

## REQUIREMENTS SHEET

<b>DOCUMENT REQUIRED</b>	<b>SUBMITTED YES/NO</b>
Completed Application Form	
Company Profile	
Company Registration Documents	
Certified ID Copies (Directors/Trustees/Shareholders)	
Original Tax Clearance Certificate	
Cancelled Cheque or Letter from the Bank	
Certified BEE Certificate /Sworn affidavit (If Available)	

## APPLICATION FOR REGISTRATION ON ITAC'S SUPPLIERS DATABASE

THESE FORMS MUST BE COMPLETED AND SUBMITTED TO:

PROCUREMENT DEPARTMENT  
FIRST FLOOR  
DTI CAMPUS BLOCK E  
CORNER ESSELEN AND MEINTJIES STREET  
PRETORIA

OR POSTED TO

INTERNATIONAL TRADE ADMINISTRATION COMMISSION OF SOUTH AFRICA  
PROCUREMENT DEPARTMENT  
PRIVATE BAG X 753  
PRETORIA 0001

ENQUIRIES

TEL. (012) - 3943700  
FAX. (012) -3944700

FOR OFFICIAL USE ONLY

NAME OF SUPPLIER	
REGISTRATION NUMBER	
DATE APPROVED	
APPROVED BY	Name
	Signature:

## **INTRODUCTION AND GUIDELINES**

The purpose of this database is to give all prospective suppliers an equal opportunity to submit quotations to the Organisation. Preference will be given to registered suppliers but it does not necessarily follow that suppliers who are not yet registered will be totally excluded from quoting for the supplying of goods or services to ITAC. It is envisaged however that this database will contribute to efficient administration and compliance with the PFMA.

Attached please find an official registration form to assist us in updating our database according to legislation. It is imperative that suppliers read the application document carefully, complete it in full, signed and commissioned by an authorized Commissioner of Oaths. Failure to do so will result in the applicant not qualifying for registration.

It is imperative that only documents with an original signature be submitted. A supplier registered on the Suppliers Database must notify ITAC of any changes to information provided in the initial application form. Failure to do so may result in such a supplier being removed from the Suppliers Database and / or the cancellation of contracts awarded to the supplier, on the basis of misrepresentation.

Suppliers providing information incorrectly or fraudulently in their application form will be disqualified from tendering and removed from the Suppliers Database, in addition to any other action the organization may institute against such a supplier. Further, in the event of ITAC being prejudiced financially, it reserves the right to take legal action against the supplier. Any alterations made by the applicant must be initialed. The use of correcting fluid is prohibited and the use thereof will lead to non-registration of the applicant business.

**APPLICATION FOR REGISTRATION ON ITAC DATABASE**

(The following information must be filled in by the applicant. Failure to submit all the required information may lead to non-registration of the applicant business)

**1. BUSINESS PARTICULARS**

1.1 Name of business as registered with the Registrar of Companies/Close Corporations

\_\_\_\_\_

1.2 Name of business used for trading purposes, if different from 1.1 or name of business if business is not registered with the registrar

\_\_\_\_\_

1.3 Registration number as registered with the Registrar of companies/close corporations (if applicable):

\_\_\_\_\_

1.4 Postal address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1.5 Physical address

\_\_\_\_\_  
\_\_\_\_\_

1.6 Telephone no. \_\_\_\_\_

1.7 Cell. No. \_\_\_\_\_

1.8 E-mail address (if available): \_\_\_\_\_

1.9 Contact person: \_\_\_\_\_

1.10 Income Tax Reference Number (Insert personal income tax no. if the business is the sole proprietor and personal income tax numbers of all partners if is a partnership): \_\_\_\_\_

**(AN ORIGINAL VALID TAX CLEARANCE CERTIFICATE MUST BE ATTACHED)**



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**2. BANKING DETAILS**

- 2.1 Name of banking institution \_\_\_\_\_
- 2.2 Branch Name \_\_\_\_\_
- 2.3 Banking Account Number \_\_\_\_\_
- 2.4 Account Holder (Name under which account is operated) \_\_\_\_\_
- 2.5 Type of account: (Current, Savings, Transmission etc) \_\_\_\_\_

