

ANNEXURE A - NOTE ON QUOTATIONS UP TO R30 000

RFQ NUMBER ALLOCATED BY THE DIRECTORATE/UNIT: e.g. GSSCM 001/2017 (This is for each individual unit's monitoring)

DESCRIPTION OF GOODS/SERVICES:

PANEL NUMBER (IF APPLICABLE):

	DESCRIPTION OF REQUIREMENTS	ATTACHED		IF NOT, STATE REASONS
		YES	NO	
1`	Is there a contract/Panel for the services being procured? If No , proceed with the RFQ and obtain at least three quotations from the database; If Yes, discard the RFQ process and procure against the contract/Panel.			
2	If procurement is from the panel, provide and attach proof that the request for quotation has been forwarded to all members of the panel OR in accordance with the rotation framework approved by the EAC. Must obtain a minimum of three quotations.			
3	Has at least Three quotations been obtained? Attach all quotations obtained. If not state the reasons and attach proof of RFQ sent to the suppliers and the respective quotations received.			
4	Is the award made to the lowest quote?			
5	Date when same goods or services were last procured by your Unit, date; Value and Name of service provider dd. _____ V _____ N _____ If the previous purchase plus the current is estimated to exceed R200 000 in the current financial year (July to June) when taking into account other departments that could have possibly procured similar services, a competitive bidding process must be followed. (This section need not be completed when procuring from a Panel)			
6	Business Registration Number of supplier <input type="text"/>			
7	CoJ Supplier Vendor Number: <input type="text"/> CSD Number: <input type="text"/>			

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8	<p>CSD confirmation that : (Copy of CSD validation must be attached)</p> <ul style="list-style-type: none"> -The Tax matters of the service provider are compliant -The Directors/Members/Partners/ Sole owners of the service provider are not in the service of the State - The service provider is not on the National Treasury's list of restricted suppliers - Confirmation from CoJ's HR that the Directors/Members/Partners/ Sole owners of the service provider are not in the service of CoJ <p><i>Under no circumstances should an appointment be made to a supplier whose Tax matters have not been confirmed to be in order, or in the service of the State or on the National Treasury's list of restricted suppliers.</i></p>																							
9	<p>Confirmation that there are no signs of cover quoting (i.e. no signs that the companies that submitted quotations have the same: directors, business address, Fax Number and other contact details, VAT number etc.)</p>																							
10	<p>Signed Declaration of Interest (MBD 4) must be attached</p> <p>(Not required when procuring from a panel)</p>																							
11	<p>Declaration of bidder's past Supply Chain Management Practices (MBD 8) must be attached</p> <p>(Not required when procuring from a Panel)</p>																							
12	<p>Certificate of independent proposal determination (MBD9)</p> <p>(Not required when procuring from a Panel)</p>																							
13	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%; text-align: center;">Names of Directors</th> <th style="width: 40%; text-align: center;">Identity Document Numbers</th> </tr> </thead> <tbody> <tr><td>1.</td><td></td></tr> <tr><td>2.</td><td></td></tr> <tr><td>3.</td><td></td></tr> <tr><td>4.</td><td></td></tr> <tr><td>5.</td><td></td></tr> <tr><td>6.</td><td></td></tr> <tr><td>7.</td><td></td></tr> <tr><td>8.</td><td></td></tr> <tr><td>9.</td><td></td></tr> </tbody> </table>				Names of Directors	Identity Document Numbers	1.		2.		3.		4.		5.		6.		7.		8.		9.	
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14	Copy of municipal services account for Company (NOT in arrears for more than 90 days) and not older than 3 months OR Municipal Account No (City of Johannesburg ONLY): (Attach confirmation from Group Revenue) (Not applicable when procuring from a Panel of Service Providers)			
15	Copy of municipal services account for all Directors (NOT more than 90 days in arrears) and not older than 3 months OR Municipal Account No (CoJ ONLY) : (Attach confirmation from Group Revenue) (Not applicable when procuring against a Panel of Service Providers)			
16	If the report is approved by an Acting HOD, proof of acting appointment OR Written delegation of authority must be attached.			

Comments:

1. Summary and Nature of goods or services procured

2. Financial Implications

3. Assessment of Quotation received

Name of Supplier	Price inclusive of VAT
1.	
2.	
3	

If Three quotations were not received, the reasons must be recorded and approved by the chief financial officer or an official designated by the chief financial officer.

Reasons for not receiving three quotes

Approved by GCFO or Delegated Authority:

Date :

Signature :

Recommendation:

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Processed By: _____

Date: _____

Signature: _____

Checked by Finance : _____

Date : _____

Signature : _____

Approved by H.O.D or Delegated Authority : _____

Date : _____

Signature : _____