

Checklist

TENDER / QUOTATION NUMBER: P25/24 (SQ)

| | Doc number | Description | Received | Submitted & Signed Please sign & complete on all pages |
|--|------------|--|----------|---|
| 1 | | Index | | |
| 2 | 740.62.6 | Invitation to Bid - SBD 1 | | Completed & signed on pg 2 |
| 3 | 740.46.2 | Standard Bid Conditions | | Completed on pg 1 7 & signed on pg 7 |
| 4 | 740.45.3 | Evaluation Criteria for Services | | Completed & signed on pg 1-6 |
| 5 | 740.42.6 | Declaration of interest – SBD 4 | | Completed on pg 1-4 & signed on pg 4 |
| 6 | 740.47.5 | Preference points claim form – SBD 6 | | Completed on pg 4-6 & signed on pg 6 |
| 7 | 740.48.3 | Declaration of bidder's past Supply Chain Management Practices – SBD 8 | | Completed on pg 1 + 2 & signed on pg 2 |
| 8 | 740.41.3 | Confirmation of Banking details | | Completed & signed |
| 9 | 740.49.3 | Certificate of Independent Bid Determination – SBD 9 | | Completed on pg 2 + 3 & signed on pg 3 |
| 10 | 740.43.8 | Application to register on database of service providers | | Completed on pg 1-8 & signed on pg 8 |
| DOCUMENTS REQUIRED | | | | |
| Valid Tax PIN (or proof of application) COMPULSORY | | | | |
| Valid B-BBEE certificate or proof of EME status | | | | |
| Latest municipal account (to confirm address + existence of provider, and any indebtedness to the state) | | | | |
| CIDB grading (if applicable) | | | | |
| Full CSD Report | | | | |

TAKE NOTE: Unsigned documents **will be** invalid.
It is the responsibility of the tenderer to check **expiry dates**.
The college **will not** re-request documents that have expired.

Representative Name: _____

Company: _____

Signature: _____

Date: _____