INVITATION TO QUOTE

YOU ARE HEREBY INVITED TO QUOTE FOR REQUIREMENTS OF THE LEJWELEPUTSWA DISTRICT MUNICIPALITY

/QUOTE NUMBER: RFQ NO: 97/11/2011 CLOSING DATE: 11 NOVEMBER 2011 CLOSING TIME:16H00

DESCRIPTION: SUPPLY OF TRANSPORT SERVICES

The successful bidder will be required to fill in and sign a written Contract Form (MBD 7) and MBD 9

QUOTATIONS MUST BE SUBMITTED ON THE LETTERHEAD OF YOUR BUSINESS AND MAY ONLY BE HAND DELIVERED:

Me. Khali Njobe

THE SUPPLY CHAIN MANAGEMENT OFFICE LEJWELEPUTSWA DISTRICT MUNICIPALITY CNR JAN HOFMEYER & TEMPEST ROAD WELKOM

Bidders should ensure that quotations are delivered timeously to the correct address. If the quotation is <u>late, it will not be</u> accepted for consideration.

THIS QUOTATION IS SUBJECT TO THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT

THIS QUOTATION WILL BE EVALUATED AND ADJUDICATED ACCORDING TO THE FOLLOWING CRITERIA:

- 1. Relevant specifications
- 2. Value for money
- 3. Capability to execute the contract
- 4.80:20 Preference Point System in compliance with Preferential Policy Framework Act & SCM Policy of the Municipality

NB: NO QUATATIONS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE (see definition on MBD 4 attached)

MBD1Lejweleputswa

THE FOLLOWING PARTICULARS MUST BE FURNISHED (FAILURE TO DO SO MAY RESULT IN YOUR BID BEING DISQUALIFIED)

| NAME OF BIDDER | | | | | | | |
|-----------------------------|---------------------------------------|-----------------------------|---------------|--------|-----------|-------------|----------------------|
| POSTAL ADDRESS | | | | | | | |
| STREET ADDRESS | | | | | ********* | | |
| TELEPHONE NUMBE CODE | | | | | | | |
| CELLPHONE NUMBE | ER | | | | | | |
| ACSIMILE NUMBER CODE NUMBER | | | | | | | |
| VAT REGISTRATION | NUMBER | | | | | | |
| HAS AN ORIGINAL TA | AX CLEARANCE CER | TIFICATE BEEN ATTA | CHED (MBD 2)? | | | YES | S/NO |
| | REDITED REPRESENT OR THE GOODS/SER | ATIVE VICES OFFERED BY Y | OU? | | | (IF YES ENC | YES/NO LOSE PROOF |
| SIGNATURE | | | OF | | | | BIDDEF |
| DATE | | | | | | | |
| CAPACITY | UNDER | WHICH | THIS | BID | | IS | SIGNED |
| | | | | | | | |
| TOTAL QUOTATION PRICE | | | TOTAL | NUMBER | OF | ITEMS | OFFERED |
| | | | | | | | |

ANY ENQUIRIES REGARDING THE QUOTATION PROCEDURE MAY BE DIRECTED TO:

Municipality / Municipal Entity: LEJWELEPUTSWA DISTRICT MUNICIPALITY

Department: SUPPLY CHAIN MANAGEMENT UNIT

Contact Person: Me. Khali Njobe

Tel: (057) 391 8944

ANY REQUIRIES REGARDING TECHNICAL INFORMATION MAY BE DIRECTED TO:

Mr. M.Martins

Tel: (057) 391 8912

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