



Automotive Industry Development Centre  
Your partner in becoming globally competitive

73 – 2<sup>nd</sup> Avenue  
Newton Park  
Port Elizabeth  
PO Box 63835  
Greenacres  
6057 Port Elizabeth

Tel: +27 (41) 393 2100

Fax: +27 (41) 363 0762

Reg. Nr. 2003/018741/07

## APPLICATION TO BE REGISTERED ON THE AIDC DEVELOPMENT CENTRE SUPPLIER DATABASE

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**TO ALL SUPPLIERS SEEKING REGISTRATION AS AN APPROVED SUPPLIER ON THE  
DATABASE OF AIDC DEVELOPMENT CENTRE (PTY) LTD**

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To comply with the procedures as set out in the AIDC Development Centre Supply Chain Management Policy, defined in terms of the Public Finance Management Act, Act 1 of 1999 as amended and as per National Treasury Regulations 16A, AIDC Development Centre is in the process of updating its supplier database to be used for sourcing services and goods.

The AIDC Development Centre (Pty) Ltd, hereby invite potential supplier to register as approved suppliers on the database in accordance with the list of commodities as detailed in the document.

**The purpose of this database is to give all prospective suppliers an equal opportunity to submit quotations, proposals and bids to AIDC Development Centre.**

**Attached Please find an official AIDC supplier application form**

**A fully completed database application form should be returned to:**

**AIDC Development Centre  
Procurement Office  
73 – 2<sup>nd</sup>  
Newton Park  
Port Elizabeth**

**NB: ONLY ORIGINAL SUBMITTED FORMS WILL BE ACCEPTED, forms can be downloaded from AIDC website, [www.aidcec.co.za](http://www.aidcec.co.za)**



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**BUSINESS TYPE**

Please indicate the nature of Operations, products or service applicable to your business by ticking an appropriate box.

<b>COMMODITIES</b>	<b>✓</b>	<b>COMMODITIES</b>	<b>✓</b>
Data archiving services		Events Management (organizers, venue, conferences, etc.)	
Stock Taking		Corporate Gifts and Clothing	
Creative Design Services		Protective Clothing/ Safety apparel and footwear	
Newspaper Subscriptions		Florists	
Reproduction services (includes bulk printing, photocopying and binding)		Financial Services (Taxation issues, Corporate Governance, Strategic Planning, etc.)	
Computer Equipment and Accessories		Healthcare services, (e.g Occupational Health Practitioners)	
Hardware Equipments and Accessories (electric screwdrivers, drills, Steel lockers.etc)		Training Providers (Wellness Programmes, Business Improvements, Office Soft Skill Development, etc.)	
Workbenches, Shelving and racking		Staff Relocations	
RF Scanners		Credit Checks Services	
Data Management Services			
Office Furniture (Desk and Accessories), including office furniture design and manufacturing			



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<b>Kitchenware and Supplies (Cutlery, Electrical Appliances and Coffee/Tea, etc.)</b>			

**Please note that the supplier is requested to provide Company Primary Function from the list above : (NB : Failure to complete this section will results in your application being declined)**

Company Primary Function	
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## SUPPLIER APPLICATION FORM

### IMPORTANT NOTES

Please read carefully

- To be completed by **all** suppliers seeking registration;
- The questionnaire must be completed in **full** and be **signed by the owners in order to be accepted**.
- A **company profile** must accompany the registration form but will **not be accepted** as substitute for the application form – all fields on application form **MUST** be completed by the applicant.
- In the company profile please include **profiles of management**.
- Applicants will be contacted via e-mail and **must** therefore submit an **e-mail address**; failure to comply will result in exclusion of the supplier from the registration process.
- Suppliers will **be notified** whether their application was accepted or not by means of written letter.
- Supplier must comply with all the **registration-criteria** for registration to be finalized - **failure** to do so will result in the application being declined.

Sealed Supplier Database Application forms with required documentation marked "AIDC Development Centre, 73 – 2<sup>nd</sup> Avenue Newton Park, Port Elizabeth, 6057

**NB: Applications submitted by fax or email will not be accepted.**

**No telephonic enquiries will be attended to.**



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**Supplier Details:**

Company / Supplier Name:																						
Company / CC Registration Number:																						
VAT Registration Number (If Applicable):																						
<b>Income Tax Reference Number (mandatory):</b>																						
E-mail Address:																						
Telephone Number:																						
Fax Number:																						
Postal Address: (Compulsory)																						
Code																						
Physical Address: (Compulsory)																						
Code																						



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**Type of Firm:** (Please tick the relevant box)

1	Public Company (Ltd)	
2	Private Company (Pty) Ltd	
3	Closed Corporation (CC)	
4	Other (Specify)	
5	Joint Venture	
6	Consortium	
7	Sole Proprietor	
8	Partnership	

**Main Contact Person in your Company:**

Name:																		
Company Position:																		
Cell Phone Number:																		
Fax Number:																		
E-Mail Address:																		



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**List all partners, proprietors and shareholders (compulsory)**

