



MBD1

## PART A INVITATION TO BID

|                                                                                                                                                                       |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|---------------|------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE THULAMELA MUNICIPALITY</b>                                                                                   |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| NOTICE NUMBER:                                                                                                                                                        | N20/2024/2025A                                                                                | CLOSING DATE: | 09 OCTOBER 2025                                                                                                  | CLOSING TIME:                                                        | 11:00 AM                                                                                  |
| DESCRIPTION                                                                                                                                                           | PROVISION OF EXTERNAL LANDFILL AUDIT WITH DETERMINATION OF REMAINING AIR SPACE AT THOHOYANDOU |               |                                                                                                                  |                                                                      |                                                                                           |
| <b>THE SUCCESSFUL BIDDER WILL BE REQUIRED TO FILL IN AND SIGN A WRITTEN CONTRACT FORM (MBD7).</b>                                                                     |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| BID RESPONSE DOCUMENTS MAY BE DEPOSITED IN THE BID BOX<br>SITUATED AT (STREET ADDRESS)                                                                                |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| OLD AGRIVEN BUILDING                                                                                                                                                  |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| THOHOYANDOU                                                                                                                                                           |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| 0950                                                                                                                                                                  |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| <b>SUPPLIER INFORMATION</b>                                                                                                                                           |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| NAME OF BIDDER                                                                                                                                                        |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| POSTAL ADDRESS                                                                                                                                                        |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| STREET ADDRESS                                                                                                                                                        |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| TELEPHONE NUMBER                                                                                                                                                      | CODE                                                                                          |               | NUMBER                                                                                                           |                                                                      |                                                                                           |
| CELLPHONE NUMBER                                                                                                                                                      |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| FACSIMILE NUMBER                                                                                                                                                      | CODE                                                                                          |               | NUMBER                                                                                                           |                                                                      |                                                                                           |
| E-MAIL ADDRESS                                                                                                                                                        |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| VAT REGISTRATION NUMBER                                                                                                                                               |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| TAX COMPLIANCE STATUS                                                                                                                                                 | TCS PIN:                                                                                      |               | OR                                                                                                               | CSD No:                                                              |                                                                                           |
| B-BBEE STATUS LEVEL VERIFICATION<br>CERTIFICATE<br>[TICK APPLICABLE BOX]                                                                                              | <input type="checkbox"/> Yes<br><br><input type="checkbox"/> No                               |               | B-BBEE STATUS<br>LEVEL SWORN<br>AFFIDAVIT<br><br><input type="checkbox"/> Yes<br><br><input type="checkbox"/> No |                                                                      |                                                                                           |
| <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<br>REPRESENTATIVE IN SOUTH AFRICA<br>FOR THE GOODS /SERVICES /WORKS<br>OFFERED?                                                                | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF]            |               | ARE YOU A FOREIGN<br>BASED SUPPLIER FOR<br>THE GOODS<br>/SERVICES /WORKS<br>OFFERED?                             |                                                                      | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES, ANSWER PART<br>B:3 ] |
| TOTAL NUMBER OF ITEMS OFFERED                                                                                                                                         |                                                                                               |               | TOTAL BID PRICE                                                                                                  |                                                                      | R                                                                                         |
| SIGNATURE OF BIDDER                                                                                                                                                   | .....                                                                                         |               | DATE                                                                                                             |                                                                      |                                                                                           |
| CAPACITY UNDER WHICH THIS BID IS<br>SIGNED                                                                                                                            |                                                                                               |               |                                                                                                                  |                                                                      |                                                                                           |
| <b>BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO:</b>                                                                                                                |                                                                                               |               | <b>TECHNICAL INFORMATION MAY BE DIRECTED TO:</b>                                                                 |                                                                      |                                                                                           |
| DEPARTMENT                                                                                                                                                            | FINANCE                                                                                       |               | CONTACT PERSON                                                                                                   | MR MADI M.S.                                                         |                                                                                           |
| CONTACT PERSON                                                                                                                                                        | MUDZILI TP                                                                                    |               | TELEPHONE NUMBER                                                                                                 | 083 256 6647                                                         |                                                                                           |
| TELEPHONE NUMBER                                                                                                                                                      | 015 962 7629                                                                                  |               | FACSIMILE NUMBER                                                                                                 |                                                                      |                                                                                           |
| FACSIMILE NUMBER                                                                                                                                                      | 015 962 4020                                                                                  |               | E-MAIL ADDRESS                                                                                                   | <a href="mailto:Madims@thulamela.gov.za">Madims@thulamela.gov.za</a> |                                                                                           |
| E-MAIL ADDRESS                                                                                                                                                        | <a href="mailto:mudzilip@thulamela.gov.za">mudzilip@thulamela.gov.za</a>                      |               |                                                                                                                  |                                                                      |                                                                                           |



