



BELA-BELA LOCAL MUNICIPALITY

58 Chris Hani Drive, Bela- Bela, Limpopo.

Private Bag x 1609, BELA-BELA 0480

Tel: 014 736 8000 Fax : 014 736 3288

Website: [www .belabela.gov.za](http://www.belabela.gov.za)

OFFICE OF THE BUDGET & TREASURY

FORMS

APPLICATION TO BE REGISTERED AS A VENDOR IN THE MUNICIPALITY'S DATABASE

2017/2018

Bela-Bela Local Municipality, in terms of Circular No. 81 of the Municipal Finance Management Act No 56 of 2003, hereby invites all service providers to register as Vendors on the municipality's Data-Base.

Service Providers are also reminded to register on the National Treasury's Web-Based Central Supplier Database (CSD) by using the following link: www.csd.gov.za

The Central Supplier Database (CSD) is a single database that serves as a source of all supplier information for all spheres of government.

All suppliers will require the following information to complete the registration on-line:

An active email address/ Cell phone number/ Identity number/ Company registration number and a tax reference number.

Service providers should take note that no bid/ service will be awarded to a supplier who is not registered on Web Based Central Supplier Database (CSD) as from 1 July 2016.

FOR OFFICE USE ONLY

NAME OF THE SUPPLIER:

REGISTRATION NUMBER:

DATE RECEIVED:

AMOUNT PAID: **R100-00**..... RECEIPT NO:

THE COMPLETED DATABASE REGISTRATION FORM MUST BE SUBMITTED TO:

BELA-BELA LOCAL
SUPPLY CHAIN MANAGEMENT UNIT
MAIN MUNICIPAL OFFICES
58 CHRIS HANI ROAD
BELA-BELA
0480

**PLEASE COMPLETE THE FORM FULLY – USE A BLACK
PEN PLEASE PRINT SO THAT ALL INFORMATION IS
LEGIBLE
FORMS THAT ARE NOT READABLE OR INCOMPLETE WILL NOT BE ACCEPTED**

**THE FOLLOWING DOCUMENTS MUST BE SUBMITTED TOGETHER WITH THE
APPLICATION FORM:**

1. Certified copy of company registration certificate
2. Valid original tax clearance certificate
3. Company profile
4. Report of Central Supplier Database Registration
5. BEE certificate
6. Original certified copies of Identity Documents of the members
7. Certification of registration or Compliance with Professional bodies, if applicable
8. Companies' and/or Directors' proof payment for the Municipal accounts (Rates & taxes) in their area of jurisdiction. (Not older than Three (3) Months and not in arrears for more than 90 days)

**NB: PLEASE KEEP COPIES OF DATABASE REGISTRATION FORM AND ALL
DOCUMENTS SUBMITTED FOR YOUR OWN RECORDS, BECAUSE NO
COPIES WILL BE MADE AVAILABLE BY THIS MUNICIPALITY**

1. BUSINESS INFORMATION

1.1. NAME OF THE BUSINESS

1.2. TRADING NAME

1.3. TYPE OF SERVICE (e.g. Catering)

NB: Service providers must specify a maximum of two (2) service specialty, which they wish to render to the municipality. Failure to comply with this principle will disqualify your application

1.4. POSTAL ADDRESS

<input type="text"/>
<input type="text"/>
<input type="text"/>
CODE:

1.5. PHYSICAL ADDRESS

<input type="text"/>
<input type="text"/>
<input type="text"/>
CODE:

1.6. TELEPHONE NUMBER

1.7. FAX NUMBER

1.8. CELL PHONE NUMBER

1.9. EMAIL ADDRESS

1.10. CONTACT PERSON

2. BUSINESS REGISTRATION DETAILS

2.1. TYPE OF BUSINESS

Tick whichever block that is applicable to your business and attached the relevant certified copy.

