

PIKITUP SUPPLIER REGISTRATION APPLICATION FORM



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Enquiries to:

Supply Chain Management Department

Cnr Bertha and Juta Streets Braamfontein

2017

Telephone: (011) 712 5225 / 5200

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PIKITUP Supplier Registration Application Form

This application form must be completed by suppliers in order to register suppliers on the PIKITUP vendor management system. In order for your application to be processed, the following documentation MUST accompany this form, failing which, your application will not be considered. Please DO NOT submit CDs or video tapes with this form.

DOCUMENT REQUIRED	CATEGORY OF SUPPLIER	TICK THE RELEVANT BOX INDICATING SUBMISSION OF THE REQUIRED DOCUMENTS
Original cancelled cheque or stamped letter from the bank, verifying the banking details of your business	All suppliers	
Certified copy of your business registration documents if you are incorporated as a partnership, close corporation or a company	All suppliers	
Certified copies of the ID documents of partners, members, directors/shareholders and sole proprietors as is applicable	All suppliers	
A valid and original tax clearance certificate	All suppliers	
A valid original or certified copy of your entity's UIF certificate or an official letter to this effect	All suppliers who are employers in terms of the Unemployment Insurance Act 63 of 2001 as amended	
A valid original or certified copy of your entity's Compensation for Occupational Injuries and Diseases (COIDA) certificate or an official letter to this effect	All suppliers who are employers in terms of the Compensation for Occupational Injuries and Diseases Act 130 of 1993 as amended (COIDA)	
A copy of the CIDB (Construction Industry Development Board) certificate stating the expiry date and the relevant trade registration code(s). NB: You can contact the CIDB on +27 12 482 7200 or +27 086 100 CIDB, or visit www.cidb.org.za for information and registration. You are also required to obtain the document entitled "Code of Conduct for all parties engaged in construction procurement" from the CIDB.	All suppliers whose services constitute construction and /or engineering works in terms of the Construction Industry Development Board Act 38 of 2000 and its Procurement Regulations	
Proof of professional registration or a certified copy of any other registration certificate pertaining to your relevant industry, e.g. ECB (Electrical Contractors Board)	All suppliers, where applicable	
Where applicable, a valid original or certified copy of your entity's B-BBEE ratings certificate issued by a SANAS accredited verification agency or a registered auditor approved by the Independent Regulatory Board of Auditors or an Accounting Officer as contemplated in the Close Corporation Act and/or confirmation from qualified auditor(s) as proof of an Exempted Micro Enterprise	All suppliers whose turnover exceeds R5 million and SMME's	
A certified copy of the entity's municipal statement/account dated within the last three months or a signed certified copy of the Lease agreement (if renting/leasing) whichever is applicable	All suppliers	
Declaration of interest forms including MBD 4 & MBD8 must be filled-in and signed by the business owner; the CEO or Chairman of the entity as is applicable	All suppliers	
Valid original or certified copy(s) of Professional/Trade certificate(s) and accreditation(s)	All suppliers, where applicable	
A brief business profile also stating all contact details including physical and postal address	All suppliers	
An Affidavit from the Police Confirming disability	Disabled Shareholders/members	

SECTION B: BUSINESS BANKING DETAILS

Banking details

Name of Account Holder	<input type="text"/>			
Bank Name	<input type="text"/>			
Branch Name	<input type="text"/>			
Branch Code	<input type="text"/>			
Account Number	<input type="text"/>			
Account Type	<table border="1"> <tr> <td><input type="checkbox"/> Cheque</td> <td><input type="checkbox"/> Savings</td> <td><input type="checkbox"/> Transmission</td> </tr> </table>	<input type="checkbox"/> Cheque	<input type="checkbox"/> Savings	<input type="checkbox"/> Transmission
<input type="checkbox"/> Cheque	<input type="checkbox"/> Savings	<input type="checkbox"/> Transmission		

Authorisation of electronic transfer of Funds (EFT) to supplier's bank account

I, the undersigned, hereby authorise PIKITUP to credit my business account via Electronic Fund Transfer as aforementioned with the amount payable / due to specified beneficiary for goods and services rendered. I also confirm that my banking details are true and correct and undertake to advise Pikitup in writing of any changes thereto

Signature _____

Name _____

Capacity _____

Date _____

For Completion by your Bank

Bank Stamp

I certify that I am duly authorised by _____ to give such information and that such information is correct.

