



## **INDEPENDENT DEVELOPMENT TRUST**

**REQUEST FOR QUOTATION (RFQ) FOR SKILLS TRAINING OF 25 LEARNERS ON TRAINING FOR NATIONAL CERTIFICATE COMMUNITY HEALTH WORK SP65749 FROM AROUND THE COMMUNITIES OF GALESHEWE, SOLPLAATIES LOCAL MUNICIPALITY.**

**RFQ NO: NSF-IDTSKILLS-NATCERTNC-COMHEALTH/RFQ06-2024**

**PREPARED FOR:**

**IDT Northern Cape Regional Office**

**Block D Sanlam building  
13 Bishops Avenue  
Labram  
Kimberly  
8301**

**CLOSING DATE: 03 DECEMBER 2024 AND TIME: @12H00**

**RFQ NO: NSF-IDTSKILLS-NATCERTNC-COM HEALTH/RFQ06-2024**

## PART A INVITATION TO BID

YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (NAME OF DEPARTMENT/ PUBLIC ENTITY)					
BID NUMBER:	NSF-IDTSKILLS- NATCERTNC-COM HEALTH/RFQ06-2024	CLOSING DATE:	03 December 2024	CLOSING TIME:	12H00
DESCRIPTION	REQUEST FOR QUOTATION (RFQ) FOR SKILLS TRAINING OF 25 LEARNERS ON TRAINING FOR NATIONAL CERTIFICATE COMMUNITY HEALTH WORK SP65749 FROM AROUND THE COMMUNITIES OF GALESHEWE, SOL PLAATJIES LOCAL MUNICIPALITY.				
BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX SITUATED AT (STREET ADDRESS)					
Block D Sanlam building					
13 Bishops Avenue					
Labram					
Kimberly					
8301					
BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO			TECHNICAL ENQUIRIES MAY BE DIRECTED TO:		
CONTACT PERSON	Thabani Mbonambi		CONTACT PERSON	Lily Hlophe/ Qaphela Ntshobane (SCM)	
TELEPHONE NUMBER	(053) 807 2660		TELEPHONE NUMBER	012 845 2000	
FACSIMILE NUMBER	N/A		FACSIMILE NUMBER	N/A	
E-MAIL ADDRESS	<a href="mailto:IDT-NSFTenders@idt.org.za">IDT-NSFTenders@idt.org.za</a>		E-MAIL ADDRESS	<a href="mailto:IDT-NSFTenders@idt.org.za">IDT-NSFTenders@idt.org.za</a>	
SUPPLIER INFORMATION					
NAME OF BIDDER					
POSTAL ADDRESS					
STREET ADDRESS					
TELEPHONE NUMBER	CODE		NUMBER		
CELLPHONE NUMBER					
FACSIMILE NUMBER	CODE		NUMBER		
E-MAIL ADDRESS					
VAT REGISTRATION NUMBER					
SUPPLIER COMPLIANCE STATUS	TAX COMPLIANCE SYSTEM PIN:		OR	CENTRAL SUPPLIER DATABASE No:	MAAA
B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE	TICK APPLICABLE BOX]  <input type="checkbox"/> Yes <input type="checkbox"/> No		B-BBEE STATUS LEVEL SWORN AFFIDAVIT		[TICK APPLICABLE BOX]  <input type="checkbox"/> Yes <input type="checkbox"/> No

**RFQ NO: NSF-IDTSKILLS-NATCERTNC-COM HEALTH/RFQ06-2024**

<b>[A B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE/ SWORN AFFIDAVIT (FOR EMES &amp; QSEs) MUST BE SUBMITTED IN ORDER TO QUALIFY FOR PREFERENCE POINTS FOR B-BBEE]</b>			
ARE YOU THE ACCREDITED REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED?	<input type="checkbox"/> Yes <input type="checkbox"/> No [IF YES ENCLOSE PROOF]	ARE YOU A FOREIGN BASED SUPPLIER FOR <b>THE GOODS /SERVICES /WORKS OFFERED?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No [IF YES, ANSWER THE QUESTIONNAIRE BELOW]
<b>QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS</b>			
IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?			<input type="checkbox"/>
YES <input type="checkbox"/> NO			
DOES THE ENTITY HAVE A BRANCH IN THE RSA?			<input type="checkbox"/>
YES <input type="checkbox"/> NO			
DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
<b>IF THE ANSWER IS “NO” TO ALL OF THE ABOVE, THEN IT IS NOT A REQUIREMENT TO REGISTER FOR A TAX COMPLIANCE STATUS SYSTEM PIN CODE FROM THE SOUTH AFRICAN REVENUE SERVICE (SARS) AND IF NOT REGISTER AS PER 2.3 BELOW.</b>			

