

## DECLARATION OF INTEREST

**BID / QUOTE NO:** \_\_\_\_\_

**BIDDER:** \_\_\_\_\_

1. Any legal person, including persons employed by the state / Council, or persons who act on behalf of the state / Council or persons having a kinship with persons employed by the state / Council, including a blood relationship, may make an offer or offers in terms of this invitation to bid (includes a price quotation, advertised competitive bid, limited bid of proposal). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state / Council, or to persons who act on behalf of the state / Council, or to persons connected with or related to them, it is required that the bidder or his authorized representative shall declare his position vis-à-vis the evaluating / adjudicating authority and/or take an oath declaring his interest, where –

- 1.1 the bidder is employed by the state / Council or acts on behalf of the state / Council; and/or
- 1.2 the legal person on whose behalf the tender document is signed, has a relationship with persons/a person who are/is involved with the evaluation / adjudication of the tender(s), or where it is known that such a relationship exists between the person or persons for or on whose behalf the declarant acts and persons who are involved with the evaluation / adjudication of the bid.

2. In order to give effect to the above, the following questionnaire shall be completed and submitted with the bid.

2.1 Full name of bidder of his / her representative \_\_\_\_\_

2.2 Identity number: \_\_\_\_\_

2.3 Position occupied in the Company (director, trustee, shareholder): \_\_\_\_\_

2.4 Company Registration number: \_\_\_\_\_

2.5 Tax Reference Number: \_\_\_\_\_

2.6 VAT Registration number: \_\_\_\_\_

2.6.1 The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / persal numbers must be indicated in paragraph 3

1 "State" means:

- (a) Any national or provincial department, national or provincial public entity of constitutional institution within the hearing of the Public Finance Management Act, 1999 (Act no. 1 of 1999);
- (b) Any municipality of municipal entity;
- (c) Provincial legislature;
- (d) National Assembly of the national Council of provinces; or
- (e) Parliament

below.

2.7 Are you or any person connected with the bidder, presently employed by the Department of Education and on the staff of Flavius Mareka TVET College or employed by the College Council of Flavius Mareka TVET College or a member of Flavius Mareka TVET College Council?

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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2.7.1 If so, state particulars:

Name of person/director/shareholder/member \_\_\_\_\_

Name of state institution at which you or the person connected to the bidder is employed. \_\_\_\_\_

Position occupied in the state institution \_\_\_\_\_

Any other particulars \_\_\_\_\_

2.7.2 If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector?

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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2.7.2.1 If yes, did you attach proof of such authority to the bid document?

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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(Note: Failure to submit proof of such authority, where applicable may result in the disqualification of the bid)

2.7.2.2 If no, furnish reasons for non-submission of such proof \_\_\_\_\_

2.8 Did you or your spouse or any of the company's directors / trustees / shareholders / members or any person connected with the bidder, conduct business with Flavius Mareka TVET College in the previous twelve (12) months?

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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2.8.1 If so, state particulars \_\_\_\_\_

2.9 Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the Department of Education and on the staff of Flavius Mareka TVET College, or employed the College Council of the Flavius Mareka TVET College, or a member of the College Council, who may be involved with the evaluation or adjudication of this tender?

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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2.9.1 If so, state particulars: \_\_\_\_\_

2.10 Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between the bidder and any person employed by the Department of Education and on the staff of Flavius Mareka TVET College, or employed by the College Council, or a member of the College Council, who may be involved in the evaluation or adjudication of this tender?

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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2.10.1 If so, state particulars: \_\_\_\_\_

2.11 Do you or any of the company's directors / trustees / shareholders / members have any interest in any other related companies whether or not they are bidding for this contract?

Yes	<input type="checkbox"/>
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No	<input type="checkbox"/>
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2.11.1 If so, state particulars: \_\_\_\_\_

3. In the event of a contract awarded to a bidder with association as stipulated above and it subsequently becomes known that false information was provided in response to the above, Flavius Mareka TVET College may, in addition to any other remedy it may have:

3.1 recover from the supplier all costs, losses or damages incurred or sustained by Flavius Mareka TVET College as a result of the contract; and/or

3.2 cancel the contract and claim any damage which Flavius Mareka TVET College may suffer by having to make less favourable arrangements offer such cancellation.

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4. Full details of directors / trustees / members / shareholders

Full Name	Identity number	Personal Income Tax Reference Number	State Employee number / Persal Number

**DECLARATION**

I, the undersigned (name) \_\_\_\_\_ certify that the information given above is correct. I accept that the College may reject the bid or act against me in terms of paragraph 23 of the GCC or as per SLA should this declaration prove to be false.

**SIGNATURE OF DECLARANT** \_\_\_\_\_ **DATE** \_\_\_\_\_

**NAME OF DECLARANT** \_\_\_\_\_

**POSITION OF DECLARANT** \_\_\_\_\_

**NAME OF COMPANY** \_\_\_\_\_