



**UMZIMVUBU**  
 LOCAL MUNICIPALITY

**EXPRESSION OF INTEREST FOR LED MENTORSHIP PROGRAMMES BENEFICIARY**

Umzimvubu Local Municipality is hereby requesting interested Service Providers to submit proposals to enrol in Umzimvubu LED mentorship programmes as shown below:

Mentorship Programme	Requirements
<b>Culinary Mentorship Programme</b>	<ul style="list-style-type: none"> <li>• Individuals must have existing company/co-operative.</li> <li>• Must be willing to employ local people.</li> <li>• Must be willing to transfer skills to other people.</li> <li>• Facilitation/ coordination skills.</li> <li>• Proof of experience in the field.</li> </ul>
<b>Designer Mentorship Programme</b>	<ul style="list-style-type: none"> <li>• Individuals must have existing company/co-operative.</li> <li>• Must be willing to employ local people.</li> <li>• Must be willing to transfer skills to other people.</li> <li>• Facilitation/ coordination skills</li> <li>• Proof of experience in the field.</li> </ul>
<b>Farmer Mentorship Programme</b>	<ul style="list-style-type: none"> <li>• Individuals must have existing company/co-operative.</li> <li>• Must be willing to employ local people.</li> <li>• Must be willing to transfer skills to other people.</li> <li>• Facilitation/ coordination skills</li> <li>• Proof of experience in the business idea chosen.</li> </ul>

The following template shall be used for the elaboration of the full project proposal. Please complete ALL sections below. Please consider the following before completing the project proposal:

**Be clear about what your request and how it is going to benefit your company.**





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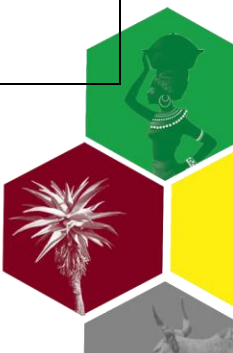
**Write clearly and accurately.**

**1. APPLICANT INFORMATION**

<b>Company Name:</b>	
<b>Registration Number:</b>	
<b>Representative's Details:</b>	
First and Last Name:	
Full Address:	
Contact information (Tel, email, etc.):	
Position in the organization:	
Languages spoken:	

**1.1. Describe your business in relation to your proposal**

*(Please give details about your business activities in relation to the Mentorship programme)  
(max 250 words)*





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**1.2. Staff involved in your business, or proposed/ intended**

*(Please provide information on the number and the expertise of the staff involved in your business)*

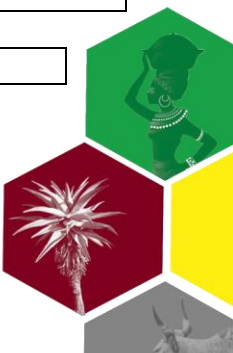
**1.3. How long have you been in business?**

*Please provide information on the number of years your business has been operating.*

**PROPOSED REQUEST INFORMATION**

<b>2.1 Proposed request</b>	<i>(specify your request)</i>
<b>Mentorship Programme requested</b>	

**2.2 Motivation for the selected mentorship programme**





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*How this occupying the unit will assist OR how will it be used for growing your business?  
(No more than 200 words)*

**2.3. Specific objective(s) of your business**

*(Please define objectives that are specific, measurable, and achievable)*





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**2.4. Expected results after the completion of the Mentorship programme**

*(Please explain where you see your business in the next 5 years to come and how are you going to achieve that)*

**2.5. Sustainability**

*(Please describe what measures are being put in place to ensure sustainability of your business?)*





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1. No Bid will be accepted from persons in the service of the state<sup>1</sup>.
2. Any person, having a kinship with persons in the service of the state, including a blood relationship, may make an offer or offers in terms of this invitation to Bid. In view of possible allegations of favouritism, should the resulting Bid, or part thereof, be awarded to persons connected with or related to persons in service of the state, it is required that the Bidder or their authorised representative declare their position in relation to the evaluating/adjudicating authority.
3. **To give effect to the above, the following questionnaire must be completed and submitted with the Bid.**

3.1. Full Name of Bidder or his or her representative:

.....