Signature _____

Name of Authorised Official _____

Date _____

SECTION C: PRODUCTS AND SERVICES

Please tick a MAXIMUM OF 5 products and services your business CAN supply or render to PIKITUP. Refrain from ticking products and services that you have no capacity or competence or experience in supplying or rendering

1	130/240LT BINS	58	CONTRACTORS: PAVING
2	ADVERTISING AND PUBLISHING SERVICES	59	CONTRACTORS: PLUMBING
3	AUDIO & AUDIO VISUAL	60	CONTRACTORS: PROJECT MANAGEMENT
4	BIN LINERS	61	CORPORATE GIFTS
5	BIN SPARES(WHEELS, Axles & LIDS)	62	CORPORATE WARE
6	BUILDING MAINTENANCE & RENOVATIONS	63	CROCKERY AND CUTTLERY
7	CATERING SERVICES: Halaal <input type="checkbox"/> Non-Halaal <input type="checkbox"/>	64	DIGITAL WEATHER STATIONS
8	COMMUNICATION SERVICES	65	EMPLOYEES WELLNESS & REHABILITATION SERVICES
9	COMPUTER CONSUMABLES	66	ENTERTAINMENT SERVICES
10	CONSTRUCTION	67	ENVIRONMENTAL SERVICES
11	CONSULTING: ACCOUNTING	68	HOTEL TRAVEL AND CONFERENCE SERVICES
12	CONSULTING: ARCHITECTURAL	69	EVENT MANAGEMNT SERVICES
13	CONSULTING: AUDITING/FORENSICS	70	HARDWARE MATERIALS
14	CONSULTING: CHEMICAL ENGINEERING	71	FIREFIGHTING EQUIPMENT
15	CONSULTING: CIVIL ENGINEERING	72	FLEET MANAGEMENT SERVICES
16	CONSULTING: ELECTRICAL ENGINEERING	73	FOOD AND BEVERAGE
17	CONSULTING: ENVIRONMENTAL	74	GAS & EQUIPMENT
18	CONSULTING: FINANCIAL SERVICES	75	CASUAL LABOUR BROKERAGE
19	CONSULTING: HR SERVICES	76	HYDROLOGICAL INVESTIGATIONS
20	CONSULTING: IT SERVICES	77	HYGIENE & SANITARY
21	CONSULTING: LEGAL SERVICES	78	INCINERATOR
22	CONSULTING: MANAGEMENT/BUSINESS	79	FACILITY MAINTENANCE SERVICES
23	CONSULTING: QUANTITY SURVEYOR	80	FUELS & LUBRICANTS
24	CONSULTING: SUPPLY CHAIN MANAGEMENT SERVICES	81	INDUSTRIAL AND STREET CLEANING SERVICES
25	CONSULTING: SURVEYING	82	FURNITURE
26	CONSULTING: TRANSPORTATION PLANNING	83	GARDENING SERVICES
27	CONSULTING: WASTE MANAGEMENT & DISPOSAL	84	GARDENING EQUIPMENT
28	CONTRACTOR: AIR CONDITIONING SERVICES	85	INDUSTRIAL RELATION SERVICES & PRACTITIONERS
29	CONTRACTOR: WASTE COLLECTION AND RECYCLING	86	INSECTICIDES SUPPLIES
30	CONTRACTOR: WASTE MANAGEMENT & DISPOSAL	87	INSURANCE SERVICES
31	CONTRACTORS: AUCTIONEERS	88	IT HARDWARE & SOFTWARE SUPPLY
32	CONTRACTORS: CIVIL ENGINEERING	89	LOCKSMITH SERVICES
33	CONTRACTORS: CLEANING SERVICES	90	MEDIA SERVICES
34	CONTRACTORS: DEMOLITION	91	MEDICAL SURVEILANCE SERVICES
35	CONTRACTORS: EFFLUENT CONTROL AND TREATMENT	92	MEDICINES
36	CONTRACTORS: ELECTRICAL	93	OFFICE CLEANING SERVICES
37	LITTER BIN	94	CONVEYORS

SECTION D: BROAD BASED BLACK ECONOMIC EMPOWERMENT (BBBEE) COMPLIANCE

1 Direct empowerment

1.1 Ownership

Name	ID	Race		Citizenship	Gender	Disabled	%Shareholding		
		White	Black				Women	BEE	Total

NB: For Gender indicate **M** for Male and **F** for Female. For Disability please indicate **Yes or No**.

If you are disabled, please submit an Affidavit from the Police confirming your disability and the nature.

