

**SBD1**

**PART A  
INVITATION TO BID**

|                                                                                                                                                                       |                                                                                                                                                                                    |               |                                                                          |                                                                  |                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|--------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| <b>YOU ARE HEREBY INVITED TO BID FOR REQUIREMENTS OF THE (SOUTH AFRICAN NATIONAL BIODIVERSITY INSTITUTE)</b>                                                          |                                                                                                                                                                                    |               |                                                                          |                                                                  |                                                                                                       |
| BID NUMBER:                                                                                                                                                           | <b>Q7079-2020</b>                                                                                                                                                                  | CLOSING DATE: | <b>05 February 2021</b>                                                  | CLOSING TIME:                                                    | <b>11:00</b>                                                                                          |
| DESCRIPTION                                                                                                                                                           | The South African National Biodiversity Institute requires the service provider to conduct Clearing of Invasive Alien Plants: Anigozanthos flavidus in Cape Agulhas, Western Cape. |               |                                                                          |                                                                  |                                                                                                       |
| <b>BIDDING PROCEDURE ENQUIRIES MAY BE DIRECTED TO</b>                                                                                                                 |                                                                                                                                                                                    |               | <b>TECHNICAL ENQUIRIES MAY BE DIRECTED TO:</b>                           |                                                                  |                                                                                                       |
| CONTACT PERSON                                                                                                                                                        | Rorisang Modiba                                                                                                                                                                    |               | CONTACT PERSON                                                           | Virgil Jacobs                                                    |                                                                                                       |
| TELEPHONE NUMBER                                                                                                                                                      | 012 843-5332                                                                                                                                                                       |               | TELEPHONE NUMBER                                                         | 021 799 8798                                                     |                                                                                                       |
| FACSIMILE NUMBER                                                                                                                                                      | N/A                                                                                                                                                                                |               | FACSIMILE NUMBER                                                         | N/A                                                              |                                                                                                       |
| E-MAIL ADDRESS                                                                                                                                                        | <a href="mailto:R.modiba@sanbi.org.za">R.modiba@sanbi.org.za</a>                                                                                                                   |               | E-MAIL ADDRESS                                                           | <a href="mailto:V.Jacobs@sanbi.org.za">V.Jacobs@sanbi.org.za</a> |                                                                                                       |
| <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                                                                                                                                               |                                                                                                                                                                                    |               |                                                                          |                                                                  |                                                                                                       |
| SUPPLIER COMPLIANCE STATUS                                                                                                                                            | TAX COMPLIANCE SYSTEM PIN:                                                                                                                                                         |               | OR                                                                       | CENTRAL SUPPLIER DATABASE No:                                    | MAAA                                                                                                  |
| B-BBEE STATUS LEVEL VERIFICATION CERTIFICATE                                                                                                                          | TICK APPLICABLE BOX]<br><br><input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                               |               | B-BBEE STATUS LEVEL SWORN AFFIDAVIT                                      |                                                                  | [TICK APPLICABLE BOX]<br><br><input type="checkbox"/> Yes <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 REPRESENTATIVE IN SOUTH AFRICA FOR THE GOODS /SERVICES /WORKS OFFERED?                                                                         | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[IF YES ENCLOSE PROOF]                                                                                                 |               | ARE YOU A FOREIGN BASED SUPPLIER FOR THE GOODS /SERVICES /WORKS OFFERED? |                                                                  | <input type="checkbox"/> Yes <input type="checkbox"/> No<br>[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?

☐ YES ☐ NO

IS THE ENTITY LIABLE IN THE RSA FOR ANY FORM OF TAXATION?

☐ YES ☐ 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 BELOW.**

**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, 2017, 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 WWW.SARS.GOV.ZA.                                                                                                                         |
| 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 e.g. company resolution)

DATE: .....

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

## SBD 4

### DECLARATION OF INTEREST

1. Any legal person, including persons employed by the state<sup>1</sup>, or persons having a kinship with persons employed by the state, including a blood relationship, may make an offer or offers in terms of this invitation to bid (includes an advertised competitive bid, a limited bid, a proposal or written price quotation). In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the state, or to persons connected with or related to them, it is required that the bidder or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where-

- the bidder is employed by the state; and/or
- the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(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 and or adjudication of the bid.