**(PROOF OF BANKING DETAILS E.G. COPY OF CANCELLED CHEQUE OR LETTER FROM THE BANK MUST BE PROVIDED)**

**3. TYPE OF BUSINESS**

3.1 Tick whichever block is applicable to your business or firm and attach the relevant certified copy.

PUBLIC COMPANY (LTD)		CERTIFIED COPY OF CERTIFICATE OF INCORPORATION (CM3)
PRIVATE COMPANY (PTY) LTD		CERTIFIED COPY OF CERTIFICATE OF INCORPORATION (CM3)
CLOSE CORPORATION (CC)		CERTIFIED COPY OF CK 1 AND CK 2 IF APPLICABLE
SOLE PROPRIETOR		CERTIFIED COPY OF IDENTITY DOCUMENT
PARTNERSHIP		CERTIFIED COPY OF PARTNERSHIP AGREEMENT
TRUST		CERTIFIED COPY OF TRUST DOCUMENT
CO-OPERATIVE		CERTIFIED COPY OF PROOF OF REGISTRATION WITH THE DIRECTORATE CO-OPERATIVES
JOINT VENTURE		CERTIFIED COPY OF JOINT VENTURE AGREEMENT

**4. PREVIOUS BUSINESS INFORMATION**

- 4.1 Did the business exist under a previous name? \_\_\_\_\_
- 4.2 If yes what was the previous business name? \_\_\_\_\_
- 4.3 Why was the name changed? \_\_\_\_\_



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4.4 Who were the owners, partners, members or shareholders? \_\_\_\_\_

NAME	TITLE/POSITION

5. CLASSIFICATION OF BUSINESS

5.1 Suppliers of the following products/services are required to register on the database. Please mark the main services your company supplies: tick relevant box (☐)

5.2

5.3

Goods and Services	Tick	Goods and Services	Tick
Catering		IT Equipment and Software	
Stationery		Consulting	
Training		Fresh Flowers	
Shuttle Service		Courier Services	
Printing Service		Photocopy and Videography	
Advertising and Publication		Consumables	
Conference Facilities		Assets Valuators	
Branding and Marketing Materials		Newspaper and Subscription	
Stamps		Transportation and Storage	

Annual

Turnover \_\_\_\_\_

5.4 Number of employees (race and gender) \_\_\_\_\_

5.5 Current Main Customers and Contact Details:

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**6. Proprietors/Shareholders/Partners/Sole Proprietors/Trustees/Beneficiaries (Owner)**

(Proof of disability provided by a recognized related institution, in the case of handicapped persons must be supplied)

NAME	ID	SA CITIZEN Y/N	SA CITIZEN BEFORE 27 APRIL 1994 Y/N	CAPACITY	% OWNERSHIP	MALE / FEMALE	HANDICAPPED Y / N	HDI Y/N	RACE	% OF TIME DEVOTED TO THE FIRM

**BUSINESS INFORMATION**

THE FOLLOWING TABLE MUST BE COMPLETED IN ORDER TO ESTABLISH WHETHER A BUSINESS CAN BE CLASSIFIED AS AN SMME IN TERMS OF THE NATIONAL SMALL BUSINESS ACT 102 OF 1996. SELECT THE SECTOR AND TICK THE APPROPRIATE BLOCKS IN COLUMN 3, 4 AND 5.

<b>COLUMN 1</b>	<b>COLUMN 2</b>	<b>COLUMN 3</b>		<b>COLUMN 4</b>		<b>COLUMN 5</b>	
<b>Sector or sub-sectors in accordance with the Standard Industrial Council</b>	<b>Size or Class</b>	<b>Total full time equivalent of paid employees: Less than TICK WHERE APPLICABLE</b>		<b>Total annual turnover: Less than than TICK WHERE APPLICABLE</b>		<b>Total gross asset value (fixed property excluded): Less than TICK WHERE APPLICABLE</b>	
<b>Agriculture</b>	<b>Medium</b>	120		<b>R4.00 m</b>		<b>R4.00m</b>	
	<b>Small</b>	50		<b>R2.00 m</b>		<b>R2.00m</b>	
	<b>Very Small</b>	10		<b>R0.40 m</b>		<b>R0.40m</b>	
	<b>Micro</b>	5		<b>R0.15 m</b>		<b>R0.10m</b>	
<b>Mining and Quarrying</b>	<b>Medium</b>	200		<b>R30.00 m</b>		<b>R18.00m</b>	
	<b>Small</b>	50		<b>R7.50 m</b>		<b>R4.50m</b>	
	<b>Very Small</b>	20		<b>R3.00 m</b>		<b>R1.80m</b>	
	<b>Micro</b>	5		<b>R0.15 m</b>		<b>R0.10m</b>	
<b>Manufacturing</b>	<b>Medium</b>	200		<b>R40.00m</b>		<b>R15.00m</b>	
	<b>Small</b>	50		<b>R10.00 m</b>		<b>R3.75m</b>	
	<b>Very Small</b>	20		<b>R4.00m</b>		<b>R1.50m</b>	
	<b>Micro</b>	5		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Electricity, Gas and Water</b>	<b>Medium</b>	200		<b>R40.00m</b>		<b>R15.00m</b>	
	<b>Small</b>	50		<b>R10.00m</b>		<b>R3.75m</b>	
	<b>Very Small</b>	20		<b>R4.00m</b>		<b>R1.50m</b>	
	<b>Micro</b>	5		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Construction</b>	<b>Medium</b>	200		<b>R20.00m</b>		<b>R4.00m</b>	
	<b>Small</b>	50		<b>R5.00m</b>		<b>R1.00m</b>	
	<b>Very Small</b>	20		<b>R2.00m</b>		<b>R0.40m</b>	
	<b>Micro</b>	5		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Retail and Motor Trade and Repair Services</b>	<b>Medium</b>	150		<b>R30.00m</b>		<b>R5.00m</b>	
	<b>Small</b>	50		<b>R15.00m</b>		<b>R2.50m</b>	
	<b>Very Small</b>	20		<b>R3.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	5		<b>R.0.15m</b>		<b>R0.10m</b>	
<b>Wholesale Trade</b>	<b>Medium</b>	150		<b>R50.00m</b>		<b>R8.00m</b>	
	<b>Small</b>	50		<b>R25.00m</b>		<b>R4.00m</b>	
	<b>Very Small</b>	20		<b>R5.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	5		<b>R0.15m</b>		<b>R0.10m</b>	