## PART B TERMS AND CONDITIONS FOR BIDDING

<b>1. BID SUBMISSION:</b>
1.1. BIDS MUST BE DELIVERED BY THE STIPULATED TIME TO THE CORRECT ADDRESS. LATE BIDS WILL NOT BE ACCEPTED FOR CONSIDERATION.
1.2. <b>ALL BIDS MUST BE SUBMITTED ON THE OFFICIAL FORMS PROVIDED (NOT TO BE RE-TYPED) OR IN THE MANNER PRESCRIBED IN THE BID DOCUMENT.</b>
1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT, 2000 AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2022, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.
1.4. <b>THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (SBD7).</b>
<b>2. TAX COMPLIANCE REQUIREMENTS</b>
2.1 BIDDERS MUST ENSURE COMPLIANCE WITH THEIR TAX OBLIGATIONS.
2.2 BIDDERS ARE REQUIRED TO SUBMIT THEIR UNIQUE PERSONAL IDENTIFICATION NUMBER (PIN) ISSUED BY SARS TO ENABLE THE ORGAN OF STATE TO VERIFY THE TAXPAYER'S PROFILE AND TAX STATUS.
2.3 APPLICATION FOR TAX COMPLIANCE STATUS (TCS) PIN MAY BE MADE VIA E-FILING THROUGH THE SARS WEBSITE <a href="http://WWW.SARS.GOV.ZA">WWW.SARS.GOV.ZA</a> .
2.4 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.
2.5 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.
2.6 WHERE NO TCS PIN IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.
2.7 NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE, COMPANIES WITH DIRECTORS WHO ARE PERSONS IN THE SERVICE OF THE STATE, OR CLOSE CORPORATIONS WITH MEMBERS PERSONS IN THE SERVICE OF THE STATE."

**NB: FAILURE TO PROVIDE / OR COMPLY WITH ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.**

SIGNATURE OF BIDDER.....

CAPACITY UNDER WHICH THIS BID IS SIGNED.....

(Proof of authority must be submitted)

DATE: .....

## 1. TERMS OF REFERENCE

ITEM	DESCRIPTION
<b>1.1 Tender Issue Date</b>	25 November 2024
<b>1.2 Compulsory Briefing</b>	No Briefing Session will be held for this bid.
<b>1.3 Bid Reference No.</b>	<b>NSF-IDTSKILLS-NATCERTNC-COM HEALTH/RFQ06-2024</b>
<b>1.4 Enquiries</b>	Any queries shall be directed in writing to the IDT through the email. Email: <a href="mailto:IDT-NSFTenders@idt.org.za">IDT-NSFTenders@idt.org.za</a>
<b>1.5 Mandatory Requirements</b>	1.5.1 Authority to Sign the Bid Document and all Annexures (see bid document). 1.5.2 Valid COIDA Certificate 1.5.3 Valid Accreditation Certificate with the relevant SETA/ QCTO/ Tertiary institution and any other relevant accrediting institutions. 1.5.4 Valid Accreditation certificate of the Assessor with the relevant SETA 1.5.5 Valid Accreditation certificate of the Moderator with the relevant SETA 1.5.6 Central Supplier Database (CSD) registration 1.5.7 Valid Tax Compliance Letter with a unique pin <b>FAILURE TO SUBMIT ANY OF THE ABOVE WILL LEAD TO DISQUALIFICATION</b>
<b>1.6 Administrative Mandatory Requirement</b>	1.6.1 Submission of fully completed and signed Invitation to Bid (SBD 1) 1.6.2 Submission of fully completed and signed Bidder's Disclosure (SBD 4) 1.6.3 Submission of fully completed and signed Bidder's Price (SBD 6.1)
<b>1.7. Returnable documents</b>	The following returnable document shall be submitted together with the bid. The validity of this documentation will be verified at the time of award. 1.7.1. Proof of residence (proof of ownership or lease contract or municipal services bill)
<b>1.8. Evaluation Criteria</b>	<b>This bid will be evaluated in two stages</b> 1.8.1. Mandatory and administrative Requirements 1.8.2. Price
<b>1.9. Submission of Bid documents</b>	1.9.1 Bids must be delivered on or before the closing date and the time as per the advert. 1.9.2 Bidders must sign the Bid Submission Register upon delivery of the bid at the regional office. Bidders not on the Bid Submission Register will not be considered. This applies to bids, which are submitted through Courier companies. Bidders MUST inform their Courier Companies to sign the Bid Submission Register in the name of the bidder. 1.9.3 Bids submitted after the closing time will not be considered.

	1.9.4 Bid documents shall be hand-delivered in 1 combined pack (i.e. Bid document and its accompanying Annexures) to the Implementing Agent (IDT), and shall be marked as follows:
	Marked confidential Bid and Indicate the following:
	<b>NSF-IDTSKILLS-NATCERTNC-COM HEALTH/RFQ06-2024</b>
	<b>REQUEST FOR QUOTATION (RFQ) FOR SKILLS TRAINING OF 25 LEARNERS ON TRAINING FOR NATIONAL CERTIFICATE COMMUNITY HEALTH WORK SP65749 FROM AROUND THE COMMUNITIES OF GALESHEWE, SOL PLAATJIES LOCAL MUNICIPALITY.</b>
	<b>THE BID BOX WILL BE LOCATED AT THE IDT REGIONAL OFFICE AS PER THE ADDRESS INDICATED ON THE BID DOCUMENT.</b>
<b>1.10. Notes to bidders</b>	<b>NB:</b> Emailed or Faxed bid documents will be disqualified.
	1.10.1. The bid shall be valid for 90 calendar days.
	1.10.2. Bidders' queries will be attended to only up to 3 calendar days before the closing date.
	1.10.3. Should bidders not receive any correspondence after 90 days of tender validity period then bidders should consider their application unsuccessful.
	1.10.4. Bids must be submitted on the official forms, which are provided as part of the bid document.
<b>1.11. Company Resources</b>	1.11.1. The bidder is to provide details of a minimum of three (Facilitator, Assessor and Moderator) human resources to be used in the project and attach proof of their relevant qualifications (qualification and details of personnel).
	1.11.2. The bidder will not be permitted to use one trainer for different regions. The bidder to provide qualifications of the trainer per region
	1.11.3. Such human resource shall always be available for the project during the contract period. Should assigned human resource be changed for some other reason, he/she should be replaced by a person/s of equivalent or higher qualification.
<b>1.12. Cancellation Costs</b>	1.12.1. Should the programme be cancelled by the client NSF, due to any other reasons, the IDT and the Client NSF shall not be liable to remunerate the service provider for any potential loss of business and/or profit.
<b>1.13. IDT's Reservation of Rights</b>	1.13.1. IDT reserves the right to conduct a risk assessment if the recommended bidder is the responsive bidder and has already been awarded a contract.
	1.13.2. IDT reserves the right to negotiate with the recommended bidder for the price.
	1.13.3. IDT reserves the right to cancel or withdraw this request for bid without prior notice and without furnishing any reasons whatsoever.