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

2.1 Full Name of bidder or his or her representative: .....

2.2 Identity Number:.....

2.3 Position occupied in the Company (director, trustee, shareholder<sup>2</sup>, member):  
.....

2.4 Registration number of company, enterprise, close corporation, partnership agreement or trust:  
.....

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 below.

“State” means –

- (a) any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1999 (Act No. 1 of 1999);
- (b) any municipality or municipal entity;
- (c) provincial legislature;
- (d) national Assembly or the national Council of provinces; or

(e) Parliament.

"Shareholder" means a person who owns shares in the company and is actively involved in the management of the enterprise or business and exercises control over the enterprise.

2.7 Are you or any person connected with the bidder presently employed by the state? **YES / NO**

2.7.1 If so, furnish the following particulars:

Name of person / director / trustee / 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 / NO**

2.7.2.1 If yes, did you attach proof of such authority to the bid document? **YES / NO**

(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 their spouses conduct business with the state in the previous twelve months? **YES / NO**

2.8.1 If so, furnish particulars:

.....

.....

.....

2.9 Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this bid? **YES / NO**

2.9.1 If so, furnish particulars.  
 .....  
 .....  
 .....

2.10 Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this bid? **YES/NO**

2.10.1 If so, furnish particulars.  
 .....  
 .....  
 .....

2.11 Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract? **YES/NO**

2.11.1 If so, furnish particulars:  
 .....  
 .....  
 .....

**3 Full details of directors / trustees / members / shareholders.**

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

|  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|  |  |  |  |

**4      DECLARATION**

I, THE UNDERSIGNED (NAME).....

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

I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME 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 2017

This preference form must form part of all bids invited. It contains general information and serves as a claim form for preference points for Broad-Based Black Economic Empowerment (B-BBEE) Status Level of Contribution

**NB: BEFORE COMPLETING THIS FORM, BIDDERS MUST STUDY THE GENERAL CONDITIONS, DEFINITIONS AND DIRECTIVES APPLICABLE IN RESPECT OF B-BBEE, AS PRESCRIBED IN THE PREFERENTIAL PROCUREMENT REGULATIONS, 2017.**

#### 1. GENERAL CONDITIONS

1.1 The following preference point systems are applicable to all bids:

- the 80/20 system for requirements with a Rand value of up to R50 000 000 (all applicable taxes included); and
- the 90/10 system for requirements with a Rand value above R50 000 000 (all applicable taxes included).

1.2

- a) The value of this bid is estimated to not exceed R500 000 (all applicable taxes included) and therefore the 80/20 preference point system shall be applicable; or
- b) The 80/20 preference point system will be applicable to this tender.

1.3 Points for this bid shall be awarded for:

- (a) Price; and
- (b) B-BBEE Status Level of Contributor.

1.4 The maximum points for this bid are allocated as follows:

|                                                   | POINTS |
|---------------------------------------------------|--------|
| PRICE                                             | 80     |
| B-BBEE STATUS LEVEL OF CONTRIBUTOR                | 20     |
| Total points for Price and B-BBEE must not exceed | 100    |

1.5 Failure on the part of a bidder to submit proof of B-BBEE Status level of contributor together with the bid, will be interpreted to mean that preference points for B-BBEE status level of contribution are not claimed.

1.6 The purchaser reserves the right to require of a bidder, either before a bid is adjudicated or at any time subsequently, to substantiate any claim in regard to preferences, in any manner required by the purchaser.

#### 2. DEFINITIONS

- |    |                                         |                                 |
|----|-----------------------------------------|---------------------------------|
| 1) | issued by an authorized body or person; | B-BBEE Status level certificate |
| 2) | by the B-BBEE Codes of Good Practice;   | A sworn affidavit as prescribed |
| 3) | prescribed in terms of the B-BBEE Act;  | Any other requirement           |

#### 4. POINTS AWARDED FOR B-BBEE STATUS LEVEL OF CONTRIBUTOR

- 4.1 In terms of Regulation 6 (2) and 7 (2) of the Preferential Procurement Regulations, preference points must be awarded to a bidder for attaining the B-BBEE status level of contribution in accordance with the table below:

| B-BBEE Status Level of Contributor | Number of points (90/10 system) | Number of points (80/20 system) |
|------------------------------------|---------------------------------|---------------------------------|
| 1                                  | 10                              | 20                              |
| 2                                  | 9                               | 18                              |
| 3                                  | 6                               | 14                              |
| 4                                  | 5                               | 12                              |
| 5                                  | 4                               | 8                               |
| 6                                  | 3                               | 6                               |
| 7                                  | 2                               | 4                               |
| 8                                  | 1                               | 2                               |
| Non-compliant contributor          | 0                               | 0                               |