Name	Position occupied in the enterprise	Citizenship	ID Number

**Note:** Where owner are themselves a company or partnership, owners of the holding firm must be identified.

**Scorecard type of your enterprise (Please tick the relevant box) Compulsory**

Large Enterprise- (> R35 Million Turnover)	<input type="checkbox"/>	Please provide B-BBEE certificate
Qualifying Small Enterprise (between R5 Million & R35 Million)	<input type="checkbox"/>	Please provide B-BBEE certificate
Micro Enterprise (<R5 Million)	<input type="checkbox"/>	If not rated, please provide a letter from your accountants stating your turnover per annum



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**HDI (Historically Disadvantaged Individual) Ownership Status (Please tick the relevant box and provide percentage)**  
**(Failure to complete this section will result in the application being declined)**

Total <b>Black ownership</b> percentage		%
<b>Black woman</b> owned enterprise		%
<b>Youth</b> owned enterprise		%
<b>People with disability</b> owned enterprise (Please provide a copy of your health certificate)		%

**List the three largest most important contracts/assignments performed by your firm in the last 12 months.**

<b>Work Performed</b>	<b>To Whom</b>	<b>Contact Person &amp; Contact Details</b>	<b>Period</b>	<b>Value</b>
1.				
2.				
3.				





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**CURRENT EMPLOYMENT PORTFOLIO- (Mandatory) Failure to complete this will disqualify your application.**

Organisational Structure	Top Management		Senior Management		Professionally Qualified and experienced specialists in mid management		Skilled Technical and academically qualified workers, junior management, supervisory and foreman		Semi skilled and discretionary decision making		Unskilled and defined decision making		Total
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Black													
Coloured													
Indian													
White													
Other													
Disabled													
Total permanent employed													
Total employed													



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**Documents to be submitted by the Supplier (Compulsory)**

- ❖ Certified Company Registration Documents (including CK1 and CK2)
- ❖ Certified Identity Documents of Directors, Owners, Partners, Members or Shareholder.
- ❖ Certified proof of shareholding documents (shareholders certificates or share allocation documents for CC members), if claiming HDI points
- ❖ Valid Original Tax Clearance Certificate.
- ❖ Value Added Tax (VAT 103), registration certificate, (If Applicable)
- ❖ Proof of banking details – Original Cancelled Cheque or an original bank stamped letter confirming your banking details.
- ❖ Partnership agreements in the case of partnership – certified
- ❖ Certificate of incorporation if Public Company (CM3) – certified
- ❖ Trust agreement, trustee details and letter of authority in the case of business trust - certified
- ❖ Certificate of incorporation – Section 21 Company – certified
- ❖ Proof of Disability – (Health Certificate) – certified
- ❖ Certified copy of valid BBBEE Certificate issued by SANAS accredited verification agency.
  - If your turnover per annum is less than R5million, please provide:
    - A letter from your accountants confirming your financial status
    - A certificate from SARS (South African Revenue Services), or
    - A certificate issued by SANAS accredited verification agency or non-accredited verification agency.
- ❖ Company Profile.

**NB: FAILURE TO SUBMIT ANY OF THE REQUIRED SUPPORTING DOCUMENTS WILL RESULTS IN YOUR APPLICATION BEING DECLINED.**



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**DECLARATION**

**I/we the undersigned acknowledge(s) that the information furnished above is true and correct.**

\_\_\_\_\_  
**Signature of Owner or Authorised Representative**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Owner or Authorised Representative**

\_\_\_\_\_  
**Date**

**COMMISSIONER OF OATHS:**

**Stamp:**

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_



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## Annexure A

Please complete this section as failure to do so may result in your application being disqualified.

### DECLARATION OF INTEREST

**SBD4**

1. Any legal person, including persons employed by the principal, or persons having a kinship with persons employed by the principal, including a blood relationship, may make an offer or offers in terms of this invitation to bid. In view of possible allegations of favouritism, should the resulting bid, or part thereof, be awarded to persons employed by the principal, 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 and/or take an oath declaring his/her interest, where-

- the bidder is employed by the principal; 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 Are you or any person connected with the bidder, employed by the principal?

2.1.2 If so, state particulars.

.....  
.....

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



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2.2.1 If so, state particulars.

.....  
.....

**YES / NO**

2.2.1 If so, state Particulars.

.....  
.....

2.3 Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between the bidder and any person employed by the principal who may be involved with the evaluation and or adjudication of this bid?

2.3.1 If so, state particulars.

.....  
.....

**DECLARATION**

I THE UNDERSIGNED (NAME).....

CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 2.1 TO 2.3.1 ABOVE IS CORRECT. I ACCEPT THAT THE PRINCIPAL MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

.....

SIGNATURE

DATE

.....

.....

POSITION

NAME OF BIDDER



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**FOR OFFICE USE ONLY:**

**Yes      No**

National Treasury Database checked?

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BBEEE Contribution Level Certificate received?

--	--

Original Valid Tax Clearance Certificate received?

--	--

Cancelled Cheque received?

--	--

Company Registration Documents received? (CM1/or CK1)

--	--

**New Supplier Approved?**

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**Comment:**

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