

**KWAZULU-NATAL PROVINCE**SPORT, ARTS AND CULTURE  
REPUBLIC OF SOUTH AFRICA**KWAZULU-NATAL PROVINCE**SPORT, ARTS AND CULTURE  
REPUBLIC OF SOUTH AFRICA**REQUEST FOR QUOTATION (RFQ)**

*The Department of Sport and Recreation in the Province of KwaZulu Natal hereby invites suitably qualified suppliers/and or services providers to submit quotations for the following bid(s):*

<b>Description of Goods /Services:</b>	<b>INSURANCE COVER NEEDED FOR:2022 DUNDEE JULY HORSE RACING:DUNDEE HORSE TRACK-ENDUMENI MUNICIPALITY,UMZINYATHI DISTRICT:16 JULY 2022.</b>		
<b>Quotation Number:</b>	<b>DSAC2572223</b>		
<b>Project Number:</b>	<b>OR/HO/2223/07/01</b>		
<b>Evaluation Criteria</b>	<b>Price Points: 80</b>	<b>BEE Points: 20</b>	<b>Functionality: N/A</b>
<b>Closing Date &amp; Time:</b>	<b>27 JUNE 2022 AT 11:00</b>		
<b>Service Required at/Delivery Address:</b>	<b>INSURANCE COVER AS PER SPECIFICATION FOR DUNDEE HORSE TRACK - ENDUMENI MUNICIPALITY, UMZINYATHI DISTRICT</b>		
<b>Technical enquiries:</b>	<b>Contact Name: SANDILE MBONANE Contact No. +27 73 057 0916</b>		
<b>General/SCM enquiries:</b>	<b>Contact Name: NHLANHLA NGUBANE Contact No. +27 82 966 4199</b>		



## KWAZULU-NATAL PROVINCE

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### TERMS AND CONDITION

1. The Department of Sport and Recreation requires the item(s)/service(s) described as per attached price quotation invitation, and you are requested to complete the documents and to submit it in accordance with the under-mentioned stipulations.
2. Request for Quotation (RFQ) documents are attached.
3. The KZN Department of Sports & Recreation reserves the right to award the quotation in whole or in parts to multiple suppliers. Quoted prices may be further negotiated with the lowest suppliers.
4. Completed quotation document(s) must be faxed to: **086 458 8033** or e-mailed to: [minibids@kzndsr.gov.za](mailto:minibids@kzndsr.gov.za) or deposited in the quotations box situated at 135 Pietermaritz Street, Pietermaritzburg 3201.
5. The closing date of the bid will be on **27 June 2022 at 16h00** and will be valid for a period of 30 days after the closing date.
6. The validity of the above quotation is thirty (30) days from the closing date.
7. The invitation is opened to suppliers registered on the Central supplier database with KZN Provincial Treasury and the KZN Department of Sports and Recreation.
8. The Department of Sport and Recreation reserves the right not to make any appointment. The department is not compelled to accept the lowest or any quotation.
9. Late quotations will not be considered, faxing time and posting date of quotations will not be considered as valid proof of submitting before the closing date.
10. It is the responsibility of the supplier to ensure that quotations are submitted to the correct address, fax and e-mail before the closing date and time.
11. **With regards the following goods and services:** Furniture and Sport Equipment/Attire, Transport, Medical, Insurance and Security, the following documentation **must** be submitted with your price quotation where applicable:
  - 11.1. An original Valid Tax Clearance Certificate, if the department is in the possession of the suppliers' original valid Tax Clearance Certificate in the Suppliers' Database Profile, the supplier must verify with the department and will need not submit another original certificate.
  - 11.2. Original and valid B-BBEE status level verification or a certified copy or a letter issued by the accountants as contemplated in the CCA or a verification agency accredited by SANAS or a registered auditor.
  - 11.3. Transport Service – Roadworthy Certificates, PDPs and Proof of Liability Cover;
  - 11.4. Medical Service – Registration Certificate and Practice Number including certificates for ambulances/vehicles;
  - 11.5. Insurance Cover – Certificate issued by the Financial Services Board with FSP number; and
  - 11.6. Security Service – PSIRA Registration Certificate for the Company and Owner.

Mr. M.N Ngubane  
Director: Supply Chain Management

Date: 24/06/2022



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**QUOTATION FOR SUPPLY OF GOODS/SERVICES**

DIRECTORATE/OFFICE: ORGANISED RECREATION

QUOTATION/REQUISITION NO: DSAC257/2223 PROJECT NO: OR/HO/2223/07/01

CLOSING DATE: 27 June 2022 at 11h00 PRACTICE NO. (Medical/Insurance): N/A

COMPANY NAME: \_\_\_\_\_ CSD NO. \_\_\_\_\_ PSIRA NO.: N/A

CONTACT PERSON: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_

NO	DESCRIPTION OF SPECIFICATION (refer to attached specification)	QTY	UNIT PRICE	VAT	TOTAL PRICE
<b>GRAND TOTAL:</b>					

*Make a duplicate copy where items are more than the space provided*

# ANNEXURE I: INSURANCE

## SPORTS EVENTS LIABILITY INSURANCE COVER

Date	16 July 2022 to 17 July 2022
Project Name	OR/HO/2223/07/01
Venue	DUNDEE RACE TRACK
No of Participants	3000

(Tick the required insurance in the "Required" Column. The rest will be completed by SCM)

