



**BUDGET & TREASURY  
OFFICE**

# **MOPANI DISTRICT MUNICIPALITY**

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## **APPLICATION FORM FOR LISTING ON ACCREDITED SUPPLIER DATABASE 2024-2025 FINACIAL YEAR.**

**This form must be duly completed with a black pen, signed as requested and placed together with supporting documentation.**

**PLEASE NOTE:**

- Mopani District Municipality is not obliged to award tenders or business opportunities on condition of this registration.
- All Supplier information will be treated strictly confidential.
- Please keep copies of the application form and all documentation submitted for your own records as no copies will be made by the Municipality.
- This form is also available on the Municipality's website at [www.mopani.gov.za](http://www.mopani.gov.za).
- All alterations must be initialed by the applicant.

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**CLOSING DATE FOR DATABASE REGISTRATION: 26 SEPTEMBER 2024**

**TIME: 16:30 PM**

**DELIVERY ADDRESS: OLD PARLIAMENT BUILDING, MOPANI DISTRICT MUNICIPALITY  
GIYANI. OFFICE NO. 41 (SCM)**

# APPLICATION FORM: SUPPLIER DATABASE REGISTRATION

## PART 1: BUSINESS INFORMATION

1.1. Registered Name of the Business

(Please attach copy of registration certificate with CIPC)

1.2. Business Registration Number

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1.3. Description of Principle Business (Services offered by the business to be registered under) N/Business will be registered under the category of services listed below.

No	Description
1	
2	
3	
4	
6	

1.4. Income Tax Reference Number

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(Please attach original tax clearance certificate issued by SARS)

1.5. Vat Registration Number (where applicable)

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(Please attach original VAT certificate issued by SARS where applicable)

1.6. Form of the Business

*Example: Close Corporation (cc)*

1.7. Address Details

Postal Address

Business Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Telephone No: ( ) \_\_\_\_\_

Cell No: \_\_\_\_\_

E-mail: \_\_\_\_\_

Contact Person: \_\_\_\_\_

1.8. Location of the Business

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*(Attach proof of business physical address and director address) The attachment required is statement of municipal rates and taxes or letter from traditional authority. Lease agreement and affidavit for confirming address) Non attachment will not for the purpose of maintaining the database disqualify any service provider but it will however affect their preference points claim on specific goals once the database is in operation.*

**PART 2: BANK DETAILS**

2.1. Any amount which accrues to me/us in terms of a contract entered into between me/us and Mopani District Municipality must be paid to the credit of my/our account as follows:

Name of Account : \_\_\_\_\_

Name of the bank : \_\_\_\_\_

Name of the branch : \_\_\_\_\_

Branch Code : 

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

Account Number : 

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Account Type : 

Current	Savings	Transmission	Cheque	Other

*(The banking details must be the same as banking details on CSD)*

**PART 4: SPECIFIC GOALS**

4.1 Particulars of owners of the business

<b>Ownership Names of Directors as per registration form</b>	<b>SPECIFIC GOALS</b>				
	<b>Black</b>	<b>Youth</b>	<b>Woman</b>	<b>Disabled</b>	<b>Living in rural area</b>
1.					
2.					
3.					
4.					
5.					

**\*SPECIFIC GOALS –Attached ID copy of director.**

PART 5: DECLARATION OF INTEREST (MBD4)



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 an advertised competitive bid, a limited bid, a proposal or written price quotation). 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:
1. Identity Number:
2. Position occupied in the Company (director, trustee, shareholder<sup>2</sup>, member):
3. Registration number of company, enterprise, close corporation, partnership agreement or trust:
4. Tax Reference Number:
5. VAT Registration Number:

2.2 The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / PERSAL numbers must be indicated in paragraph 3 below.

1"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.

2"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.

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

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:

2.4 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

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.)

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

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

If so, furnish particulars:  
 .....

.....  
 2.6 Do you, or any person connected with the bidder, have YES / NO  
 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?  
 If so, furnish particulars.

.....  
 .....

2.7 Are you, or any person connected with the bidder, YES/NO  
 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?

If so, furnish particulars.  
 .....

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

If so, furnish particulars:  
 .....

2.9 Full details of directors / trustees / members / shareholders.

Full Name	Identity Number	Personal Income Tax Reference Number	State Employee Number / Persal Number

**3. 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 SHOULD THIS DECLARATION PROVE TO BE FALSE.

.....  
**Signature**

.....  
**Date**

.....  
**Position**

.....  
**Name of bidder**

## PART 6: CONDITIONS

- 6.1 Mopani District Municipality Database Register** will be used mainly for the purpose of identifying businesses that can be approached and invited for goods and services. The fact that a business has been registered as a supplier does not constitute any contractual relationship between that business and Mopani District Municipality.
- 6.2** For procurement above the financial limit applicable to database register, as determined from time to time by the National Treasury, **Mopani District Municipality** will normally invite for quotations on the website for 7 days or competitive bids. The onus is on service providers to ensure that they obtain copies of the bidding documents that are available at **Mopani District Municipality** when bids and RFQ's are being advertised.
- 6.3** Registration of a business in Mopani District database is valid for a period of one year only and must be renewed annually.
- 6.4 Mopani District Municipality** reserves the right to enter into contract with suppliers (instead of inviting price quotations as and when required) where the frequency of procurement of goods or services warrants such an arrangement.
- 6.5 Mopani District Municipality** furthermore reserves the right to cancel the registration of a business if that business has given incorrect or false information in the application form or any correspondence relating to the application; failed to inform **Mopani District Municipality** of any change in the particulars as furnished in the application, failed to renew its registration with Mopani District Municipality annually, failed to comply with the conditions of any contract that might have been awarded to the business, failed to respond to requests for price quotations, or if the business has acted in an improper, fraudulent or corrupt manner.
- 6.6 Registration is free of charge.**

I / We the undersigned in my/our capacity as \_\_\_\_\_ being the applicant hereby declares that the particulars furnished in this application are true and correct. I/We also accept that Mopani District Municipality may act against me/us in terms of the relevant provisions of the Preferential Procurement Regulations should my/our business be registered and/or awarded contracts by Mopani District Municipality as a result of incorrect information furnished by me/us to Mopani District Municipality. I/We furthermore understand and accept the above conditions subject to which I/We have submitted this application.

**Signed By:**

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

Signature: \_\_\_\_\_

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

Signature: \_\_\_\_\_

**Witnesses:**

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

Signature: \_\_\_\_\_

**Note: 1. Please attach the following documents upon submission of the form:-**

- Valid Tax Clearance Certificate.
- Company registration documents or CK.
- Copy of Director ID copy
- CSD
- Business and Director municipal rates and taxes

**2. False declaration could lead to disqualification and blacklisting.**

**3. Companies that are blacklisted on the National Treasury Database will not be listed on the Mopani District Municipality database.**

**4. Companies must be registered on National Treasury Central Supplier Database.**