3.2. Identity Number:

.....

3.3. Position occupied in the Company (director, trustee, shareholder<sup>2</sup>):

.....

3.4. Company Registration Number:

.....

3.5. Tax Reference Number:

.....

3.6. VAT Registration Number:

.....

3.7. The names of all directors / trustees / shareholders members, their individual identity numbers and state employee numbers must be indicated in paragraph 4 below.

3.8. Are you presently in the service of the state?

**YES / NO**

3.8.1. If yes, furnish particulars.

.....

3.9. Have you been in the service of the state for the past twelve months? ..... **YES / NO**

3.9.1 If yes, furnish particulars.....

3.10 Do you have any relationship (family, friend, other) with persons in the service of the state and who may be involved with the evaluation and or adjudication of this

Bid? ..... **YES / NO**





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3.10.1 If yes, furnish particulars.....

3.11 Are you, aware of any relationship (family, friend, other) between any other Bidder and any persons in the service of the state who may be involved with the evaluation and or adjudication of this Bid? **YES / NO**

3.11.1 If yes, furnish particulars .....

3.12 Are any of the company's directors, trustees, managers, principle shareholders or stakeholders in service of the state? **YES / NO**

3.12.1 If yes, furnish particulars.....  
 .....

3.13 Are any spouse, child or parent of the company's directors trustees, managers, principle shareholders or stakeholders in service of the state? **YES / NO**

3.13.1 If yes, furnish particulars.....

3.14 Do you or any of the directors, trustees, managers, principle shareholders, or stakeholders of this company have any interest in any other related companies or business whether or not they are Bid for this contract. **YES / NO**

3.14.1 If yes, furnish particulars.....

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

Full Name	Identity Number	State Employee Number

.....

**Signature**

.....

**Date**





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**CERTIFICATION OF CORRECTNESS**

**I, THE UNDERSIGNED (NAME)**

.....

**CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS CORRECT.**

**I ACCEPT THAT THE STATE MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE**

.....  
**Signature**

.....  
**Date**

.....  
**Position**

.....  
**Name of Bidder**







## MBD FORM 8

### DECLARATION OF INTERES

### DECLARATION OF BIDDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES

- 1 This Municipal Bidding Document must form part of all bids invited.
- 2 It serves as a declaration to be used by municipalities and municipal entities in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
- 3 The bid of any bidder may be rejected if that bidder, or any of its directors have:
  - a. abused the municipality's / municipal entity's supply chain management system or committed any improper conduct in relation to such system.
  - b. been convicted for fraud or corruption during the past five years.
  - c. willfully neglected, reneged on or failed to comply with any government, municipal or other public sector contract during the past five years; or
  - d. been listed in the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004).
- 4 In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.





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Item	Question	Yes	No
4.1	<p>Is the bidder or any of its directors listed on the National Treasury's Database of Restricted Suppliers as companies or persons prohibited from doing business with the public sector?                      (Companies or persons who are listed on this Database were informed in writing of this restriction by the Accounting Officer/Authority of the institution that imposed the restriction after the <i>audi alteram partem</i> rule was applied).</p> <p>The Database of Restricted Suppliers now resides on the National Treasury's website(<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) and can be accessed by clicking on its link at the bottom of the home page.</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.1.1	If so, furnish particulars:		
4.2	<p>Is the bidder or any of its directors listed on the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004)?                      The Register for Tender Defaulters can be accessed on the National Treasury's website (<a href="http://www.treasury.gov.za">www.treasury.gov.za</a>) by clicking on its link at the bottom of the home page.</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.2.1	If so, furnish particulars:		
4.3	<p>Was the bidder or any of its directors convicted by a court of law (including a court of law outside the Republic of South Africa) for fraud or corruption during the past five years?</p>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.3.1	If so, furnish particulars:		
Item	Question	Yes	No