	1.13.4. IDT reserves the right to subject Bidders and their facilities to assessment as part of the evaluation process or as a condition to be appointed.
	1.13.5. The IDT reserves the right to amend, modify, withdraw this Bid, or terminate any of the procedures or requirements set out herein at any time and from time to time, without prior notice and without liability to compensate or reimburse any person.
<b>1.14. Bid Document and Contract</b>	<p>1.14.1. Bidders are advised to ensure that they familiarize themselves with all the contents of the Bid documents, as those will form the basis of the contract to be entered into. Any contents of this document that the bidder requires clarity on shall be brought forward before the Bid submission date stipulated in this Bid document.</p> <p>1.14.2. Note: The Bid Document must be completed by hand (handwritten) using permanent black ink.</p> <p><b>1.14.3. The Bid document must be bound.</b></p> <p>1.14.4. All Bid documents submitted to the IDT will become the property of the IDT and will as such not be returned to the bidders. Proprietary information should be identified as such in each proposal.</p> <p>1.14.5. If the IDT amends this bid document, the IDT will issue an erratum.</p> <p>1.14.6 This document must be used solely for the purpose it is intended to achieve.</p> <p>1.14.7 The Company will be expected to enter into a contract with the IDT.</p> <p>1.14.8 Bidders who are blacklisted with the National Treasury will be eliminated, therefore, not considered any further evaluation.</p>
<b>1.15. Duration Of Contract</b>	1.15.1. The project is estimated to take 12 months to complete for <b>learnership or 36 month for apprenticeship.</b>
<b>1.16. Recruitment of learners</b>	1.16.1 Interviews for recruitment must be conducted face-to-face
<b>1.17 Training facilities</b>	1.17.1 The potential bidder will be conditionally accepted, and be expected to provide proof of training facilities within five working days of appointment. Failure to provide the required documents will result in disqualifications
<b>1.18</b>	1.18.1 No one company should be awarded more than three projects in all regions unless IDT deems it fit or based on need.

## T.1 EVALUATION CRITERIA

The RFQ will be evaluated on two phases:

- **Mandatory Requirements**
- **Price and Specific Goals**

## T1.1 MANDATORY REQUIREMENTS/DOCUMENTATION (align to above)

1. Authority to Sign this Bid
2. Copy of a Letter of Good Standing with Compensation for Occupational and Injuries Diseases Act (COIDA) Registration Certificate
3. Valid Accreditation Certificate of the company with the relevant SETA/QCTO/ Any accrediting institution in the name of the bidder.
4. Valid Accreditation certificate of the Assessor with the relevant SETA.
5. Valid Accreditation certificate of the Moderator with the relevant SETA.
6. Proof of Central Supplier Database (CSD) registration
7. Valid Tax Compliance Letter with a unique pin
8. Fully completed and signed SBD Forms.
  - a. SBD1: Invitation to bid
  - b. SBD4: Declaration of interest
  - c. SBD6.1: (Preference Points Claim Form in Terms of the Preferential Procurement Regulations 2022)

### **Note:**

- I. Failure to submit the above-required documents shall result in disqualification of the bidder.
- II. If any of the Directors are in the Employment of the State this shall result in disqualification of the bidder.
- III. If any of its Directors is listed on the Register of Defaulters, this shall result in disqualification of the bidder.
- IV. In the case of a Bidder, who during the last ten (10) years has been terminated on Previous Contracts with the IDT this shall result in disqualification of the bidder.

The IDT will assess all bids received based on its procurement policy.

**Note: Failure to comply with the above requirements will result in automatic disqualification of your bid.**

### T1.3 PRICE AND SPECIFIC GOALS

This RFQ will be evaluated on mandatory requirements and price. The 80/20 preference point systems will be applied.

### T2. PROJECT DESCRIPTION

The purpose of this RFQ is to engage service providers that can effectively deliver training for the National Certificate Community Health Work for the duration of 12 months to the identified target group. The programme targets will be recruited from local communities, close to IDT projects. The targeted learners are unemployed- and not workers of the IDT infrastructure projects, as this programme aims to enhance the skills and employability of the learners, contributing to the broader goals of workforce development and empowerment. The successful bidder will be responsible for recruiting the suitable/qualifying learners to participate in the training programme.

