained	HDI Status			% of business / enterprise owned
				No. Franchise prior to elections	Women	Diabled	

**CONTACT DETAILS**

**Contact Person** \_\_\_\_\_  
**Contact Numbers** \_\_\_\_\_  
**Fax Number** \_\_\_\_\_

**physical address**

\_\_\_\_\_

\_\_\_\_\_

**BANKING DETAILS**

Bank _____ Account Holder _____ Account Number _____ Account Type _____ Branch Name _____ Branch Number _____	<b>DATE STAMP OF BANK</b>    
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