1.2 Voting Rights

- 1.2.1 What percentage voting rights is controlled by blacks? % control
- 1.2.2 What percentage voting rights is controlled by black women? % control
- 1.2.3 What percentage economic interest is held by blacks?¹ %
- 1.2.4 What percentage economic interest is held by black women? %
- 1.2.5 What percentage economic interest is held by black designated groups or black deemed participants in distribution schemes or employee schemes %

¹ Economic interest means a member's entitlement to receive any payment from an enterprise which rises by virtue of the member's holding an equity



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SECTION E: SUPPLIER PROFILE

In order for PIKITUP to build up a profile of its suppliers, we would like you to complete the following:

Commercial	
Name 3 commercial references/referees of previous projects / contracts and provide their name(s) and telephone number(s): _____ _____ _____	
Financial	
Has your business ever been declared insolvent or had a judicial management order granted against it? <input type="radio"/> YES <input type="radio"/> NO If yes, please elaborate: _____ _____ _____	
Technical	
Is your business a permit holder under the South African National Standards (SANS)? <input type="radio"/> YES <input type="radio"/> NO If yes, indicate product(s) for which permits are held, including permit numbers _____ _____	
Are you working to accredited National or International Standards? <input type="radio"/> YES <input type="radio"/> NO If yes, indicate products and to which standards: _____	
Quality	
Does your business operate a Quality Management System which includes:	
• Quality policy and objectives <input type="radio"/> YES <input type="radio"/> NO	
• Document and record control system (e.g. proof of competence, minutes of meetings and references) <input type="radio"/> YES <input type="radio"/> NO	
• Procedure for non-conforming products / services <input type="radio"/> YES <input type="radio"/> NO	
• Procedure for corrective and preventative action <input type="radio"/> YES <input type="radio"/> NO	
Has your Quality Management System been assessed and certified by any Nationally or Internationally recognised accreditation body? <input type="radio"/> YES <input type="radio"/> NO If yes, please provide a copy of the certificate.	
Safety	N.B: A supplier or service provider should at all times adhere to the OSHACT and relevant prescripts.
Does your business have an Occupational Health and Safety Policy complying with the Occupational Health and Safety Act (Act 85 of 1993) (OHS Act) that clearly states overall health and safety objectives and commitment to improving health and safety performance? <input type="radio"/> YES <input type="radio"/> NO If yes, attach a copy of this policy.	
Are you registered with the Compensation Fund in terms of the Compensation for Occupational Injuries and Diseases Act (COIDA)? <input type="radio"/> YES <input type="radio"/> NO Registration number _____	
Has your business experienced any incident that resulted in a fatality or serious injury? <input type="radio"/> YES <input type="radio"/> NO If yes, provide details thereof.	

Has any non-conformances or prohibition notices been issued by the Department of Labour to your business on previous projects?

YES NO If yes, provide details thereof.

Do you maintain the integrity and safety of all health and safety related equipment and do you have an effective maintenance schedule?

YES NO If no, provide reasons?

Environmental

Do you have an Environmental Management System in place?

YES

NO

Does your facility routinely work with any hazardous substances?

YES

NO

Has your Environmental Management System been assessed and certified by any Nationally or Internationally recognised accreditation body? YES NO If yes, please provide a copy of the certificate.

Human Resources

How many full-time employees do you currently have? _____

How many part-time employees do you have? _____

Please provide an organogram of your overall business structure indicating all human resources within your business.

Facilities, Plant & Equipment

Please provide a summary of your plant and facilities: _____

Please attach a list detailing tools and equipment held by your business.

CIDB Declaration:

I confirm that I have read the document entitled "Code of Conduct for all parties engaged in construction procurement" and will abide by it.

YES

NO

NA

SECTION F: DECLARATION OF INTERESTS

Are you or any other person who holds an interest in your business (i.e. a shareholder, a director, or a member or partner, a line manager, or a fellow employee), employed by PIKITUP or serves as a director at PIKITUP, or was previously employed by PIKITUP or served as a director at PIKITUP? YES NO

If **yes**, state particulars.

Are you, or any other person who holds an interest in your business, a close family member (i.e. related by birth, marriage, domestic partnership, adoption, guardianship or the like) to or an associate (i.e. a friend, rival, business partner, neighbour, etc) of an PIKITUP employee and/or director? YES NO

If **yes**, state particulars.

Have you, or any other person who holds an interest in your business, given a business courtesy to or received a business courtesy from an PIKITUP employee and/or director over the last 12 (twelve) months? YES NO

If **yes**, state particulars.

Have you, or any other person who holds an interest in your business undergone PIKITUP supplier disciplinary process and / or has been suspended from the PIKITUP supplier database over the last 5 (five) years? YES NO

If **yes**, state particulars.

Is your business currently engaged in defending any legal proceedings which have been instituted against it (including against any of its directors / members / partners), or has your business (including any directors / members / partners) either been charged with or been convicted of any criminal act, or has any judgment or decision been made against it by any administrative or regulatory body? YES NO

If **yes**, state particulars.

DECLARATION:

I, the undersigned [*insert full name of signatory*] _____, duly authorised to complete this application form in my capacity as [*insert capacity, i.e., member, director, partner, etc*] _____ on behalf of the applicant [*insert full name of the business entity*] _____ certify that, to the best of my knowledge, the information furnished herein is true and correct. I accept that PIKITUP reserves its right to act against the applicant or me personally in terms hereof, should this declaration prove to be false.