TRAINING PROGRAMMES / QUALIFICATIONS /TRADES TITLES	ENTRY REQUIREMENTS	QCTO QUALIFICATION ID	NQF LEVEL	CREDITS	DURATION	TARGETED NUMBER OF LEARNERS
National Certificate: Community Health Work	NQF Level 1	64749	2	140	12 Months	25

**QUOTATIONS SHOULD BE BASED ON THIS TABLE ONLY.**

The Training Service provider will be responsible for training of 25 learners that are to be recruited from the local communities within a radius of 10KM from Northwest where IDT implements a project in Galeshewe, under the Sol Plaatjies Local Municipality. The service provider must ensure that recruited learners are not workers of the IDT projects or anywhere.

The IDT Skills and Training programme aims to empower the selected members of the communities where IDT implements projects targeting mainly women, youth and people with disabilities to obtain accredited qualifications to prepare them for formal employment or to start their businesses.

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## **T2.1 THE OBJECTIVES OF THE IDT TRAINING AND SKILLS DEVELOPMENT**

**The objectives of the NSF/IDT development programme are:**

1. To train and build the capacity of unemployed people and work seekers to prepare them in making transitions into employment or self-employment.
2. To provide an opportunity for unemployed youth and old people who do not have matric or meet the requirements to enrol in post-matric education but have skills suitable for Recognition of Prior Learning (RPL).

## **T2.2 SCOPE OF WORK SHALL INCLUDE:**

1. Screening of learners to get to twenty-five (25) qualifying learners for National Certificate: Building and Civil Construction over a period of 12 months from the targeted communities.
  - a. Entry requirements
  - b. One learner must be a person with disability
2. Facilitate the implementation of the training for the 25 learners by the accredited trainers and manage all the training-related administrative activities
3. Keep records of the attendance of learners and facilitate the payment of stipends, UIF and COIDA in line with the applicable regulations.
4. Work closely with the IDT Programme Management team manage the placement of learners in the IDT programmes for experiential learning.
5. Provide monthly reports on progress and financial expenditure in line with the templates to be provide.
6. Address all issues that may emerge on training and project.

### T3 FORM OF OFFER

Below are the NSF-IDT standard rates for the applicable training activities. The bidder is expected to cost complete 1.2.11. Tuition and Learning delivery overheads, provide total cost with VAT, where applicable provide UIF and COIDA.

Item	Training activities	# of learners	Rate/learner	Total training costs
1.1	Recruitment and selection		R 680,00	
1.2.1	Personal Protective Equipment		R 1 530,00	
1.2.2	Learner Toolkits for Trades		R 2550,00	
1.2.3	Mentorship, Host Employer Costs etc		R 510,00	
1.2.4	Facilitation		R 3400,00	
1.2.5	Assessor		R 340,00	
1.2.6	Moderation		R 765,00	
1.2.7	Quality Assurance		R 765,00	
1.2.8	Learners Materials/Guides		R 1700,00	
1.2.9	Assessment Materials/Guides		R 2550,00	
1.2.10	Certification		R 1105,00	
1.2.11	<b>Tuition or Learning delivery overheads (Bidder to cost)</b>			
	<b>SUBTOTAL</b>			
	<b>VAT (15%)</b>			
	Learner Stipend: <b>(complete on relevant part below):</b>			
	Learnership- 12 months		R2500.00/l/m	
	Apprenticeship- 36 months		R3000.00/l/m	
	<b>UIF (@ 1%) (complete on relevant part below):</b>			
	Learnership- 12 months			
	Apprenticeship- 36 months			
	<b>COIDA (@ 0.5%) (complete on relevant part below)</b>			
	Learnership- 12 months			
	Apprenticeship- 36 months			
	<b>GRAND TOTAL</b>			

SIGNED ON BEHALF OF (COMPANY NAME): .....

NAME .....

SIGNATURE: ..... DATE: .....

IN HIS/HER CAPACITY AS: .....

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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 Name	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:

.....  
 .....

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**1 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.**

- 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:

.....  
.....

### **3 DECLARATION**

I, \_\_\_\_\_ the \_\_\_\_\_ undersigned,  
(name)..... in submitting the  
accompanying bid, do hereby make the following statements that I certify to be true  
and complete in every respect:

- 3.1 I have read and I understand the contents of this disclosure;
- 3.2 I understand that the accompanying bid will be disqualified if this disclosure is found not to be true and complete in every respect;
- 3.3 The bidder has arrived at the accompanying bid independently from, and without consultation, communication, agreement or arrangement with any competitor. However, communication between partners in a joint venture or consortium<sup>2</sup> will not be construed as collusive bidding.
- 3.4 In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications, prices, including methods, factors or formulas used to calculate prices, market allocation, the intention or decision to submit or not to submit the bid, bidding with the intention not to win the bid and conditions or delivery particulars of the products or services to which this bid invitation relates.
- 3.4 The terms of the accompanying bid have not been, and will not be, disclosed by the bidder, directly or indirectly, to any competitor, prior to the date and time of the official bid opening or of the awarding of the contract.
- 3.5 There have been no consultations, communications, agreements or arrangements made by the bidder with any official of the procuring institution in relation to this procurement process prior to and during the bidding process except to provide clarification on the bid submitted where so required by the institution; and the bidder was not involved in the drafting of the specifications or terms of reference for this bid.
- 3.6 I am aware that, in addition and without prejudice to any other remedy provided to combat any restrictive practices related to bids and contracts, bids that are suspicious will be reported to the Competition Commission for investigation and possible imposition of administrative penalties in terms of section 59 of the Competition Act No

89 of 1998 and or may be reported to the National Prosecuting Authority (NPA) for criminal investigation and or may be restricted from conducting business with the public sector for a period not exceeding ten (10) years in terms of the Prevention and Combating of Corrupt Activities Act No 12 of 2004 or any other applicable legislation.

I CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 1, 2 and 3 ABOVE IS CORRECT.

I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME IN TERMS OF PARAGRAPH 6 OF PFMA SCM INSTRUCTION 03 OF 2021/22 ON PREVENTING AND COMBATING ABUSE IN THE SUPPLY CHAIN MANAGEMENT SYSTEM SHOULD THIS DECLARATION PROVE TO BE FALSE.

.....	.....
Signature	Date
.....	.....
Position	Name of bidder

**SBD 6.1: PREFERENCE POINTS CLAIM FORM IN TERMS OF THE PREFERENTIAL PROCUREMENT REGULATIONS 2022**

This preference form must form part of all tenders invited. It contains general information and serves as a claim form for preference points for specific goals.

**NB: BEFORE COMPLETING THIS FORM, TENDERERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF THE TENDER AND PREFERENTIAL PROCUREMENT REGULATIONS, 2022**

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**GENERAL CONDITIONS**

- 1.1 The following preference point systems are applicable to invitations to tender:
- the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- 1.2 **To be completed by the organ of state**  
*(delete whichever is not applicable for this tender).*
- a) The applicable preference point system for this tender is the 80/20 preference point system.
  - b) 80/20 preference point system will be applicable in this tender. The lowest/ highest acceptable tender will be used to determine the accurate system once tenders are received.
- 1.3 Points for this tender (even in the case of a tender for income-generating contracts) shall be awarded for:
- (a) Price; and
  - (b) Specific Goals.

#### 1.4 To be completed by the organ of state:

The maximum points for this tender are allocated as follows:

	POINTS	
PRICE	90	80
SPECIFIC GOALS	10	20
TARGETED GROUP		
Women	3	6
Youth	3	6
People with Disabilities	2	4
Black Male	2	4
Total points for Price and SPECIFIC GOALS	100	100

- 1.5 Failure on the part of a tenderer to submit proof or documentation required in terms of this tender to claim points for specific goals with the tender, will be interpreted to mean that preference points for specific goals are not claimed.
- 1.6 The organ of state reserves the right to require of a tenderer, either before a tender is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the organ of state.

## 2. DEFINITIONS

- (a) **“tender”** means a written offer in the form determined by an organ of state in response to an invitation to provide goods or services through price quotations, competitive tendering process or any other method envisaged in legislation;
- (b) **“price”** means an amount of money tendered for goods or services, and includes all applicable taxes less all unconditional discounts;
- (c) **“rand value”** means the total estimated value of a contract in Rand, calculated at the time of bid invitation, and includes all applicable taxes;
- (d) **“tender for income-generating contracts”** means a written offer in the form determined by an organ of state in response to an invitation for the origination of income-generating contracts through any method envisaged in legislation that will result in a legal agreement between the organ of state and a third party that produces revenue for the organ of state, and includes, but is not limited to, leasing and disposal of assets and concession contracts, excluding direct sales and disposal of assets

through public auctions; and

- (e) “**the Act**” means the Preferential Procurement Policy Framework Act, 2000 (Act No. 5 of 2000).

### 3. FORMULAE FOR PROCUREMENT OF GOODS AND SERVICES

#### 3.1. POINTS AWARDED FOR PRICE

##### 3.1.1 THE 80/20 OR 90/10 PREFERENCE POINT SYSTEMS

A maximum of 80 or 90 points is allocated for price on the following basis:

80/20 or 90/10

$$Ps = 80 \left( 1 - \frac{Pt - P_{min}}{P_{min}} \right) \quad \text{or} \quad Ps = 90 \left( 1 - \frac{Pt - P_{min}}{P_{min}} \right)$$

Where

Ps = Points scored for price of tender under consideration

Pt = Price of tender under consideration

Pmin = Price of lowest acceptable tender

#### 3.2. FORMULAE FOR DISPOSAL OR LEASING OF STATE ASSETS AND INCOME-GENERATING PROCUREMENT

##### 3.2.1. POINTS AWARDED FOR PRICE

A maximum of 80 or 90 points is allocated for price on the following basis:

80/20 or 90/10

$$Ps = 80 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right) \quad \text{or} \quad Ps = 90 \left( 1 + \frac{Pt - P_{max}}{P_{max}} \right)$$

Where

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Ps = Points scored for price of tender under consideration  
Pt = Price of tender under consideration  
Pmax = Price of highest acceptable tender

#### **4. POINTS AWARDED FOR SPECIFIC GOALS**

- 4.1. In terms of Regulation 4(2); 5(2); 6(2) and 7(2) of the Preferential Procurement Regulations, preference points must be awarded for specific goals stated in the tender. For the purposes of this tender the tenderer will be allocated points based on the goals stated in table 1 below as may be supported by proof/ documentation stated in the conditions of this tender:
- 4.2. In cases where organs of state intend to use Regulation 3(2) of the Regulations, which states that, if it is unclear whether the 80/20 or 90/10 preference point system applies, an organ of state must, in the tender documents, stipulate in the case of—
- (a) an invitation for tender for income-generating contracts, that either the 80/20 or 90/10 preference point system will apply and that the highest acceptable tender will be used to determine the applicable preference point system; or
  - (b) any other invitation for tender, that either the 80/20 or 90/10 preference point system will apply and that the lowest acceptable tender will be used to determine the applicable preference point system, then the organ of state must indicate the points allocated for specific goals for both the 90/10 and 80/20 preference point system.

