



FETAKGOMO TUBATSE LOCAL MUNICIPALITY

PUBLIC NOTICE: FTLM 003/2019/20

**IN TERMS OF FETAKGOMO TUBATSE LOCAL MUNICIPALITY SUPPLY CHAIN MANAGEMENT POLICY, QUOTATIONS ARE HEREBY INVITED FROM ELIGIBLE AND INTERESTED COMPANIES TO PROVIDE SERVICES OF OCCUPATIONAL MEDICAL PRACTITIONER TO CONDUCT PERIODICAL MEDICAL SURVEILLANCE TO MUNICIPAL EMPLOYEES
NB: ONLY SERVICE PROVIDERS WHO ARE REGISTERED ON THE CENTRAL SUPPLIER DATABASE WILL BE CONSIDERED**

Item no	Description : SERVICES OF OCCUPATIONAL MEDICAL PRACTITIONER TO CONDUCT PERIODICAL MEDICAL SURVEILLANCE TO MUNICIPAL EMPLOYEES	Quantity
1	The following employees were identified in terms of their job categories: 1. Waste management x32 2. General Assistants x10 3. Corporate Cleaners x17 4. Municipal Driver x07 5. Handy man x01 6. Municipal Plant Operators x21 7. Municipal Traffic officer x29 8. Municipal Traffic Examiners x11 9. Steelpoort Roadworthy x05 10. Electrician x05	138

Completed quotations must be placed in a sealed envelope and marked (Request for quotations- SERVICES OF OCCUPATIONAL MEDICAL PRACTITIONER TO CONDUCT PERIODICAL MEDICAL SURVEILLANCE TO MUNICIPAL EMPLOYEES) Quotations must be deposited in a tender box at first floor next to reception at Fetakgomo Tubatse Local Municipality's Civic Centre Burgersfort and stand no 1 Mashung Ga-kwana. Closing date is on 19 August 2019 at 12H00, for further information contact SCM officials at 013 231 1231/1072 or Mr. Makwane at 013 231-1000/1148.

FAILURE TO SUBMIT THE FOLLOWING DOCUMENTS WILL LEAD TO DISQUALIFICATION:

- The service provider must meet all Medical and Dental Council requirements i.e.
 - Must hold qualification as Medical Doctor-MBCHB, should be valid and comply with requirements set by South African Medical and Dental Council,
 - Must hold qualification on Occupational Health and safety to be qualified as Occupational Medical Practitioner,
 - Must have valid certificate of practice with Health and Professional Council of South Africa,
 - All those requirements should be attached to the proposal or quotation as will be used as pre-qualifying criteria.
- The Quotation must indicate the following: Company tax registration, company registration number, contact/s number and address (the address on the quotation must match the one on the sworn affidavit).
- Compliant tax status (will be confirmed on the CSD report which will be generated by the municipality upon evaluation)
- Tax invoice/statement as proof of updated municipal rates and taxes for the company/business as well as directors/members/shareholders. If staying in a non-rateable area, please attach original SAPS affidavit for the company and directors. If you are renting, attach a copy of the lease agreement plus affidavit stating such arrangement. **If you are residing in someone's property, please submit a SAPS affidavit stating such arrangement.**

HEAD OFFICE

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REGIONAL OFFICE

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- Completion of MBD forms(4,8 & 9), (copies of completed forms are not acceptable and make sure that all forms are attached)
- Original or originally certified copies of BBBEE certificate(from SANAS accredited agencies) or original sworn affidavit (for points allocation)
- Price quoted must be firm and inclusive of Vat and other contingencies if registered as a vat vendor.
- No faxed, emailed or late bids shall be accepted



Acting Municipal Manager
Magooa RM

07/08/2019
Date

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