<b>Commercial Agents and Allied Services</b>	<b>Medium</b>	<b>150</b>		<b>R50.00m</b>		<b>R8.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R25.00m</b>		<b>R4.00m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R5.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Catering</b>	<b>Medium</b>	<b>150</b>		<b>R10.00m</b>		<b>R2.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R5.00m</b>		<b>R1.00m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R1.00m</b>		<b>R0.20m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Transport</b>	<b>Medium</b>	<b>150</b>		<b>R20.00m</b>		<b>R5.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R10.00m</b>		<b>R2.50m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R2.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Storage</b>	<b>Medium</b>	<b>150</b>		<b>R20.00m</b>		<b>R5.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R10.00m</b>		<b>R2.50m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R2.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Communications</b>	<b>Medium</b>	<b>150</b>		<b>R20.00m</b>		<b>R5.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R10.00m</b>		<b>R2.50m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R2.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Finance</b>	<b>Medium</b>	<b>150</b>		<b>R20.00m</b>		<b>R4.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R10.00m</b>		<b>R2.00m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R2.00m</b>		<b>R0.40m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Business Services</b>	<b>Medium</b>	<b>150</b>		<b>R20.00m</b>		<b>R4.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R10.00m</b>		<b>R2.00m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R2.00m</b>		<b>R0.40m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Community</b>	<b>Medium</b>	<b>150</b>		<b>R10.00m</b>		<b>R5.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R5.00m</b>		<b>R2.50m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R1.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	
<b>Social and Personal Services</b>	<b>Medium</b>	<b>150</b>		<b>R10.00m</b>		<b>R5.00m</b>	
	<b>Small</b>	<b>50</b>		<b>R5.00m</b>		<b>R2.50m</b>	
	<b>Very Small</b>	<b>20</b>		<b>R1.00m</b>		<b>R0.50m</b>	
	<b>Micro</b>	<b>5</b>		<b>R0.15m</b>		<b>R0.10m</b>	



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7. PREVIOUS EXPERIENCE RELATED TO YOUR CORE BUSINESS (IF APPLICABLE)

EMPLOYER	CONTACT	CONTRACT VALUE IN RAND	COMPLETED SUCCESSFULLY Y / N	YEAR

8. PLEASE INDICATE ANY OWNER WHO HAS A CONTROLLING OWNERSHIP INTEREST IN ANOTHER BUSINESS.

NAME OF OWNER	NAME AND ADDRESS OF OTHER BUSINESS	POSITION HELD	% OF OWNERSHIP	TYPE OF BUSINESS

9. IDENTIFY BY NAME, HDI STATUS AND LENGTH OF SERVICE, THOSE INDIVIDUALS IN THE FIRM (INCLUDING OWNERS AND NON OWNERS) RESPONSIBLE FOR DAY TO DAY MANAGEMENT AND BUSINESS DECISIONS.

	NAME	HDI STATUS Y / N	LENGTH OF SERVICE (YEARS)
CHEQUE SIGNING			



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SIGNING & CO – SIGNING FOR LOANS			
BUSINESSS FINANCING (OVERDRAFT, LEASE AGREEMENT)			
SURETIES			
APPROVAL MAJOR PURCHASES OR ACQUISITIONS			
SIGNING CONTRACTS			

10. DECLARATION OF INTEREST

10.1 Any legal person, including persons employed by the state\*, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of invitation to bid (includes a price quotation, advertised competitive bid, limited bid or proposal). In view of possible allegations of favoritism, should the resulting contract, 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 supplier or his/her authorized representative declare his/her position in relation to the evaluating/adjudicating authority and/or take an oath declaring his/her interest, where-

- the shareholder 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 on the bid(s) quotations, 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 / quotation.