Public company Ltd	<input type="checkbox"/>	Certified copy of Certificate of Incorporation
Private Company (Pty) Ltd	<input type="checkbox"/>	Certified copy of Certificate of Incorporation
Close Corporation	<input type="checkbox"/>	Certified copy of CK
Partnership	<input type="checkbox"/>	Certified copy of Partnership Agreement
Sole Trader	<input type="checkbox"/>	Certified copy of ID document
Trust	<input type="checkbox"/>	Certified copy of Trust document
Other (specify)	<input type="checkbox"/>	

2.2. BUSINESS REGISTRATION NUMBER

2.3. VAT REGISTRATION NUMBER

2.4. INCOME REGISTRATION NUMBER

2.5. MUNICIPAL RATES AND TAXES ACCOUNT

NAME OF THE MUNICIPALITY

2.6. UIF REGISTRATION NUMBER

2.7. P.A.Y.E NUMBER

2.8. CENTRAL SUPPLIER DATABASE UNIQUE NUMBER

3. Business type

Please indicate the nature of operations, products or services applicable to your business by ticking the appropriate boxes with an X.

Categories	Mark (x)
Advertising	
Building Construction and Maintenance	
Catering	
Conference facilities	
Drilling and Testing of borehole Contractors	
Electrical Installation and Maintenance	
Event Management	
Transport	
Travel Agencies	
Stages and sounds	
Stationery	
Cleaning materials	
Printing and publication	
Gardening	
Supplier and repair of air conditioners	
IT equipments	
Branding	
Training Development	
Pest control and fumigation	
Survey, Town planning and environmental consultant	
Civil, Electrical and Mechanical Engineering consultants	
Civil, Electrical and Mechanical Engineering contractors	
Water tanks suppliers	
Welding	
Hardware Materials	
Traditional Dance	
OTHERS:	

OWNERSHIP INFORMATION

✓ Complete the following information for each partner, proprietor, shareholder, director and officer of the enterprise (namely; chairman, Director, Secretary, etc. (Tick as applicable)

Name	Capacity	ID No.	% owned

4. DISCLOSURE OF STATE/ DECLARATION OF INTEREST

4.1. Please indicate whether you or a Director, Manager, Principal Shareholders of your enterprise is/are or has been in service of the state i.e. Provincial or National Government, Thulamela Municipality or another municipality in the previous twelve months

If so, furnish particulars.

4.2. Please indicate whether your spouse, child, parents, brother or sister of a Director, Manager, Principal Shareholders of you enterprise is/are or has been in service of the state i.e. Provincial or National Government, Thulamela Municipality or another municipality in the previous twelve months

If so, furnish particulars.

NOTE: ANYONE IN THE SERVICE OF THE STATE IS PROHIBITED TO REGISTER ON THIS DATABASE

Municipal Supply Chain Management 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 Assembly or the national Council of provinces
- (b). a member of board of directors of any municipal entity;
- (c). an official of any municipal or municipal entity
- (d). an employee of any national, provincial department, national or provincial public entity or constitutional institution with the mean 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 an employee of parliament or provincial legislature
- (f). an employee of parliament or a provincial legislature

5. CERTIFICATION OF CORRECTNESS OF INFORMATION SUPPLIED IN THIS DOCUMENT

I/We, the undersigned, who warrants that he/she is duly authorized to do so, on behalf of the supplier, certify that the document including the additional information is correct and accurate and acknowledges that:

The supplier will be required to furnish documentary proof of the claims, if requested to do so.

If information supplied is found to be incorrect then the municipality may, in additions to any remedies to do so

(a). De-register the supplier on the suppliers' database

(b). Cancel the contract and claim any damages which the municipality may suffer by having to make less favourable arrangements after cancellation

Thus done and signed at On this
Day of20.....

.....
SIGNATURE FULL NAMES

In his/her capacity as of the
company.

BELA-BELA MUNICIPALITY BANKING DETAILS:

ACCOUNT NAME : BELA-BELA MUNICIPALITY
BANK : ABSA
ACCOUNT NO : 1330-000-062
TYPE OF ACC : CHEQUE
REF : COMPANY NAME

BELA-BELA LOCAL MUNICIPALITY: DATABASE REGISTRATION FORM