#### 5. BID DECLARATION

- 5.1 Bidders who claim points in respect of B-BBEE Status Level of Contribution must complete the following:

#### 6. B-BBEE STATUS LEVEL OF CONTRIBUTOR CLAIMED IN TERMS OF PARAGRAPHS 1.4 AND 4.1

- 6.1 B-BBEE Status Level of Contributor: . = .....(maximum of 10 or 20 points)

(Points claimed in respect of paragraph 7.1 must be in accordance with the table reflected in paragraph 4.1 and must be substantiated by relevant proof of B-BBEE status level of contributor.)

#### 7. SUB-CONTRACTING

- 7.1 Will any portion of the contract be sub-contracted?

(***Tick applicable box***)

|     |                          |    |                          |
|-----|--------------------------|----|--------------------------|
| YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

- 7.1.1 If yes, indicate:

- i) What percentage of the contract will be subcontracted.....%
- ii) The name of the sub-contractor.....
- iii) The B-BBEE status level of the sub-contractor.....
- iv) Whether the sub-contractor is an EME or QSE

(***Tick applicable box***)

|     |                          |    |                          |
|-----|--------------------------|----|--------------------------|
| YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
|-----|--------------------------|----|--------------------------|

- v) Specify, by ticking the appropriate box, if subcontracting with an enterprise in terms of Preferential Procurement Regulations, 2017:

| Designated Group: An EME or QSE which is at least 51% owned by:   | EME<br>√ | QSE<br>√ |
|-------------------------------------------------------------------|----------|----------|
| Black people                                                      |          |          |
| Black people who are youth                                        |          |          |
| Black people who are women                                        |          |          |
| Black people with disabilities                                    |          |          |
| Black people living in rural or underdeveloped areas or townships |          |          |
| Cooperative owned by black people                                 |          |          |
| Black people who are military veterans                            |          |          |
| <b>OR</b>                                                         |          |          |
| Any EME                                                           |          |          |
| Any QSE                                                           |          |          |

**8. DECLARATION WITH REGARD TO COMPANY/FIRM**

8.1 Name of company/firm:.....

8.2 VAT registration number:.....

8.3 Company registration number:.....

8.4 TYPE OF COMPANY/ FIRM

- ☐ Partnership/Joint Venture / Consortium
- ☐ One person business/sole propriety
- ☐ Close corporation
- ☐ Company
- ☐ (Pty) Limited

[TICK APPLICABLE BOX]

8.5 DESCRIBE PRINCIPAL BUSINESS ACTIVITIES

.....  
.....  
.....  
.....

8.6 COMPANY CLASSIFICATION

- ☐ Manufacturer
- ☐ Supplier
- ☐ Professional service provider
- ☐ Other service providers, e.g. transporter, etc.

[TICK APPLICABLE BOX]

8.7 Total number of years the company/firm has been in business:.....

8.8 I/we, the undersigned, who is / are duly authorised to do so on behalf of the company/firm, certify that the points claimed, based on the B-BBE status level of contributor indicated in paragraphs 1.4 and 6.1 of the foregoing certificate, qualifies the company/ firm for the preference(s) shown and I / we 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 6.1, the contractor may be required to furnish documentary proof to the satisfaction of the purchaser that the claims are correct;
- iv) If the B-BBEE status level of contributor has been claimed or obtained on a fraudulent basis or any of the conditions of contract have not been fulfilled, the purchaser may, in addition to any other remedy it may have –
  - (a) disqualify the person from the bidding 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 bidder or contractor, its shareholders and directors, or only the shareholders and directors who acted on a fraudulent basis, be restricted by the National Treasury 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.

WITNESSES

1. ....

2. ....

.....  
SIGNATURE(S) OF BIDDER(S)

DATE: .....

ADDRESS .....

.....

.....