Name _____

Signature _____

Designation _____

Date _____

NOTE TO ALL SUPPLIERS:

PIKITUP (PIKITUP) reserves the right to verify and confirm any of the information provided on this application form. PIKITUP may request additional information during its tender evaluation process.

Incomplete submissions will not be processed. An incomplete submission will include failure to provide any supporting documentation required to be submitted with this form.

*If there are any changes to the information provided on this form, please inform the relevant contact person within PIKITUP's vendor management department within **7 (seven)** working days of such change. **Outdated information could lead to your business not being invited to tender or not receiving correct payment!***

NB: Bank information:

In all instances payment will be made via EFT directly into your bank account as per the banking details provided on this application form.

Should you change your banking details, you will once again be required to submit an original cancelled cheque or stamped letter from the bank, verifying these banking details.

All information provided by suppliers will be treated as strictly confidential

Terms and conditions

1. Pikitup strives to be as equitable as possible with its distribution of contracts and work but registration on its supplier database does not guarantee that any minimum amount of work will be given.
2. Suppliers and service providers who subject themselves to recurring non-conformance/ non-performance or sub-standard work will be penalized by Pikitup.
3. Pikitup may suspend the registration of a supplier for up to three (3) months in instances of non-performance.
4. Pikitup reserves the right to take relevant action against suppliers for non-disclosure, false declaration or misleading information.
5. Persons employed by the state (public sector) must not register on Pikitup's supplier data base through their directorships, managerial association or shareholding in business entities either directly or indirectly.
6. Horizontal trading/ Bid Rigging/ Collusive practices – Should suppliers, service providers or bidders be involved in horizontal trading/bid rigging or collusive practices or cover coating, they will be suspended from Pikitup's database and legal action can be instituted where necessary. Such suppliers may be listed on the National Treasury's list of restricted suppliers.
7. Suppliers, service providers and bidders who are listed on the National Treasury Restricted Supplier List must not list on Pikitup's supplier database.
8. Should a prospective supplier, service provider or bidder be awarded any contract or work by Pikitup, that supplier, service provider or bidder will be required to complete and comply with Pikitup's Safety Health Environmental declaration form before the commencement of the contract or work
9. Pikitup reserves the right to cancel contracts and take remedial action against any supplier, service provider, bidder or entity who contravenes any of Pikitup's rules and regulations.
10. Service providers/ Suppliers must comply with the Pikitup Code of Ethics.
11. The supply chain management policy and procedures of Pikitup will govern the procurement of goods/ works and services.
12. Pikitup reserves the right not to register any supplier/ service provider.
13. Suppliers and service providers shall ensure that the products and services provided are of the right quality and meet the minimum performance requirements.
14. Should suppliers / services providers fail to honor the stipulated delivery / lead times and performance standards, Pikitup reserves the right to cancel the order and/ or contract with all its rights being reserved.

MBD 4

DECLARATION OF INTEREST

1. No bid will be accepted from persons in the service of the state¹.

ANNEXURE C

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 In order 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, shareholder²):.....

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.

.....

¹MSCM Regulations: "in the service of the state" means to be –

(a) a member of –

- (i) any municipal council;
- (ii) any provincial legislature; or
- (iii) the national Assembly or the national Council of provinces;

(b) a member of the board of directors of any municipal entity;

(c) an official of any municipality or municipal entity;

(d) an employee of 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);

(e) a member of the accounting authority of any national or provincial public entity; or

(f) an employee of Parliament or a provincial legislature.

² Shareholder" means a person who owns shares in the company and is actively involved in the management of the company or business and exercises control over the company.

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

3.10.1 If yes, furnish particulars.
.....
.....

.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
.....
.....

.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.
.....
.....

.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.
.....
.....

.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 bidding for this contract. YES / NO

3.14.1 If yes, furnish particulars:
.....
.....

Full details of directors / trustees / members / shareholders.

Full Name	Identity Number	State Employee Number

.....

Signature

.....

Capacity

.....

Date

.....

Name of Bidder

MBD 8

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.**

Item	Question	Yes	No
4.1	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). The Database of Restricted Suppliers now resides on the National Treasury's website(www.treasury.gov.za) and can be accessed by clicking on its link at the bottom of the home page.	Yes	No
4.1.1	If so, furnish particulars:		
4.2	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 (www.treasury.gov.za) by clicking on its link at the bottom of the home page.	Yes	No
4.2.1	If so, furnish particulars:		
4.3	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?	Yes	No

4.3.1	If so, furnish particulars:		
Item	Question	Yes	No
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