**Table 1: Specific goals for the tender and points claimed are indicated per the table below.**

***(Note to organs of state: Where either the 90/10 or 80/20 preference point system is applicable, corresponding points must also be indicated as such.***

***Note to tenderers: The tenderer must indicate how they claim points for each preference point system.)***

The specific goals allocated points in terms of this tender	Number of points allocated (90/10 system) (To be completed by the organ of state)	Number of points allocated (80/20 system) (To be completed by the organ of state)	Number of points claimed (90/10 system) (To be completed by the tenderer)	Number of points claimed (80/20 system) (To be completed by the tenderer)
Women	3	6		
Youth	3	6		
People with Disabilities	2	4		
Black Male	2	4		

**Source Documents to be submitted with the Bid or RFQ**

- \*CIPC Document (Company Registration Document will be required for verification (CIPC DOC))
- \*Woman (Originally Certified ID Document)
- \*Youth (Originally Certified ID Document)
- \*People with Disability (Letter from the Dr. Confirming the Disability)
- \*Black Ownership (Originally Certified ID Document)

**DECLARATION WITH REGARD TO COMPANY/FIRM**

4.3. Name of company/firm.....

4.4. Company registration number: .....

4.5. TYPE OF COMPANY/ FIRM

- ☐ Partnership/Joint Venture / Consortium
- ☐ One-person business/sole propriety
- ☐ Close corporation
- ☐ Public Company
- ☐ Personal Liability Company
- ☐ (Pty) Limited
- ☐ Non-Profit Company
- ☐ State Owned Company

[TICK APPLICABLE BOX]

**RFQ NO: NSF-IDTSKILLS-NATCERTNC-COM HEALTH/RFQ06-2024**

4.6. I, the undersigned, who is duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the specific goals as advised in the tender, qualifies the company/ firm for the preference(s) shown and I acknowledge that:

- i) The information furnished is true and correct;
- ii) The preference points claimed are in accordance with the General Conditions as indicated in paragraph 1 of this form;
- iii) In the event of a contract being awarded as a result of points claimed as shown in paragraphs 1.4 and 4.2, the contractor may be required to furnish documentary proof to the satisfaction of the organ of state that the claims are correct;
- iv) If the specific goals have been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the organ of state may, in addition to any other remedy it may have –
  - (a) disqualify the person from the tendering process;
  - (b) recover costs, losses or damages it has incurred or suffered as a result of that person's conduct;
  - (c) cancel the contract and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;
  - (d) recommend that the tenderer or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted from obtaining business from any organ of state for a period not exceeding 10 years, after the *audi alteram partem* (hear the other side) rule has been applied; and
  - (e) forward the matter for criminal prosecution, if deemed necessary.

.....
<b>SIGNATURE(S) OF TENDERER(S)</b>
<b>SURNAME AND NAME:</b> .....
<b>DATE:</b> .....
<b>ADDRESS:</b> .....

## **5. BRIEFING SESSION**

There will be no briefing session for the RFQ. However, queries relating to the RFQ can be directed via e-mail to: **Thabani Mbonambi /Lily Hlophe at: IDT-NSFTenders@idt.org.za** during office hours.

**All bids for NC Office must be submitted at the IDT Office at the following physical address:**

**IDT Northern Cape Regional Office**

**Block D Sanlam building  
13 Bishops Avenue  
Labram  
Kimberly  
8301**

## **GENERAL BID INFORMATION**

**Type:** Panel - RFQ

**Bid Documents will be available from:** 25 NOVEMBER 2024

**RFQ Closing:** 03 DECEMBER 2024 @12:00PM

**The Bid Advert and Documents are sent via the provided email address.**

**Validity Period:** 90 days

Bidders' queries will be attended to only up to 2 Calendar days before the closing date.

Unsuccessful Bidders will not be notified.

If you do not receive any response from IDT regarding this bid after 3 weeks from the closing date, please consider your bid unsuccessful.

## 6. LIST OF RETURNABLE DOCUMENTS

List of returnable documents are for ensuring that everything the employer requires a tenderer to submit with his tender is included in, or returned with, his tender submission.

**Note: All returnable documentation should be submitted in the sequence as requested below**

Tick below if returnable document is attached or completed properly.

ITEM	LIST OF COMPULSORY RETURNABLE DOCUMENTS	TICK IF ATTACHED
6.1	Letter of Authority to Sign an RFQ Document (in case of more than one director in the company)	
6.2	Valid COIDA	
6.3	Invitation to Bid (SBD1)	
6.4	Bidder's Disclosure (SBD4)	
6.5	Preference Points Claim Form in terms of the Preferential Procurement (SBD 6.1)	
6.6	Valid Accreditation Certificate of the company	
6.7	Valid Accreditation certificate of the Assessor	
6.8	Valid Accreditation certificate of the Moderator	
6.9	Proof of Central Supplier Database (CSD) registration	
6.10	Form of offer	

**AUTHORITY TO SIGN A BID**

**A. COMPANIES**

Mr/Mrs/Ms.....  
(whose signature appears below) has been duly authorised to sign all documents in connection with this bid on behalf of

(Name of Company) .....