## DECLARATION OF BIDDER'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES

- 1 This Standard Bidding Document must form part of all bids invited.
- 2 It serves as a declaration to be used by institutions in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
- 3 The bid of any bidder may be disregarded if that bidder, or any of its directors have-
  - a. abused the institution's supply chain management system;
  - b. committed fraud or any other improper conduct in relation to such system; or
  - c. failed to perform on any previous contract.
- 4 **In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.**

| Item  | Question                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Yes                             | No                             |
|-------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------|
| 4.1   | Is the bidder or any of its directors listed on the National Treasury's database as companies or persons prohibited from doing business with the public sector?<br><hr/> (Companies or persons who are listed on this database were informed in writing of this restriction by the National Treasury after the <i>audi alteram partem</i> rule was applied).                                                                                                                | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.1.1 | If so, furnish particulars:                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 |                                |
| 4.2   | Is the bidder or any of its directors listed on the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004)?<br><b>To access Register enter the National Treasury's website, <a href="http://www.treasury.gov.za">www.treasury.gov.za</a>, click on the icon "Register for Tender Defaulters" or submit your written request for a hard copy of the Register to facsimile number (012) 3265445.</b> | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |

|       |                                                                                                                                                                                    |                                 |                                |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|--------------------------------|
| 4.2.1 | If so, furnish particulars:                                                                                                                                                        |                                 |                                |
| 4.3   | Was the bidder or any of its directors convicted by a court of law (including a court outside of the Republic of South Africa) for fraud or corruption during the past five years? | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.3.1 | If so, furnish particulars:                                                                                                                                                        |                                 |                                |
| 4.4   | Was any contract between the bidder and any organ of state terminated during the past five years on account of failure to perform on or comply with the contract?                  | Yes<br><input type="checkbox"/> | No<br><input type="checkbox"/> |
| 4.4.1 | If so, furnish particulars:                                                                                                                                                        |                                 |                                |

**SBD 8**

### CERTIFICATION

I, THE UNDERSIGNED (FULL NAME).....  
**CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS TRUE AND CORRECT.**

**I ACCEPT THAT, IN ADDITION TO CANCELLATION OF A CONTRACT, ACTION MAY BE TAKEN AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.**

.....  
**Signature**

.....  
**Date**

.....  
**Position**

.....  
**Name of Bidder**

## CERTIFICATE OF INDEPENDENT QUOTATION DETERMINATION

- 1 This Standard Bidding Document (SBD) must form part of all quotations<sup>1</sup> invited.
- 2 Section 4 (1) (b) (iii) of the Competition Act No. 89 of 1998, as amended, prohibits an agreement between, or concerted practice by, firms, or a decision by an association of firms, if it is between parties in a horizontal relationship and if it involves collusive bidding (or bid rigging).<sup>2</sup> Collusive bidding is a *per se* prohibition meaning that it cannot be justified under any grounds.
- 3 Treasury Regulation 16A9 prescribes that accounting officers and accounting authorities must take all reasonable steps to prevent abuse of the supply chain management system and authorizes accounting officers and accounting authorities to:
  - a. disregard the bid of any bidder if that bidder, or any of its directors have abused the institution's supply chain management system and or committed fraud or any other improper conduct in relation to such system.
  - b. cancel a contract awarded to a supplier of goods and services if the supplier committed any corrupt or fraudulent act during the bidding process or the execution of that contract.
- 4 This SBD serves as a certificate of declaration that would be used by institutions to ensure that, when bids are considered, reasonable steps are taken to prevent any form of bid-rigging.
- 5 In order to give effect to the above, the attached Certificate of Bid Determination (SBD 9) must be completed and submitted with the bid:
- 6 Includes price quotations, advertised competitive bids, limited bids and proposals.
- 7 Bid rigging (or collusive bidding) occurs when businesses, that would otherwise be expected to compete, secretly conspire to raise prices or lower the quality of goods and / or services for purchasers who wish to acquire goods and / or services through a bidding process. Bid rigging is, therefore, an agreement between competitors not to compete.

### CERTIFICATE OF INDEPENDENT BID DETERMINATION

I, the undersigned, in submitting the accompanying bid:

**SANBI: Q7079-2020 - The South African National Biodiversity Institute requires the service provider to conduct Clearing of Invasive Alien Plants: Anigozanthos flavidus in Cape Agulhas, Western Cape.**

---

(Quotation Number and Description)

In response to the invitation for the quote made by:

SANBI

Do hereby make the following statements that I certify to be true and complete in every respect:

I certify, on behalf of: \_\_\_\_\_ that:

(Name of Bidder)

1. I have read and I understand the contents of this Certificate;
2. I understand that the accompanying bid will be disqualified if this Certificate is found not to be true and complete in every respect;
3. I am authorized by the bidder to sign this Certificate, and to submit the accompanying bid, on behalf of the bidder;
4. Each person whose signature appears on the accompanying bid has been authorized by the bidder to determine the terms of, and to sign the bid, on behalf of the bidder;
5. For the purposes of this Certificate and the accompanying bid, I understand that the word "competitor" shall include any individual or organization, other than the bidder, whether or not affiliated with the bidder, who:
  - (a) has been requested to submit a bid in response to this bid invitation;
  - (b) could potentially submit a bid in response to this bid invitation, based on their qualifications, abilities or experience; and
  - (c) Provides the same goods and services as the bidder and/or is in the same line of business as the bidder

6. 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>3</sup> will not be construed as collusive bidding.
7. In particular, without limiting the generality of paragraphs 6 above, there has been no consultation, communication, agreement or arrangement with any competitor regarding:
  - (a) prices;
  - (b) geographical area where product or service will be rendered (market allocation)
  - (c) Methods, factors or formulas used to calculate prices;
  - (d) The intention or decision to submit or not to submit, a bid;
  - (e) The submission of a bid which does not meet the specifications and conditions of the bid; or
  - (f) Bidding with the intention not to win the bid.
8. In addition, there have been no consultations, communications, agreements or arrangements with any competitor regarding the quality, quantity, specifications and conditions or delivery particulars of the products or services to which this bid invitation relates.
9. Joint venture or Consortium means an association of persons for the purpose of combining their expertise, property, capital, efforts, skill and knowledge in an activity for the execution of a contract.
10. 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.
11. 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.

.....  
Signature

.....  
Date

.....  
Position

.....  
Name

## CALL FOR EXPRESSION OF INTEREST

Issued by the Biological Invasions Directorate

South African National Biodiversity Institute

Contract number: Q7079-2020

### TERMS OF REFERENCE:

Clearing of Invasive Alien Plants: *Anigozanthos flavidus* in Cape Agulhas, Western Cape.

Contractor to respond with quotation/Expression of interest by: 05 February 2021 to SCM via email [S.SCM-Quotations@sanbi.org.za](mailto:S.SCM-Quotations@sanbi.org.za) with a copy to Rorisang Modiba at [R.Modiba@sanbi.org.za](mailto:R.Modiba@sanbi.org.za)

### Background and overview of task

The Biological Invasions Directorate (BID) of the South African National Biodiversity Institute (SANBI) targets localized invasive alien species. These species have not yet reached their full invasive potential and occur as relatively small or localized populations. Removal of these populations at an early stage of invasion will limit spread to other areas, save on future costs of control, and contribute to the ultimate goal of eradication of these species from South Africa.

SANBI is targeting *Anigozanthos flavidus* for eradication in the Western Cape.

### Duration of the contract and person days:

This contract is for a **6 day** period between **January to February 2021**.

### Contract budget:

The contract budget is calculated using Working for Water's National Resource Management rates (see table 4). For this contract these rates translate to R 3,300.00 per day.

### Details of the work required:

SANBI requires the services of a Service provider (contractor and team) to supply the following services:

- (1) Survey and clear the species and populations in the table below.
- (2) Collect data as specified.

| Species name                 | Locality     | Population size in ha | Work days | Training days | Number of workers needed |
|------------------------------|--------------|-----------------------|-----------|---------------|--------------------------|
| <i>Anigozanthos flavidus</i> | Cape Agulhas | 68                    | 6         | 0             | Contractor + 7 workers   |

Table 1: Species and locality list

GPS localities of these species will be supplied by SANBI to the successful service provider. The service provider will be required to survey for more populations as specified on datasheets. SANBI will train the team on species identification, completion of data collection sheets and in the different survey and clearing methods required. Clearing operations will

be carefully monitored by the SANBI staff.

This work requires a physically fit team of 8 people (one qualified team leader (contractor or supervisor) with 3 herbicide applicators), who has had previous experience in clearing invasive alien plants to:

- Visit each of the known localities.
  - Data from each population cleared must be recorded on data collection sheets and suitable electronic devices. Null record data must also be collected.
  - Completed sheets and GPS tracks and points are to be submitted to SANBI at agreed intervals. Careful data collection is vital. Data collection and clearing methods differ for each species. Specifications on data collection and clearing methods will be discussed during the training provided by SANBI.
  - Ability to use a GPS to record locality of invasive alien populations and clearing operations is advantageous.
  - Cleared material must be disposed of safely, as per instructions from the SANBI.
  - The applicant should be in possession (or employ a driver) with a valid driver's license and PDP to transport the team to site and should be on site at all times during the contract.
  - The team must have a sound level of physical fitness and the ability to work in difficult terrain and dense vegetation.
- Adequate supervision of the work force (includes general operations supervision and financial management)
- Work to be carried out by a team of semi-skilled workers trained to:
    - Collect data
    - Survey for new populations of target species
    - Undertake the manual clearing of the specified species

#### **Minimum requirements**

- a) SBD forms (SBD 1, 4, 6.1, 8 and 9) The Standard Bidding Forms (included in the bid documentation) must be completed and submitted with this proposal.
- b) A current copy of the Central Suppliers Database (CSD) registration report or registration number must be provided.
- c) An original or certified copy of B-BBEE certificate or sworn affidavit. (Please note that failure to submit a valid original or certified B-BBEE certificate/sworn affidavit mentioned above will result in the tenderer not being awarded B-BBEE preference points)
- d) Service providers with one or more employees are required by law to contribute to the Compensation Fund. A valid letter of good standing certificate with COIDA is required. The certificate should be issued by the Department of Labour.
- e) Be in possession of a road worthy vehicle and trailer. If this is a bakkie, it must be long wheel based, and the back must be fitted with secure seats with seatbelts. (If a vehicle is going to be hired, a copy of the vehicle lease agreement should be provided within 7 days and must be equal to the period of the contract. If a bidder failed to submit proof of lease within 7 days, the next successful bidder will be recommended.
- f) **Proof of Public Liability Insurance or proof of application of a minimum of R1, 000,000.00 (One Million Rand) of Public Liability insurance. If you have submitted proof of application the bidder will be required to submit proof of insurance within 7 days of appointment.** (To protect both SANBI and the contractor in the case of claims due to accidents such as inappropriate use of herbicides, fires caused by crew members or

motor vehicle accidents caused as a result of implementing the contract. This insurance can be obtained once the contractor is appointed)

#### **Equipment required:**

1. Appropriate PPE: e.g. safety boots, rubber gloves, leather gloves, sunhats or, 2 piece-overalls, herbicide masks, chainsaw PPE, reflector vests and goggles. SANBI will reimburse the contractor using the EPWP stipulated rates.
2. In addition to standard PPE, the contractor must provide COVID-19 required PPE such as masks, hand gloves, visors etc. SANBI will reimburse the contractor using the Department of Environment Forestry and Fisheries (DEFF) stipulated rates.
3. Appropriate equipment: Knapsacks, hand sprays, secateurs chainsaws, ropes and harnesses, step ladders, rakes, brooms picks, hoes, spades and measuring tape. SANBI will reimburse the contractor using the EPWP stipulated rates.
4. In addition to standard equipment, the contractor must provide COVID-19 required equipment such hand soap and sanitizers, thermometers, etc. SANBI will reimburse the contractor using the DEFF stipulated rates.
5. A road worthy vehicle suitable for transporting 8 people (Long base bakkie). The vehicle must meet the requirements of a construction vehicle (e.g. fitted with a revolving orange lamp, secured benches with seatbelts, speed limit displayed).
6. A licensed and roadworthy trailer to transport tools, herbicides, equipment and plant material (wood) to dumping sites.
7. The vehicle must have a valid license, reflectors, no leakages and should pass a roadworthiness inspection before the contract starts.
8. Admin material for data collection (pens, eraser, measuring tapes, file for documentation.)

#### **Equipment to be supplied by SANBI**

- a. GPS units
- b. Datasheets & Clipboards.
- c. Herbicides, adjuvants and dyes

#### **Team structure and List of certifications**

|       | Names        | Roles      | Male/<br>Female<br>(M/F) | Under 35<br>years old<br>(Y/N) | Physically<br>challenged<br>(Y/N) | Certification (1,2,3)                           |
|-------|--------------|------------|--------------------------|--------------------------------|-----------------------------------|-------------------------------------------------|
| e.g.: | Paul<br>Roos | Supervisor |                          |                                |                                   | H&S, 1 <sup>st</sup> Aid, herbicide application |
| 1     |              |            |                          |                                |                                   |                                                 |
| 2     |              |            |                          |                                |                                   |                                                 |
| 3     |              |            |                          |                                |                                   |                                                 |
| 4     |              |            |                          |                                |                                   |                                                 |
| 5     |              |            |                          |                                |                                   |                                                 |
| 6     |              |            |                          |                                |                                   |                                                 |

|   |  |  |  |  |  |  |
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|   |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |

Table 2: Team structure and List of certifications

### **Special conditions of the contract:**

The successful contractor will be required to provide the following information:

1. Provide an eNatis driver query form, obtainable from the licensing department that proves the validity of the driver's license.
2. Contractor will be required to submit a thorough risk assessment and safe work procedure document in response to the COVID-19 pandemic. This is critical in order to protect the health and safety of all persons and members of the public that interact or are exposed to our work activities from COVID – 19 risk. These measures include infection transmission prevention, maintaining a minimum distance between participants at all times, the provision of protective equipment and the implementation of hygiene procedures

### **Quotation evaluation**

**It is compulsory for applicants to supply enough information on the bidding company, proposed team leader (i.e. infield supervisor), qualifications (attach certificates), structure of the team and employment of workers meeting EPWP targets to be considered for the evaluation process.**

The Preferential Procurement Policy Framework Act (No. 5 of 2000) applies to these terms of reference. In accordance with this act the 80/20 point system will be applied in evaluating quotes, where technical merit constitute 80 points and BEE constitutes 20 points. Evaluation of proposals will be done according to the criteria listed below. Sufficient information should be provided to allow the evaluation panel to score the proposals against these criteria.

Applications will not be evaluated on price. The successful applicant will be given a contract with a budget based on the EPWP rates.

Evaluation of proposals will be done according to the following criteria:

| <b>Criteria for measuring Functionality</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | <b>Weight</b>                               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|
| <b>Experience in clearing and data collection on any of the target species. Supply company profile with references.</b> <ul style="list-style-type: none"> <li>• 3 years and more clearing experience with data collection</li> <li>• 3 years clearing experience without data collection</li> <li>• 2 years clearing experience with data collection</li> <li>• 2 year clearing experience without data collection</li> <li>• 1 year clearing experience with data collection</li> <li>• 1 year clearing experience without data collection</li> </ul>                                          | <b>30</b><br><br>5<br>4<br>3<br>2<br>2<br>1 |
| <b>Qualification, expertise and skills of team and contractor/supervisor (person responsible for day to day supervision of the team) – see list below</b> <ul style="list-style-type: none"> <li>• Contractor/Supervisor with PCO or Limited PCO, FA, OHS; team with Herbicide applicator training</li> <li>• Contractor/Supervisor with Herbicide applicator, FA, OHS and team with Herbicide applicator training</li> <li>• Contractor/Supervisor with PCO/Limited PCO or Herbicide applicator and team with no training</li> <li>• Contractor/Supervisor and team with no training</li> </ul> | <b>30</b><br><br>5<br>4<br>3<br>2-1         |

|                                                                                                                                                                                                                                                                                                                                                                                                            |                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| <b>Distance from contractor's home to nearest site (Provide proof of residence)</b> <ul style="list-style-type: none"> <li>• 100 km and under</li> <li>• 101-150 km</li> <li>• 151-200 km</li> <li>• 201 km and more</li> </ul>                                                                                                                                                                            | <b>20</b><br>5<br>4<br>3<br>2-1 |
| <b>Contractor team make up (Provide team structure indicating gender and disability)</b> <ul style="list-style-type: none"> <li>• Have at least 2% disable, 65% female and 70% youth</li> <li>• Have at least 2% disable, 65% female and 60% youth</li> <li>• Have at least 2% disable, 60% female and 55% youth</li> <li>• Team provided without specification of gender, youth and disability</li> </ul> | <b>20</b><br>5<br>4<br>3<br>2-1 |
| <b>TOTAL</b>                                                                                                                                                                                                                                                                                                                                                                                               | <b>100</b>                      |
| Abbreviation:<br><b>PCO:</b> Pest Control Officer license; <b>FA:</b> First Aid Level 1 certificate; <b>OHS:</b> Occupational Health and Safety Level 1 certificate.                                                                                                                                                                                                                                       |                                 |

Table 3: evaluation criteria

*Proposals that fail to score a minimum of 50 out of a possible 100 points for functionality will not be eligible for further consideration.*

*Sufficient information must be provided to allow the evaluation panel to score quotations against all these criteria. Failure to do so may result in the disqualification of quotations.*

## **General**

### **Reporting requirements and management**

- The contractor will report to Project Coordinator/ Technician:Detection and Eradication.
- All data collected must be submitted to Project Coordinator/ Technician:Detection and Eradication.

### **Contractual arrangements**

- A contract will be drawn up between SANBI and the service provider.
- Payment will be made on the basis of days worked. Beneficiaries are expected to work 8 hours every day.
- Payment will be made after the receipt of an invoice from the service provider
- Original supporting documents must be submitted with each invoice BEFORE payment will be made
- The contract will be for a maximum value.
- Payment of invoices will be within 30 days from the date of receiving the invoice and correct supporting documents.
- Service Providers must make sure that their status on the Central Supplier Database (CSD) remain compliant to minimise delay of appointments and payments.

### **NRM rates for wages, PPE, equipment and transport**

| Job Descriptions              | Wages          | PPE     | Equipment |
|-------------------------------|----------------|---------|-----------|
| Contractor daily rate         | R 371.80       | R 3.90  | R 11.15   |
| Supervisor                    | R 217          | R 3.90  | R 11.15   |
| Health and safety & 1st Aider | R 128.20       | R 12.85 | R 6.05    |
| Chainsaw operator             | R 151.90       | R 21.20 | R 197.80  |
| Brushcutter operator          | R 151.90       | R 21.20 | R 197.80  |
| Driver                        | R 151.90       | R 12.85 | R 6.05    |
| General workers               | R 121.10       | R 6.45  | R 14.75   |
| Herbicide applicators         | R 128.20       | R 12.85 | R 6.05    |
| Administration                | R81            |         |           |
| Catering for training         | R60/person/day |         |           |

|                 |             |            |                                                                              |
|-----------------|-------------|------------|------------------------------------------------------------------------------|
| Transport rates | 4x2 vehicle | R4.20/km   | 4x4 vehicle usage is only allowed when 4x2 vehicles won't handle the terrain |
|                 | 4x4 vehicle | R5.00/km   |                                                                              |
|                 | Trailer     | R55.05/day |                                                                              |

Table 4: 2020/21 rates for wages, PPE, equipment and transport.

**List of references must be submitted in this format:**

| Description of project | Name of client | Name of responsible person | Telephone number | Email address | Year completed | Contract amount |
|------------------------|----------------|----------------------------|------------------|---------------|----------------|-----------------|
|                        |                |                            |                  |               |                |                 |
|                        |                |                            |                  |               |                |                 |

Table 5: format for submission of references

**Checklist for submission:**

| Item                                                          | Please tick (✓) |
|---------------------------------------------------------------|-----------------|
| SBD forms                                                     |                 |
| Company profile with details of experience                    |                 |
| Copies of relevant (valid) certificates                       |                 |
| Proof of address                                              |                 |
| Valid COIDA letter of Good Standing                           |                 |
| List of team structure and categories (as per above criteria) |                 |

Table 6: Checklist for submission

NB: The SANBI BID unit in the Western Cape has advertised for a number of contracts for this financial year. Contractors are welcome to apply for multiple contracts. Although a contractor can be appointed for more than one contract in a region, the contractor can only work on one contract at a time.

Quotations must be submitted no later than **05 February 2021 at 11h00**. Applications must be emailed to [S.SCM-Quotations@sanbi.org.za](mailto:S.SCM-Quotations@sanbi.org.za) with a copy to Ms. Modiba at [R.modiba@sanbi.org.za](mailto:R.modiba@sanbi.org.za)

**Pictures of plants needed to be cleared**



Young *Anigozanthos vlavidus* plants (pic: Biological invasions directorate)



*A. vlavidus* flowers (pic: www.bing.com)

