

# RATLOU LOCAL MUNICIPALITY



Tel: 018 330 7000  
Fax: 018 330 7047  
www.ratlou.gov.za

## Postal Address

Private Bag X209  
Madibogo  
2772

## REQUEST FOR FORMAL WRITTEN PRICE QUOTATIONS

Prospective service providers are hereby requested to submit formal written price quotation as per attached specification.

<b>DESCRIPTION</b>	<b>: PROVISION OF TRAINING FOR OCCUPATIONAL HEALTH AND SAFETY COMMITTEE</b>
<b>TENDER NO</b>	<b>: NW381/CORPS30-NOV-OHS/2017/2018</b>
<b>DATE PUBLISHED</b>	<b>: 01 NOVEMBER 2017</b>
<b>BRIEFING SESSION</b>	<b>: N/A</b>
<b>CLOSING DATE</b>	<b>: 10 NOVEMBER 2017</b>
<b>TIME</b>	<b>: 11H00a.m</b>
<b>SUBMISSION ADDRESS</b>	<b>: RATLOU LOCAL MUNICIPAL OFFICES SETLAGOLE VILLAGE TENDER BOX (GENERALLY OPENED 24 HOURS AND 7 DAYS PER WEEK)</b>

The following documents should be submitted with your quotation:

- ❖ Valid Original Tax Clearance Certificate/ Tax compliance status pin in line with tax reforms
- ❖ Proof of Business registration on Central Supplier Database
- ❖ Certified copy of BBBEE Certificate/ Original
- ❖ Recent statement as proof of payment of municipal services (rates, taxes, water, etc.) for both the company and all the directors of the company;
- ❖ Recognisable proof of company addresses or lease agreement whichever applies obtainable from your local municipality, tribal office or landlord.
- ❖ Proof of residence of all directors as they appear on the company registration certificate obtainable from your local municipality or tribal authority

**NB No copies of certified copies will be accepted.**

**All certified copies should not be more than three months from the date of the advertisement.**

The following conditions will apply:

- Price(s) quoted must be valid for a period of 45 days from date of your offer.
- Price(s) quoted must be inclusive of VAT (if registered).

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**NW381/CORPS30-NOV-OHS/2017/2018**

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- Quotation should be submitted with **MBD 4, 7.2, 8 and 9** obtainable from Office #12 at the Municipal Offices or from the municipal website.
- The price quotation is expected to be within a threshold of **R30 000** and **R200 000** including VAT
- **80/20 Preferential Points System will apply.**
- **Bids will be evaluated on Returnable documents, Functionality and Price and Preferential points Phases.**

**N.B** Failure to comply with these conditions may invalidate your offer.

**SPECIFICATIONS FOR THR PROVISION OF TRAINING FOR OCCUPATIONAL HEALTH AND SAFETY COMMITTEE**

#	NAME OF PROGRAM	UNIT STANDARD	NQF LEVEL	BENEFICIARIES
1	Perform basic life support and first aid procedures	SAQA ID: 119567	NQF: L1	33
2	Apply firefighting techniques	SAQA ID: 252258	NQF: L1	33

**SPECIAL CONDITIONS OF CONTRACT**

- ✓ The service provider must issue accredited certificate after completion of the program
- ✓ Duration of the program **5 DAYS**

**FUNCTIONALITY**

**Confirmation Letters of similar Work Conducted – (Confirmation letter should be in a letter head of your previous client) 30**

5 Confirmation letters and more	30
3 - 4 Confirmation letter	20
1 - 2 Confirmation letter	10
No Confirmation letters	0

**Experience of the bidder in similar field (CVs of key personnel to be attached) 20**

6 years and above	20
4 – 5 years	10
1 – 3 years	05
Less than a year	0

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**Registration with relevant SETA**

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Registration with LG SETA

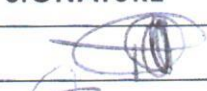
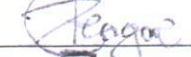



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No registration with LG SETA

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**NB: Bidders who obtain less than 60% on functionality will be regarded as non-responsive and will not be evaluated further.**

**MEMBERS OF THE SPECIFICATION COMMITTEE**

NAME & SURNAME	DESIGNATION	SIGNATURE
C Tjale	Chairperson	
K. Phutieagae	Member	
T Seleke	Member	
E Moroeng	Requesting Department	
M Mongala	Requesting Department	

**Approved / Disapproved**

**Patience Lekgetho  
Acting Municipal Manager**