**IN HIS/HER CAPACITY AS:** .....

**SIGNED ON BEHALF OF COMPANY:** .....

.....  
(PRINT NAME)

**SIGNATURE OF SIGNATORY:** ..... **DATE:** .....

**WITNESSES:**    1.....

                         2.....

## B. SOLE PROPRIETOR (ONE - PERSON BUSINESS)

I, the undersigned..... hereby confirm that I am the  
sole owner of the business trading as.....  
.....

**SIGNATURE**..... **DATE**.....

### C. PARTNERSHIP

The following particulars in respect of every partner must be furnished and signed by every Partner :

Full name of partner	Residential address	Signature
.....	.....	.....
.....	.....	.....
.....	.....	.....

We, the undersigned partners in the business trading as ..... hereby authorise .....to sign this bid as well as any contract resulting from the bid and any other documents and correspondence in connection with this bid and /or contract on behalf of

.....  
SIGNATURE

.....  
SIGNATURE

.....  
SIGNATURE

DATE DATE DATE

**D. CLOSE CORPORATION**

In the case of a close corporation submitting a bid, a certified copy of the Founding Statement of such corporation shall be included with the bid, together with the resolution by its members authorising a member or other official of the corporation to sign the documents on their behalf.

By resolution of members at a meeting on ..... 20.....  
at..... Mr/Mrs/Ms....., whose  
signature appears below, has been authorised to sign all documents in connection with this bid  
on behalf of

(Name of Close Corporation) .....  
.....

SIGNED ON BEHALF OF CLOSE CORPORATION : .....

.....  
(PRINT NAME)

IN HIS/HER CAPACITY AS .....DATE: .....

SIGNATURE OF SIGNATORY: .....

WITNESSES: 1.....

2.....

**E CO-OPERATIVE**

A certified copy of the Constitution of the co-operative must be included with the bid, together with the resolution by its members authoring a member or other official of the co-operative to sign the bid documents on their behalf.

By resolution of members at a meeting on ..... 20.....  
at.....

Mr/Mrs/Ms....., whose signature appears below, has been authorised to sign all documents in connection with this bid on behalf of (Name of cooperative) .....

SIGNATURE OF AUTHORISED REPRESENTATIVE/SIGNATORY: .....

IN HIS/HER CAPACITY AS: .....

DATE: .....

SIGNED ON BEHALF OF CO-OPERATIVE: .....

NAME IN BLOCK LETTERS: .....

WITNESSES: 1.....

2.....

F. JOINT VENTURE

If a bidder is a joint venture, they must also have a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of the enterprises, authorising the representatives who sign this bid to do so, as well as to sign any contract resulting from this bid and any other documents and correspondence in connection with this bid and/or contract on behalf of the joint venture must be submitted with this bid, before the closing time and date of the bid.

AUTHORITY TO SIGN ON BEHALF OF THE JOINT VENTURE

**Authority to sign should be the accredited company, as the one that will be issuing the learner certificates for the training programme.**

By resolution/agreement passed/reached by the joint venture partners on.....20.....  
Mr/Mrs/Ms.....,Mr/Mrs/Ms.....  
Mr/Mrs/Ms.....and  
Mr/Mrs/Ms.....  
(whose signatures appear below) have been duly authorised to sign all documents in connection with this bid on behalf of the Joint Venture)

IN HIS/HER CAPACITY AS: .....

SIGNED ON BEHALF OF (COMPANY NAME): .....  
(PRINT NAME) .....

SIGNATURE: ..... DATE: .....

IN HIS/HER CAPACITY AS: .....

SIGNED ON BEHALF OF (COMPANY NAME): .....  
(PRINT NAME).....

SIGNATURE: ..... DATE: .....

IN HIS/HER CAPACITY AS: .....

SIGNED ON BEHALF OF (COMPANY NAME): .....  
(PRINT NAME) .....

SIGNATURE: ..... DATE: .....

IN HIS/HER CAPACITY AS: .....

## G. CONSORTIUM

If a bidder is a consortium, a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of concerned enterprises, authorising the representatives who sign this bid to do so, as well as to sign any contract resulting from this bid and any other documents and correspondence in connection with this bid and/or contract on behalf of the consortium must be submitted with this bid, before the closing time and date of the bid.

### AUTHORITY TO SIGN ON BEHALF OF THE CONSORTIUM

By resolution/agreement passed/reached by the consortium  
on.....20.....

Mr/Mrs/Ms.....  
.....

(whose signature appear below) have been duly authorised to sign all documents in connection with this bid on behalf of:

(Name of Consortium)  
.....

IN HIS/HER CAPACITY AS:  
.....

SIGNATURE: ..... DATE: .....

## **7. LIST OF RETRUNABLE DOCUMENTS**

## **7.1 LETTER OF AUTHORITY TO SIGN**

**7.2 VALID LETTER OF GOOD STANDING WITH COMPENSATION FOR OCCUPATIONAL AND INJURIES DISEASES ACT (COIDA) REGISTRATION CERTIFICATE.**

(Attached hereto is my / our certified copy of LETTER of good standing with the Compensation for Occupational Injuries and Diseases, e.g. letter of good standing. My / our failure to submit the certificate with your RFQ offer will lead to the conclusion that your entity/ company is not registered with COIDA, and therefore, the RFQ will be disqualified.)

