The Knysna Municipality is inviting quotations from suitable service providers for the services described below.

**Category:** Educational

<table>
<thead>
<tr>
<th align="right">ADVERTISEMENT DATE:</th>
<th align="right">08/09/2018</th>
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</thead>
<tbody>
<tr>
<td align="right">QUOTATION NUMBER:</td>
<td align="right">B704/2017/18</td>
</tr>
</tbody>
</table>
| QUOTATION DOCUMENTS ARE OBTAINABLE FROM: | Company: Knysna Municipality  
Contact Person: Vuyolwethu Nobatana  
Email: vnobatana@knysna.gov.za  
Tell: 044 3026438 |
| CLOSING DATE: | 12 March 2018 |
| TIME: | 12h00 |
| SUBMISSIONS: | Sealed quotations clearly marked, “B704/2017/18 Educational Theatre Show for Water Week 2018”, can be submitted:  
By hand to: Scm Dept.-Knysna Municipality  
By email to: vnobatana@knysna.gov.za  
Contact person: Vuyolwethu Nobatana  
Electronic bid documents must reach SCM office before the closing time |
| COMPULSORY REQUIREMENTS: | None |
| TECHNICAL ENQUIRIES: | Company: Knysna Municipality  
Contact Person: Pamela Booth  
Email: pbooth@knysna.gov.za  
Tell: 044 302 6371 |

The following conditions will apply:

- Price(s) quoted must be valid for at least thirty (30) days from date of your offer.
- Price(s) quoted must be firm and must be inclusive of VAT when applicable.
- Price must include all related expenses, i.e. transport, accommodation etc.
- Bidders must insist on an official order number.
- Only an official order will bind the Council.

The Knysna Municipality is implementing an online purchasing management system. This system allows vendors to register online, receive automated alerts via e-mail and will eventually allow vendors to submit bids electronically. All opportunities >R30 000 (RFQ’s and Tenders) are processed through our online system. To register go to www.knysna.gov.za – Council adverts – Supply Chain Management – SCM e-mail list – complete info and click on submit form. Enquiries may be directed to: nmlisana@knysna.gov.za

#### DESCRIPTION OF ITEM

<table>
<thead>
<tr>
<th>ITEM</th>
<th>SHORT DESCRIPTION</th>
<th>QTY</th>
<th>Unit price</th>
<th>AMOUNT ( R ) EXCL VAT</th>
</tr>
</thead>
</table>
| 1    | • Performance of three (3) interactive theatre shows for National Water Week on Monday 26 March 2018  
• National Water Week Theme – Access to safe water by 2030, possible through nature  
• Shows to be performed at three Primary schools in the Knysna Area  
• Approximately 45 minutes per performance  
Educational subjects that must be incorporated:  
1. Importance and value of water  
2. Water conservation  
3. Guidelines on water saving at home and school  
4. Dangers of polluted water and how to help prevent pollution | 3   |            |               |

Sub total | R

14% VAT (if VAT registered) | R

TOTAL | R
**Invitation to Bid**

**YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF MUNICIPALITY/ MUNICIPAL ENTITY)**

<table>
<thead>
<tr>
<th><strong>BID NUMBER</strong></th>
<th><strong>CLOSING DATE</strong></th>
<th><strong>CLOSING TIME</strong></th>
</tr>
</thead>
</table>

**DESCRIPTION**

THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7).

BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)

<table>
<thead>
<tr>
<th><strong>SUPPLIER INFORMATION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>NAME OF BIDDER</strong></td>
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<tr>
<td><strong>POSTAL ADDRESS</strong></td>
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<tr>
<td><strong>STREET ADDRESS</strong></td>
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<tr>
<td><strong>TELEPHONE NUMBER</strong></td>
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<td><strong>CELLPHONE NUMBER</strong></td>
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<td><strong>FACSIMILE NUMBER</strong></td>
</tr>
<tr>
<td><strong>E-MAIL ADDRESS</strong></td>
</tr>
<tr>
<td><strong>VAT REGISTRATION NUMBER</strong></td>
</tr>
<tr>
<td><strong>TAX COMPLIANCE STATUS</strong></td>
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<tr>
<td><strong>TCS PIN:</strong></td>
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<tr>
<td><strong>OR</strong></td>
</tr>
<tr>
<td><strong>CSD No:</strong></td>
</tr>
</tbody>
</table>

B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE [TICK APPLICABLE BOX]

Yes

No

B-BBEE STATUS LEVEL SWORN AFFIDAVIT

Yes

No

[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/ SWORN AFFIDAVIT (FOR EMES & QSES) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]
<table>
<thead>
<tr>
<th>ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED?</th>
<th>☐ Yes ☐ No [IF YES ENCLOSE PROOF]</th>
<th>ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES /WORKS OFFERED?</th>
<th>☐ Yes ☐ No [IF YES, ANSWER PART B:3 ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL NUMBER OF ITEMS OFFERED</td>
<td>TOTAL BID PRICE</td>
<td>R</td>
<td></td>
</tr>
<tr>
<td>SIGNATURE OF BIDDER</td>
<td>DATE</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CAPACITY UNDER WHICH THIS BID IS SIGNED</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO: TECHNICAL INFORMATION MAY BE DIRECTED TO:

<table>
<thead>
<tr>
<th>DEPARTMENT</th>
<th>CONTACT PERSON</th>
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</thead>
<tbody>
<tr>
<td>CONTACT PERSON</td>
<td>TELEPHONE NUMBER</td>
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<tr>
<td>TELEPHONE NUMBER</td>
<td>FACSIMILE NUMBER</td>
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<tr>
<td>FACSIMILE NUMBER</td>
<td>E-MAIL ADDRESS</td>
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<tr>
<td>E-MAIL ADDRESS</td>
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</tbody>
</table>
1. **BID SUBMISSION:**

1.1. **BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.**

1.2. **ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED—(NOT TO BE RE-TYPED) OR ONLINE**

1.3. **THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.**

2. **TAX COMPLIANCE REQUIREMENTS**

2.1. **BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.**

2.2. **BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VIEW THE TAXPAYER’S PROFILE AND TAX STATUS.**

2.3. **APPLICATION FOR THE TAX COMPLIANCE STATUS (TCS) CERTIFICATE OR PIN MAY ALSO BE MADE VIA E-FILING. IN ORDER TO USE THIS PROVISION, TAXPAYERS WILL NEED TO REGISTER WITH SARS AS E-FILERS THROUGH THE WEBSITE [WWW.SARS.GOV.ZA](http://WWW.SARS.GOV.ZA).**

2.4. **FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B:3.**

2.5. **BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.**

2.6. **IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.**

2.7. **WHERE NO TCS IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.**

3. **QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS**

3.1. **IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?**

   [ ] YES  [ ] NO

3.2. **DOES THE ENTITY HAVE A BRANCH IN THE RSA?**

   [ ] YES  [ ] NO

3.3. **DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?**

   [ ] YES  [ ] NO

3.4. **DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?**

   [ ] YES  [ ] NO

3.5. **IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?**

   [ ] YES  [ ] NO

**IF THE ANSWER IS “NO” TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 ABOVE.**

**NB: FAILURE TO PROVIDE ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**

**NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE.**

**SIGNATURE OF BIDDER:** …………………………………………………

**CAPACITY UNDER WHICH THIS BID IS SIGNED:** …………………………………………………
DECLARATION OF INTEREST

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

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.

²Shareholder” 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. ...............................................................

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 bidding for this contract.  

YES / NO

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

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Identity Number</th>
<th>State Employee Number</th>
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……………………………………………………………………………………………………

Signature                                                                    Date

……………………………………………………………………………………………………

Capacity                                                                    Name of Bidder

……………………………………………………………………………………………………

Contact number