

## REQUEST FOR CLOSED WRITTEN QUOTATION.

**REF NO; 12817**

**TO;**

**FAXED TO:**

In terms of paragraph 16 and 17 of the Municipal Supply Chain Management Policy, you are hereby invited to quote for the goods and or services as contained in the attached request to quote form and, in addition to the general conditions of contract, as per the following special conditions:

### CONDITIONS OF QUOTE:

1. Quotes may be submitted, in a sealed envelope with the relevant reference number on the front, at the Offices of the Supply Chain Management Unit, Stofberg Huis, 23 Baring Street, Worcester or faxed to the **086-fax number** as indicated in the request to quote form attached;
2. Quotes **MUST** be submitted before the closing date and time as indicated in the request to quote form attached;
3. Quotes **MUST** be completed and submitted on the attached request to quote form;
4. Quotes **MUST** be for the product or service as specified. If alternate products is quoted for it **MUST** be of the same quality and equivalent to the product specified. Full details of alternate products **MUST** be supplied. Non-compliance to this condition will invalidate your quote;
5. Delivery charges **MUST** be specified, where applicable. If not specified it will be regarded as included in the quoted amount;
6. Amount(s) quoted **MUST** remain valid for at least thirty (30) days from the specified closing date;
7. Amount(s) quoted **MUST** be firm and must be inclusive of VAT;
8. Calculation errors will be corrected, tariffs will be regarded as correct where the bid is based on quantities;
9. A firm delivery period **MUST** be indicated;
10. Quotes **MUST** be duly signed by an authorised person;
11. An original and valid Tax Clearance Certificate **MUST** be submitted if the quote exceeds R30 000 inclusive of VAT, unless such certificate is already submitted and is still valid;
12. A certificate stating that neither the enterprise or its Director(s) or Member(s) or Owners' municipal account(s) are in arrears for longer than three (3) months;
13. The municipality may accept the whole or a part of the bid (offer) where the bid request comprise of more than one item;
14. The municipality does not bind itself to accept the lowest or any bid;
15. Quotes received will be evaluated in terms of the 80/20 preference point system as prescribed in the Preferential Procurement Policy Framework Act, 2000 (Act no 5 of 2000);
16. The successful provider will be the provider scoring the highest points;
17. The acceptance of the quote and the subsequent issuing of an official order constitute a legal binding document and may not be cancelled;
18. Goods or Services may only be provided after and according to the issued official order;
19. Payment will only be made after the goods is delivered and or service is rendered, to the satisfaction of the Municipality, as per official order; and
20. Payment will only be made within thirty (30) days of receipt of monthly statement and the relevant VAT invoice containing the official order number and the municipalities' VAT number.

Failure to comply with any of these conditions may invalidate your quote.

**BREDE VALLEY MUNICIPALITY  
SUPPLY CHAIN MANAGEMENT  
REQUEST FOR CLOSED WRITTEN QUOTATION FORM**

Yours sincerely

*J. M. Boonzaier*

Head: Supply Chain Management

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PLEASE PHONE IF THE CORRECT NUMBER OF PAGES HAVE NOT BEEN  
RECEIVED, OR IF IT IS ILLEGIBLE

<b>Date 07-01-2010</b>		<b>Closing Date:15-01-2010</b>		<b>Time: 11H00 am</b>	
Enquiries:	MS, Mimi. MPHATSOANE.	Phone No.023 342 0384		<b>FAX NUMBER: 086 554 4260</b>	
Name of Company:				Quotation Ref: <b>12817</b>	
				Company Reference Nr.:	
Item:	Description:	Units:	Quantity:	Unit Price:	Total:
1.	<b>PAPER 80 GR A4 WHITE ROTATRIM (REAM)</b>		<b>2000</b>		
<b>NB. THIS IS A FORMAL CLOSED WRITTEN QUOTATION, FAXED OR EMAILED QUOTES WILL NOT BE CONSIDERED.</b>					
				Subtotal:	
VAT Registered? Yes/No		Included? Yes/No		VAT @ 14%	
VAT Number:				Total:	
Delivery Period:	Ex Stock/_____ Days/Week(s)/Month(s) from date of order				
<b>Delivery Address; MARKSTREET STORES</b>					
<b>Specification Enquiries, A. SITHOLE 023 348 2701</b>					
<b><u>Compulsory Inspection/Meeting:</u></b>		<b>DATE;</b>		<b>Time:</b>	
<b>Address;</b>					
The conditions, as attached, are read and accepted.					
Authorised Signature:				Official Stamp:	
Print Name:					
Date:					