10.2 **In order to give effect to the above, the following questionnaire must be completed and submitted with the application for registration on ITAC's suppliers' database:**

10.2.1 Full Name of business' representative: .....

10.2.2 Identity Number: .....

10.2.3 Position occupied in the Company (director, shareholder etc.): .....

10.2.4 Company Registration Number: .....

10.2.5 Tax Reference Number: .....

10.2.6 VAT Registration Number: .....

10.2.7 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 11 below.



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\* "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

"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.

10.2.8 Are you or any person connected with the business presently employed by the state? **YES / NO**

10.2.8.1 If so, furnish the following particulars:

Name of person / director / shareholder / member: .....

Name of state institution to which the person is connected: .....

Position occupied in the state institution: .....

Any other particulars:

.....

.....

.....

10.2.8.2 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**

10.2.8.3 If yes, did you attached 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.

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





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.....  
.....

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

10.2.8.6 If so, furnish particulars:  
.....  
.....  
.....

10.2.8.7 Do you, or any person connected with the business, have any **YES / NO**  
relationship (family, friend, other) with a person employed by  
the state and who may be involved with the evaluation and or  
adjudication of bids / quotations?

10.2.8.8 If so, furnish particulars:  
.....  
.....  
.....

10.2.8.9 Are you, or any person connected with the business, **YES / NO**  
Aware of any relationship (family, friend, other) between the  
Business and any person employed by the state who may be  
involved with the evaluation and or adjudication of bids /  
quotations?

10.2.8.10. If so, furnish particulars:  
.....  
.....  
.....

10.2.8.11 Do you or any of the directors / shareholders / members of the **YES / NO**  
company have any interest in any other related companies  
whether or not they are registered on ITAC's suppliers'  
database?

10.2.8.12 If so, furnish particulars:  
.....  
.....



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11. **Full details of directors / trustees / members / shareholders.**

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

**DECLARATION**

I, THE UNDERSIGNED (NAME) .....

CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 10.2.1 TO 10.2.8.12 ABOVE IS CORRECT.

I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 23 OF THE GENERAL CONDITIONS OF CONTRACT SHOULD THIS DECLARATION PROVE TO BE FALSE.

.....  
Signature

.....  
Date

.....

.....





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Position

Name of business

12 VERIFICATION OF INFORMATION SUPPLIED RELATING TO PREFERENCES THAT THE APPLICANT (BUSINESS) MAY APPLY FOR

**I/WE THE UNDERSIGNED WARRANTS THAT I/WE ARE DULY AUTHORISED TO SIGN ON BEHALF OF THE SUPPLIER, CERTIFIES THAT THE INFORMATION SUPPLIED IN TERMS OF THIS DOCUMENT INCLUDING THE ANNEXURE/S WITH ADDITIONAL INFORMATION, IS CORRECT AND ACCURATE AND ACKNOWLEDGES THAT:**

1. The supplier will be required to furnish documentary proof of the information relating to preference, if requested to do so.
2. If the information supplied is found to be incorrect ITAC may, in addition to any remedies it may have:
  - i. Disqualify the supplier for a particular contract/project it may be considered for, or which had been awarded to the supplier;
  - ii. Recover from the supplier all costs, losses or damages incurred or sustained by ITAC as a result of breach of contract;
  - iii. Cancel the contract and claim any damages which ITAC may suffer by having to make less favorable arrangements after such cancellation: and / or;
  - iv. De-register the supplier registered on the Supplier Database

SIGNED ON THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_\_

AT \_\_\_\_\_ BEFORE THE COMMISSIONER OF OATHS.

\_\_\_\_\_  
SIGNATURE OF AUTHORISED REPRESENTATIVE

\_\_\_\_\_  
NAME IN BLOCK LETTERS

SUPPLIER'S NAME: \_\_\_\_\_

Singed and affirmed to, before me at, \_\_\_\_\_ on this \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_, by the deponent who has acknowledged that he / she knows and understands, the contents of this document, and he / she has acknowledged that he / she has no objection to affirming, that he / she regards the affirmation to be binding on his / her conscience.

COMMISSIONER OF OATHS \_\_\_\_\_

FULL NAME: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

CAPACITY: \_\_\_\_\_

AREA: \_\_\_\_\_