SECTION	SUM INSURED / LIMIT OF INDEMNITY	REQUIRED	PREMIUM	EXCESSES
Public Liability Limit	R3 000 000.00	X	R.....	R.....
Death Limit	R 75 000.00		R.....	R.....
Permanent Disability Benefit	R 75 000.00		R.....	R.....
Emergency Medical expenses	R 20 000.00		R.....	R.....
Wrongful arrest and Defamation	R 20 000.00		R.....	R.....
Damage to leased or rented premises	R 20 000.00		R.....	R.....
Collapse of temporary Construction and scaffolding	R 75 000.00		R.....	R.....
<b>OTHER CHARGES</b>				
	Administration			R.....
	SASRIA			R.....
	Commission			R.....
	VAT @.15%			
	<b>TOTAL PREMIUM</b>			



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**SECTION A: THE FOLLOWING MUST ALSO BE FURNISHED**

CENTRAL SUPPLIERS DATABASE (CSD) REGISTRATION NUMBER: \_\_\_\_\_

DELIVERY DATE: \_\_\_\_\_

VALIDITY PERIOD OF QUOTATION: \_\_\_\_\_

**PLEASE TICK ✓ THE RELEVANT FIELD**

ARE PRICES QUOTED FIRM:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
SUBMISSION OF B-BBEE STATUS LEVEL CERTIFICATE OR SWORN AFFIDAVIT:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
VALID TAX CLEARANCE CERTIFICATE:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
ENTITY BAS REGISTRATION:	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>

VAT REGISTRATION: IF YOU ARE A VAT VENDOR

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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IS THIS OFFER STRICTLY TO SPECIFICATION? IF NOT, GIVE VARIATION	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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**VARIATION:**

IF SPACE IS INSUFFICIENT, ATTACH DETAILS (1 PAGER)

**SECTION C: QUOTATIONS FOR SERVICES (courses/workshops etc.)**

The following information must be submitted on a separate schedule

- (a) Operational plan/methodology/approach;
- (b) Breakdown of costing;
- (c) Curriculum Vitae of course/workshop facilitators; and
- (d) References - work experience

**SECTION D: KINDLY USE COMPANY STAMP AND SIGN SECTION D: KINDLY USE COMPANY STAMP AND SIGN**

Name and Surname (Please print):

\_\_\_\_\_

Delivery address: \_\_\_\_\_

\_\_\_\_\_

COMPANY STAMP

Signature: \_\_\_\_\_

Capacity: \_\_\_\_\_

**SECTION E: DELIVERY QUOTE USING THE METHOD LISTED BELOW:**

Email or Fax documents strictly and specifically to: [minibids@kzndsr.gov.za](mailto:minibids@kzndsr.gov.za) Or 086 458 8033



**2.2 (SBD 2)**

**TAX CLEARANCE CERTIFICATE REQUIREMENTS**

**It is a condition of bid that the taxes of the successful bidder must be in order, or that satisfactory arrangements have been made with South African Revenue Service (SARS) to meet the bidder's tax obligations.**

- 1 In order to meet this requirement bidders are required to complete in full the attached form TCC 001 "Application for a Tax Clearance Certificate" and submit it to any SARS branch office nationally. The Tax Clearance Certificate Requirements are also applicable to foreign bidders / individuals who wish to submit bids.
- 2 SARS will then furnish the bidder with a Tax Clearance Certificate that will be valid for a period of 1 (one) year from the date of approval.
- 3 The valid original Tax Clearance Certificate must be submitted together with the bid. Failure to submit the original and valid Tax Clearance Certificate will result in the invalidation of the bid. Certified copies of the Tax Clearance Certificate will not be acceptable.
- 4 In bids where Consortia / Joint Ventures / Sub-contractors are involved, each party must submit a separate Tax Clearance Certificate.
- 5 Copies of the TCC 001 "Application for a Tax Clearance Certificate" form are available from any SARS branch office nationally or on the website [www.sars.gov.za](http://www.sars.gov.za).
- 6 Applications for the Tax Clearance Certificates may also be made via eFiling. In order to use this provision, taxpayers will need to register with SARS as eFilers through the website [www.sars.gov.za](http://www.sars.gov.za).

**I HAVE READ AND COMPLIED WITH THE SPECIAL INSTRUCTIONS ABOVE:**

.....  
**SURNAME AND INITIALS OF REPRESENTATIVE**

.....  
**DATE**

.....  
**SIGNATURE**

COMPANY OFFICIAL STAMP



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**SBD 4**

**BIDDER'S DISCLOSURE**

**1. PURPOSE OF THE FORM**

Any person (natural or juristic) may make an offer or offers in terms of this invitation to bid. In line with the principles of transparency, accountability, impartiality, and ethics as enshrined in the Constitution of the Republic of South Africa and further expressed in various pieces of legislation, it is required for the bidder to make this declaration in respect of the details required hereunder.

Where a person/s are listed in the Register for Tender Defaulters and / or the List of Restricted Suppliers, that person will automatically be disqualified from the bid process.

**2. BIDDER'S DECLARATION**

2.1 Is the bidder, or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest<sup>1</sup> in the enterprise, employed by the state? **YES/NO**

2.1.1 If so, furnish particulars of the names, individual identity numbers, and, if applicable, state employee numbers of sole proprietor/ directors / trustees / shareholders / members/ partners or any person having a controlling interest in the enterprise, in table below.

Full Names	Identity Number	Name of State institution

2.2 Do you, or any person connected with the bidder, have a relationship with any person who is employed by the procuring institution? **YES/NO**

2.2.1 If so, furnish particulars:

.....  
.....

2.3 Does the bidder or any of its directors / trustees / shareholders / members / partners or any person having a controlling interest in the enterprise have any interest in any other related enterprise whether or not they are bidding for this contract? **YES/NO**

2.3.1 If so, furnish particulars:

.....  
.....

<sup>1</sup> the power, by one person or a group of persons holding the majority of the equity of an enterprise, alternatively, the person/s having the deciding vote or power to influence or to direct the course and decisions of the enterprise.