## 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 ONLINE</b>                                                                                                                                                                   |                                                          |
| 1.3. THIS BID IS SUBJECT TO THE PREFERENTIAL PROCUREMENT POLICY FRAMEWORK ACT AND THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017, THE GENERAL CONDITIONS OF CONTRACT (GCC) AND, IF APPLICABLE, ANY OTHER SPECIAL CONDITIONS OF CONTRACT.                               |                                                          |
| <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 VIEW THE TAXPAYER'S PROFILE AND TAX STATUS.                                                                                        |                                                          |
| 2.3 APPLICATION FOR THE TAX COMPLIANCE STATUS (TCS) CERTIFICATE OR PIN MAY ALSO BE MADE VIA E-FILING. IN ORDER TO USE THIS PROVISION, TAXPAYERS WILL NEED TO REGISTER WITH SARS AS E-FILERS THROUGH THE WEBSITE <a href="http://WWW.SARS.GOV.ZA">WWW.SARS.GOV.ZA</a> . |                                                          |
| 2.4 FOREIGN SUPPLIERS MUST COMPLETE THE PRE-AWARD QUESTIONNAIRE IN PART B.3.                                                                                                                                                                                           |                                                          |
| 2.5 BIDDERS MAY ALSO SUBMIT A PRINTED TCS CERTIFICATE TOGETHER WITH THE BID.                                                                                                                                                                                           |                                                          |
| 2.6 IN BIDS WHERE CONSORTIA / JOINT VENTURES / SUB-CONTRACTORS ARE INVOLVED, EACH PARTY MUST SUBMIT A SEPARATE TCS CERTIFICATE / PIN / CSD NUMBER.                                                                                                                     |                                                          |
| 2.7 WHERE NO TCS IS AVAILABLE BUT THE BIDDER IS REGISTERED ON THE CENTRAL SUPPLIER DATABASE (CSD), A CSD NUMBER MUST BE PROVIDED.                                                                                                                                      |                                                          |
| <b>3. QUESTIONNAIRE TO BIDDING FOREIGN SUPPLIERS</b>                                                                                                                                                                                                                   |                                                          |
| 3.1. IS THE ENTITY A RESIDENT OF THE REPUBLIC OF SOUTH AFRICA (RSA)?                                                                                                                                                                                                   | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3.2. DOES THE ENTITY HAVE A BRANCH IN THE RSA?                                                                                                                                                                                                                         | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3.3. DOES THE ENTITY HAVE A PERMANENT ESTABLISHMENT IN THE RSA?                                                                                                                                                                                                        | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3.4. DOES THE ENTITY HAVE ANY SOURCE OF INCOME IN THE RSA?                                                                                                                                                                                                             | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 3.5. IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?                                                                                                                                                                                                         | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| 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 ABOVE.                                                    |                                                          |

**NB: FAILURE TO PROVIDE ANY OF THE ABOVE PARTICULARS MAY RENDER THE BID INVALID.  
NO BIDS WILL BE CONSIDERED FROM PERSONS IN THE SERVICE OF THE STATE.**

SIGNATURE OF BIDDER: .....

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

DATE: .....



## THULAMELA MUNICIPALITY

### INVITATION TO NOTICE

#### PROVISION OF EXTERNAL LANDFILL AUDIT WITH DETERMINATION OF REMAINING AIR SPACE AT THOHOYANDOU LANDFILL SITE

Thulamela Municipality invites prospective service providers for provision of the following service:

| Notice Number             | Description                                                                                                 | Non-Refundable Bid Price                                                                                                                             | Contact Person                                                                | Evaluation Criteria           |
|---------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------|-------------------------------|
| NO:<br>N20/2024/2025<br>A | Provision of external landfill audit with determination of remaining air space at Thohoyandou landfill site | R4.00 per page or can alternatively be downloaded from Thulamela website ( <a href="http://www.thulamela.gov.za">www.thulamela.gov.za</a> ) for free | Mr Madi M.S.<br>(083 256 6647)<br>and/or Mr<br>Mudzili T.P.<br>(015 962 7629) | 80/20<br>preference<br>points |

Tender documents are obtainable from Procurement Office, Office No. 02 at Thulamela Local Municipality Head Office, during the following times: 08:00 to 15:30 (Monday to Friday) at a **Non-refundable bid price of R4.00 per page** as from **26 September 2025** or can alternatively be downloaded from Thulamela website ([www.thulamela.gov.za](http://www.thulamela.gov.za)) for free. The tenderer(s) should also download SCM forms that are found in the **SCM-FORMS sub folder** on the website and complete as part of the Bid documents.