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4.4	Does the bidder or any of its directors owe any municipal rates and taxes or municipal charges to the municipality / municipal entity, or to any other municipality / municipal entity, that is in arrears for more than three months?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.4.1	If so, furnish particulars:		
4.5	Was any contract between the bidder and the municipality / municipal entity or any other organ of state terminated during the past five years on account of failure to perform on or comply with the contract?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.7.1	If so, furnish particulars:		

**CERTIFICATION**

I, THE UNDERSIGNED (FULL NAME) .....  
 CERTIFY THAT THE INFORMATION FURNISHED ON THIS  
 DECLARATION FORM TRUE AND CORRECT.

I ACCEPT THAT, IN ADDITION TO CANCELLATION OF A CONTRACT, ACTION MAY BE  
 TAKEN AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

.....  
**Signature**

.....  
**Date**

.....  
**Position**

.....  
**Name of Bidder**





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**SIGNED ON BEHALF OF THE PROPOSER:**

**3.11. Form of Offer and Acceptance**

**Offer**

The Employer, identified in the Acceptance signature block, has solicited offers to enter into a contract for the procurement of, Occupation of a vacant business unit of Umzimvubu LM

The Tenderer, identified in the Offer signature block below, has examined the documents listed in the Tender Data and addenda thereto as listed in the Tender Schedules, and by submitting this Offer has accepted the Conditions of Tender.

By the representative of the Tenderer, deemed to be duly authorised, signing this part of this Form of Offer and Acceptance, the Tenderer offers to perform all of the obligations and liabilities of the Contractor under the Contract including compliance with all its terms and conditions according to their true intent and meaning for an amount to be determined in accordance with the Conditions of Contract identified in the Contract Data.

**The offered total of the rental prices inclusive of Value Added Tax is:**

Amount in Words.....  
.....  
.....

R..... (in figures)

This Offer may be accepted by the Employer by signing the Acceptance part of this Form of Offer and Acceptance and returning one copy of this document to the Tenderer before the end of the period of validity stated in the Tender Data, whereupon the Tenderer becomes the party named as the Contractor in the Conditions of Contract identified in the Contract Data.

**Signature:** (of person authorised to sign the tender): .....

**Name:** (of signatory in capitals): .....

**Capacity:** (of Signatory): .....

**Name of Tenderer:** (organisation): .....

Address: .....

Tel/Cell Number: ..... **Fax number:** .....

**Witness:**

**Signature:** .....

**Name:** (in capitals): .....

**Date:** .....

**[Failure of a Tenderer to sign this form will invalidate the tender]**





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**Acceptance**

By signing this part of this Form of Offer and Acceptance, the Municipality identified below accepts the tenderer's offer.

In consideration thereof, the Employer shall pay the service provider the amount due in accordance with the conditions of contract identified in the contract data. Acceptance of the tenderer's offer shall form an agreement between the Umzimvubu Local Municipality and the tenderer upon the terms and conditions contained in this agreement and in the contract that is the subject of this agreement.

Deviations from and amendments to the documents listed in the tender data and any addenda thereto as listed in the tender schedules as well as any changes to the terms of the offer agreed by the tenderer and the employer during this process of offer and acceptance, are contained in the schedule of deviations attached to and forming part of this agreement. No amendments to or deviations from said documents are valid unless contained in this schedule.

The tenderer shall within two weeks after receiving a completed copy of this agreement, including the schedule of deviations (if any), contact the Municipality (whose details are given in the contract data) to arrange the delivery of any bonds, guarantees, proof of insurance and any other documentation to be provided in terms of the conditions of contract identified in the contract data. Failure to fulfil any of these obligations in accordance with those terms shall constitute a repudiation of this agreement.

Notwithstanding anything contained herein, this Agreement comes into effect on the date when the tenderer receives one fully completed original copy of this document, including the schedule of deviations (if any). Unless the tenderer (now Contractor) within five working days of the date of such receipt notifies the Employer in writing of any reason why he cannot accept the contents of this agreement, this agreement shall constitute a binding contract between the parties.

Signature(s) .....

Name(s) .....

Capacity.....

**For the Employer**

UMZIMVUBU LOCAL MUNICIPALITY  
Dabula street, Sophia location  
KwaBhaca

Name and Signature of witness .....

Date .....





## UMZIMVUBU LOCAL MUNICIPALITY

### Attachments to be submitted with this Application Form

- Business Registration Certificate (if applicable)
- Valid Tax Verification Pin (If applicable)
- Certified ID copy of applicant
- Proof of Residence of applicant, not older than 3 months.
- Letter of Good Standing from the Bank
- Business Plan or Proposal,
- Signed Application Form

### Selection Criteria / Generals Rules

- Applicants need to be South African citizens residing in Umzimvubu Local Municipality.
- Business must be 100% owned by South African Citizens.
- Business must at least have or be able to employ 70% local people who are South Africans.
- Businesses dealing with sin products will not be considered (Tobacco, Alcohol, gambling, sex-related etc).
- Fraudulent activities such as fronting, and misrepresentation will lead to direct disqualification.
- Late applications will not be considered.

### Application Process

- Service providers submitting incomplete applications will be disqualified and not considered.
- Service providers are expected to submit all required and valid documentation for their application to be considered.
- Service providers should ensure that they meet the eligibility Criteria before applying.
- **The municipality reserves the right to approve or decline an application.**
- Completed application forms with all required documents should be dropped off at the **Municipal Offices in Kwa-Bhaca** –Tender box at the reception in an enclosed envelope.
- **Enquiries:** All technical enquiries may be directed to Local Economic Development: Mr. A Makanda 039 255 8500/8541 and SCM Mr. T Mbukushe 0392558555. Other enquiries regarding this Bid may be directed to the office of the Municipal Manager: **Mr. GPT Nota.**





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**Declaration**

I ..... hereby declare that the information I have provided for this proposal concerning me and my business, that it is true, and I give consent that my details be presented to Council and any other interested/ affected party for this application.

I fully understand that Umzimvubu Municipality is under no obligation to approve my application and will not be liable for any cost I have incurred in the process of this application.

Are you presently in the service of the state Yes  No

Have you been in the service of the state for the past twelve months?

Yes  No

Applicant's Signature: .....

- **Closing Date: 09 November 2023; 12H00.**

**NO LATE SUBMISSIONS WILL BE ACCEPTED**

21. This application is hereby submitted by:

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

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Witness: \_\_\_\_\_

**SUPPORTING DOCUMENTS**

Ensure that ALL necessary supporting documents are attached. Use the table below in ensuring that you have the correct required documents.

**N.B: Note that certified documents must not be older than 3 months.**





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<b>APPLICATION CHECKLIST</b>	<b>Please mark with X if documents are attached</b>
Completed the application in full	
Attach Certified Copy of ID or IDs of Company Directors	
Attached Proof of Residence	
Attached Business Registration Certificate	
Attached proof of SARS Tax Application or SARS Tax Certificate	
Attached Letter of Good Standing/ Proof of Banking	
Attached BBB-EE Certificate/ Sworn Affidavit	
Attached Business Profile/ Plan	

\*\*\*\*POPIA DISCLAIMER\*\*\*\* POPIA DISCLAIMER: Umzimvubu Municipality complies with the Protection of Personal Information Act, Act 4 of 2013 (POPIA) and has adopted a privacy policy to this effect. Data Subjects who submit their personal information to the municipality's Responsible Parties or Processors confirm that they have read and understand the municipality's POPIA Policy. Such Data Subjects agree that their personal information may be recorded and processed by the municipality in executing its day-to-day activities. Data Subjects submitting personal information confirm that they are aware of their rights, such as the right to request that their personal information be amended or removed from the municipality's records at any time.

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

Date (DD/MM/YY): \_\_\_\_\_

