

67 Church Street, EmaXesibeni, 4735
Tel: +27 (0)39 254 6000
Fax: +27 (0) 39 255 0167
Web : www.umzimbubu.gov.za



UMZIMVUBU
— LOCAL MUNICIPALITY —

Dabula Street, Sophia, KwaBhaca
P/ Bag 9020, KwaBhaca, 5090
Tel: +27 (0)39 255 8500
Fax: +27 (0) 39 255 0167

SUPPLIER REGISTRATION FORM

Enquiries
Contact Supply Chain
Management Unit

Tel No: 039 255 8554/55/56

Email: scmu@umzimbubu.gov.za

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FOR OFFICIAL PURPOSE ONLY

THE FOLLOWING DOCUMENT MUST BE ATTACHED	Y	N	NA
Proof of banking details			
Ck Document			
Affidavit Confirming Disability(People with Disability)			
Proof of banking details			
ID copies for Shareholders			
CSD Report			
Catering Certificate(Catering Services)			

Received by:Date:

Signature:.....

NOTE:

SUPPLIERS PROVIDING FALSE OR FRAUDULANT INFORMATION OR DOCUMENTATION
SHALL SUBJECT THEMSELVES TO IMMEDIATE DISQUALIFICATION.

INCOMPLETE SUBMISSIONS WILL NOT BE PROCESSED. THIS INCLUDES THE SUPPORTING
DOCUMENTATION AS STIPULATED.

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UMZIMVUBU

LOCAL MUNICIPALITY

1. BUSINESS INFORMATION

Registered Business Name:

Trading name(if applicable):

Company Registration No:

Tax Reference Number:

VAT number:

MUNICIPAL WARD NUMBER IF THE COMPANY IS FROM AROUND THE UMZIMVUBU
MUNICIPALITY DEMARCATION/JURISDICTION:.....

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UMZIMVUBU
— LOCAL MUNICIPALITY —

Registered Business Address:

[illegible]

Code

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City

[illegible]

Province:

[illegible]

Telephone Number

[illegible]

Cell Number

[illegible]

Email Address

[illegible]

Title

--	--	--	--

Name

[illegible]

Surname

[illegible]

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4. PRODUCTS AND SERVICES OFFERED AS FOLLOWS

Commodity	Tick
Event Management	
Catering	
Tents	
Toilets	
Tables	
Chairs	
Decoration	
Stage	
Podium	
Sound System with Generator	
Transport	
Advertising	
Protective Clothing	
Stationary	
Cleaning Material	
Repairs and Maintenance of Municipal Facilities	
Travel and Accommodation	
General Supply and Delivery	
General Services	
Accommodation	
Construction	
Other Services offered(list below)	

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Enter the total number and the percentage shareholding who are in Ownership

Category	Number	% Shareholding
Race		
Youth		
Woman		
People with Disabilities		

List all Directors, Partners, Members, or Shareholders who are black in Management

Name	ID	Citizenship	Gender	Capacity



UMZIMVUBU

LOCAL MUNICIPALITY

DECLARATION OF INTEREST

Any person, having a relationship with persons in the service of the Umzimvubu Municipality, may apply to register. Disclosure is required in the interest of fairness and transparency.

1. Are you presently in the service of the Umzimvubu Municipality? YES/NO

If so, furnish particulars.

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2. Have you been in the service of the Umzimvubu Municipality for the past twelve months? YES/NO

If so, furnish particulars.

.....
.....

3. Do you have any close relationship (parent, child, or spouse) with persons in the service of the Umzimvubu Municipality? YES/NO

If so, furnish particulars.

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4. Are any spouse, child or parent of the company's directors, managers, principle shareholders or stakeholders in service of the Umzimvubu Municipality? YES/NO

If so, furnish particulars.

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CERTIFICATION

I, UNDERSIGNED (NAME) CERTIFY THAT THE
INFORMATION FURNISHED ON THIS DECLARATION FORM IS CORRECT. I ACCEPT THAT THE
UMZIMVUBU MUNICIPALITY MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE
FALSE.

Name.....

Position.....

Signature.....

Date.....