### **7.3 FEE PROPOSAL**

(Attached hereto is the quotation prepared in the service provider's letterhead)

## **7.4 PRACTICAL IMPLEMENTATION PLAN**

## **7.5 CENTRAL SUPPLIER DATABASE (CSD) REPORT**

*(Attached hereto is my / our Central Supplier Database report.)*

### **IMPORTANT NOTES:**

**A full report of the CSD report is required showing all the company details such as, address, Tax Compliance, banking details etc.**

## **7.6 TAX COMPLIANCE LETTER WITH A UNIQUE PIN**

*(Attached hereto is my / our Tax compliance letter with a unique pin.)*

### **IMPORTANT NOTES:**

**A full report of the Tax Compliance Certificate showing all the company details such as, address, Tax Compliance, banking details etc.**

**7.7 VALID PROOF OF ADDRESS OF THE TRAINING FACILITY IN THE NAME OF THE TRAINING SERVICE PROVIDER**

## **7.8 VALID ACCREDITATION CERTIFICATE OF THE COMPANY**

## **7.10 VALID ACCREDITATION CERTIFICATE OF THE TRAINER**

## **7.11 VALID ACCREDITATION CERTIFICATE OF THE ASSESSOR**

## **7.12 VALID ACCREDITATION CERTIFICATE OF THE MODERATOR**

**FORM OF OFFER**

**RFQ NO: NSF-IDTSKILLS-NATCERTNC-COM HEALTH/RFQ06-2024**

**REQUEST FOR QUOTATION (RFQ) FOR SKILLS TRAINING OF 25 LEARNERS ON TRAINING FOR NATIONAL CERTIFICATE COMMUNITY HEALTH WORK SP65749 FROM AROUND THE COMMUNITIES OF GALESHEWE, SOL PLAATJIES LOCAL MUNICIPALITY.**

The bidder, identified in the Offer signature block, has examined the documents listed in the Bid Data and addenda thereto as listed in the Returnable Schedules, and by submitting this Offer has accepted the Conditions of Bid.

By the representative of the bidder, deemed to be duly authorized, signing this part of this Form of Offer the bidder offers to perform all of the obligations and liabilities of the Service Provider under the contract including compliance with all its terms and conditions according to their true intent and meaning for an amount to be determined in accordance with the conditions of contract identified in the Contract Data.

**THE TOTAL OFFER IS INCLUSIVE OF VAT**

R..... (Professional fees + Disbursement fees) + (Discount if Applicable)

.....

..... (In **words**)

This Offer, with or without additional conditions, may be accepted by the Employer, through the employer's offer of appointment letter, which offer shall only become the appointment upon your acceptance thereof and your compliances with the conditions therein.

Signature(s) .....

Name(s) .....

Capacity .....

**For the bidder:** .....

*(Insert name and address of organization)*

Name & signature of witness ..... Date .....

**RFQ NO: NSF-IDTSKILLS-NATCERTNC-COM HEALTH/RFQ06-2024**

8 Schedule of Deviations

By the duly authorized representatives signing this offer, the bidder agrees to and accepts the foregoing schedule of deviations as the only deviations from and amendments to the documents listed in the bid data and addenda thereto as listed in the bid schedules, as well as any confirmation, clarification or changes to the terms of the offer agreed by the bidders and the employer during the bidding process.

- 1. Subject  
Details
- 2. Subject  
Details
- 3. Subject  
Details
- 4. Subject  
Details
- 5. Subject  
Details

## FORM OF OFFER AND ACCEPTANCE

### Acceptance

By signing this part of this form of offer and acceptance, the employer identified below accepts the tenderer's offer. In consideration thereof, the employer shall pay the contractor the amount due in accordance with the conditions of contract identified in the contract data. Acceptance of the tenderer's offer shall form an agreement between the employer and the tenderer upon the terms and conditions contained in this agreement and in the contract that is the subject of this agreement.

### The terms of the contract:

Deviations from and amendments to the documents listed in the tender data and any addenda thereto as listed in the tender schedules as well as any changes to the terms of the offer agreed by the tenderer and the employer during this process of offer and acceptance, are contained in the schedule of deviations attached to and forming part of this agreement. No amendments to or deviations from said documents are valid unless contained in this schedule.

The tenderer shall within two weeks after receiving a completed copy of this agreement, including the schedule of deviations (if any), contact the Employer or the employer's agent (whose details are given in the contract data) to arrange the delivery of any bonds, guarantees, proof of insurance and any other documentation to be provided in terms of the conditions of contract identified in the contract data. Failure to fulfill any of these obligations in accordance with those terms shall constitute a repudiation of this agreement.

Notwithstanding anything contained herein, this agreement comes into effect on the date when the tenderer receives one fully completed original copy of this document, including the schedule of deviations (if any). Unless the tenderer (now contractor) within five working days of the date of such receipt notifies the employer in writing of any reason why he cannot accept the contents of this agreement, this agreement shall constitute a binding contract between the parties.

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

Name: \_\_\_\_\_ Identity number: \_\_\_\_\_

Capacity: \_\_\_\_\_ for the Employer

Name: \_\_\_\_\_

Signature of witness: \_\_\_\_\_ Date: \_\_\_\_\_

