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Approved by:	Council	Issue Date:	12/03/2015	Rev:	3	16/07/2020



## **CHECKLIST**

## **Checklist**

TENDER / QUOTATION NUMBER: P19/24 (ME)

	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	(2)	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 d	ocuments	will	be	invalid.
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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: