



**UBUHLEBEZWE MUNICIPALITY  
CHIEF FINANCIAL OFFICE  
SUPPLY CHAIN MANAGEMENT UNIT**

**Tel : 039 834 7700 / 7745 /7748 /7749  
Fax: 039 834 2978 / 039 834 1168  
Email: [procurement@ubuhlebezwe.org.za](mailto:procurement@ubuhlebezwe.org.za)**

**QUOTE NO: UBU-Q-07/05/14  
Date: 19 MAY 2014**

**REF NO: 25470**

**Dear Sir / Madam  
REQUEST FOR FORMAL WRITTEN PRICE QUOTATIONS FOR HIRING OF PLANT  
EQUIPMENT.**

**Kindly furnish me with a written quotation for the supply of the goods/services as  
detailed in the enclosed schedule.**

**The quotation must be submitted on the letterhead of your business and must be submitted  
in a sealed envelope to the Tender Box. The envelope must be clearly marked " HIRING OF  
PLANT EQUIPMENT": & UBU-Q-07/05/14" not later than the 30 MAY 2014 at 12h00 to:  
29 Margaret Street, Ixopo 3276**

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The following conditions will apply:

- Price(s) quoted must be valid for at least thirty (30) days from date of your offer.
- Price(s) quoted must be firm and must be inclusive of VAT.
- A firm delivery period must be indicated.
- This quotation will be evaluated in terms of the 80/20 preference point system as prescribed in the Preferential Procurement Policy Framework Act (No 5 of 2000) and for this purpose the enclosed forms MBD 2, MBD 4, MBD 6.1, MBD 8 & MBD 9 must be scrutinized, completed and submitted together with your quotation.
- Tax Clearance Certificate(MBD2)
- A proof of registration in the Uthmaniyana Municipality database
- **BBBEE Certificate bearing SANAS LOGO (if your certificate does not have SANAS logo, it will be regarded as invalid)**
- Proof of Company Registration Document
- Copy of ID if Sole Trader
- Letter/Statement confirming status of municipal accounts (i.e rates, water)
- Attach the affidavit confirming that none of the Directors/Shareholders are employed in the Service of the state.

**NB: No quotations will be considered from persons in the service of the state.**

The council does not bind itself to accept the lowest or any quotation and reserves the right to accept the quotation as whole or in part, at the rates quoted  
Failure to comply with these conditions may invalidate your offer.

Yours faithfully

  
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Mr G M Sineke  
Municipal Manager

ITEM NUMBER	QUANTITY	DESCRIPTION
1	1X20	TON EXCAVATOR 30HRS
2		10 m <sup>3</sup> TIP TRUCKS 30HRS
3		ESTABLISHMENT 3HRS
4		DE-ESTABLISHMENT 3HRS
		TO SUPPLY GRAVEL FROM THE NEAREST QUARRY TO SITE TO COVER ±300 m IN WARDS 6, 3 & 4 (±300M/DAY)
SUBTOTAL		
VAT (IF VENDOR)		
TOTAL		

DELIVERY ADDRESS:  
**29 MARGARET STREET**  
**IXOPO**  
**3276**

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