**The service providers must submit the completed Bid documents (in black ink) and hand deliver or courier them to Thulamela Municipality. All completed Bid documents (hand delivered or couriered) must be dropped in the BID BOX before the closing date and time of the Bids closure. The onus is on the service providers**

to make sure the Bid documents are submitted on time and late submission won't be accepted.

Interested service providers will be expected to submit the Bid documents with the following compulsory requirements.

- ❖ **Tax Compliance Status Letter or Tax Compliance Pin Number.**
- ❖ **Company registration documents (e.g., CK).**
- ❖ **Proof of registration on CSD.**
- ❖ **Proof of municipal rates and taxes or municipal service charges owed by the bidder AND ALL its directors, not in arrears for more than 3 months. (The proof of municipal rates and taxes or municipal service charges to be submitted must not be older than three (3) months from the closing date of the bid). Attach valid lease agreement in case of rental of office facilities and municipal clearance in respect of the areas exempted from billing by municipalities.**
- ❖ **List of similar projects completed in the last 5 years by the company with client's contact details, description, and contract values (Attach signed appointment letters and/or purchase orders).**

Bids will be assessed under the provisions of the following Acts and its Regulations: Municipal Finance Management Act, (Act 56 of 2003); PPPFA, Supply Chain Management Policy of the municipality in accordance with the specifications and in terms of **80/20 preferential points system**.

| <b>Specific Goals Categories (CSD will be used for verification)</b> | <b>Number of Points (80/20 system)<br/>20 Points breakdown</b> |
|----------------------------------------------------------------------|----------------------------------------------------------------|
| <b>1. 100% Black ownership</b>                                       | <b>10</b>                                                      |
| <b>2. 100% Women ownership</b>                                       | <b>5</b>                                                       |
| <b>3. Youth</b>                                                      | <b>3</b>                                                       |

|                                                                                                 |   |
|-------------------------------------------------------------------------------------------------|---|
| 4. Disability (Medical certificate will be used to verify the disability status of the bidder). | 2 |
|-------------------------------------------------------------------------------------------------|---|

Sealed bid documents must be submitted in envelopes clearly indicating "**BID NUMBER AND DESCRIPTION**" on the outside and must reach the undersigned by depositing it into the official Bid Box at the front of the main entrance to **Thohoyandou Civic Centre, Old Agriven Building, Thohoyandou** by no later than **11H00 on, 09 October 2025**.

The Municipality is not bound to accept the lowest Bid and reserves the right to accept any part of a Bid. Bids must remain valid for a period of ninety (90) days after closing date of the submission thereof.

Bids may only be submitted on the bid documentation provided by the municipality.

**NB:**

*Bids which are late, incomplete, unsigned, completed by pencil, sent by telegraph, facsimile, electronically (Fax), or E- mail and without the compulsory requirements will be disqualified.*



**MATSHIVHA M.M.**  
**ACTING MUNICIPAL MANAGER**

25/09/2025  
DATE

**SPECIFICATION FOR PROVISION OF EXTERNAL LANDFILL AUDIT WITH DETERMINATION OF REMAINING AIR SPACE THOHOYANDOU LANDFILL SITE**

| ITEM | DESCRIPTION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | QUANTITY                     | UNIT PRICE | AMOUNT |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|------------|--------|
| 1    | <p>External landfill auditor who has experience and qualification to conduct Environmental Management System relating to landfill with specific relevance to the following policy documents and legislation:</p> <ul style="list-style-type: none"> <li>○ Landfill permit,</li> <li>○ National Waste Management Strategy,</li> <li>○ SAWIS implementation guidelines,</li> <li>○ Hydrological investigations,</li> <li>○ Specific Environmental Legislation, and</li> <li>○ Any other relevant policy, or document relating to waste management in South Africa.</li> </ul> <p><b>N.B External audit should also include airspace determination once</b></p> | <b>BI-ANNUALLY (2Xtimes)</b> |            |        |
|      | <b>SUB TOTAL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                              |            |        |
|      | <b>ADD 15% VAT</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                              |            |        |
|      | <b>TOTAL</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                              |            |        |

The following is a statement of related work executed by the company/ies in the last five (5) years:

| Employer, Contact person and telephone number | Description of contract | Value of work inclusive of VAT (Rand) if applicable | Date Completed |
|-----------------------------------------------|-------------------------|-----------------------------------------------------|----------------|
|                                               |                         |                                                     |                |
|                                               |                         |                                                     |                |
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