



'Water for Growth and Sustainable Development'

FINANCE DIVISION	
SUPPLIER DATABASE REGISTRATION FORM	Rev: 8
	Page 1 of 12

DELIVER TO:
SCM-DEMAND MANAGEMENT OFFICE
310 BURGER PIETERMARITZBURG
3201

OR POST TO:
SCM-DEMAND MANAGEMENT OFFICE
P O BOX 9
PIETERMARITZBURG
3200

ENQUIRIES: TEL. (033) 341 1008 OR supplier.management@umgeni.co.za

Umgeni Water uses its external whistle-blowing hotline service managed by an external service provider as means of fraud detection. This 24 hour - 365 day facility provides an anonymous and confidential communication channel for all stakeholders to report suspicions of fraud or otherwise unethical conduct.

Deloitte Tip-offs Anonymous Contact Details
TIP-OFFS ANONYMOUS FREE CALL: 0800 864 463
FREE FAX: 0800 007788
EMAIL: Umgeniwater@tip-offs.com

IMPROTANT NOTES
Kindly read carefully before completion

- 1 Form to be completed in full (Incomplete documents will not be considered)
- 2 Please print, complete and attach the supporting documents.

CHECKLIST	Submitted	
	YES	NO
Company Registration Certificate		
VAT registration Certificate		
Original Tax Clearance Certificate that is valid		
Copy of a cancelled cheque or bank letter with bank stamp or statement with bank stamp		
Original/ certified copy of a B-BBEE rating certificate OR provide a letter from the registered auditors /accountant confirming the annual turnover if you are an EME		
List shareholders & attach Copies of Identity Documents for all members		
Completed and Signed Declaration of Interest		
The company letter head		
A copy of the letter of good standing issued by the Workman's Compensation Fund stating that the company is in good standing with the fund		
Schedule of Materials/Goods/Service supply category (UW allocate only to one commodity category per Supplier)		
Organogram with names of directors, partners and/or members		

3. PLEASE NOTE

3.1 Umgeni Water may from time to time conduct a physical verification of the information submitted by the suppliers. the truthfulness of the information provided by suppliers, and:

3.2 Please note that omission of vital information or misrepresentation of information

may lead to de-activation and or blacklisting of such supplier from UW supplier's database and may not be considered for future tenders.

3.2 Umgeni Water pays suppliers 30 days from the date of a correct statement issued on a monthly basis.

3.3 Umgeni Water does not do business with suppliers who are on the National Treasury's defaulters list.

3.4 All documentation submitted to UW must be clearly addressed.

3.5 Umgeni Water prefers the following manner of receiving the documents:

- hand delivered
- posted suppliers database forms will be accepted.

3.6 No registered mail will be accepted.

3.7 Only successful suppliers will be notified in writing of the status of their application



TERMS AND CONDITIONS

(PLEASE READ & UNDERSTAND UMGENI'S TERMS & CONDITIONS.)

1. Tax Clearance and BBBEE Certificates

- It is the responsibility of a supplier to ensure that UW with is in possession of a valid Tax Clearance and BBBEE Certificate .

2. Banking Details

- Suppliers must notify UW if the banking details have changed. A cancelled cheque/original letter from the bank and a letter/ form approved by one the company's Directors will be required prior changing the information.

a. Company Name Change

- Suppliers must notify UW should the company name change, a certificate of Name Change from DTI, Tax Clearance Certificates of the old and new companies and letter/form approved shall be submitted to UW for the attention of SMS prior to changes being effected on the UW system.

b. Contact Details (Addresses and telephone Number)

- The ONUS LIES with suppliers to ensure that UW has the updated details on the system. A request to make any amendments to the above information must be submitted on a company's letter head.

3. Invoices

- All invoices must be addressed **Creditors Department, Umgeni Water, P. O Box 9, Pietermaritzburg, 3201** or and delivered to **Umgeni Water, 310 Burger Street, Pietermaritzburg, 3201** for the attention of **Creditor's Department.**

4. UW OBLIGATIONS

4.1 Payment Terms

UW pays suppliers 30 days from the date of a correct statement issued on a monthly basis.

4.2 Performance Rating

- UW will review supplier's performance on delivery, quality, service, administration, problem resolution, technical ability, on going progress reports, administration and any other aspect periodically.

4.3 Validation of Information.

- UW reserves the right to use other institutions/bodies to validate information submitted by a supplier.

4.4 Suspending a Supplier

- UW may suspend a supplier from UW's database for the following reasons:
 - Failure to submit a valid tax clearance certificate
 - Supplier that has committed a serious offence such as misrepresentation, fraud, corruption and putting UW into disrepute
 - Non-performance
- UW will also not transact with any owners or directors of companies listed as defaulters in the National Treasury who have formed a new company so as to do business with UW in the new company name.

5. GENERAL

- All documentation submitted to UW must be clearly addressed.
- Suppliers are invited to visit the UW website to keep informed of any other information relevant to them.
- The Supply Chain Section is the ONLY section authorised to commit Umgeni Water to any expenditure for goods and services. Suppliers who accept orders and supply goods without receiving a valid purchase order number, should note that there is no legal binding contract, and therefore, no obligation on behalf of Umgeni Water to pay for goods or services provided. Suppliers who do not obtain a valid order number will be prejudiced through delays in clearing payments.
- You are strongly advised not to allow any goods to be COLLECTED from your premises unless the person collecting the goods can hand you an ORIGINAL Umgeni Water purchase order.
- UW uses the following methods for advertising tenders; UW internet, UW Notice Board, Treasury's e-portal, and newspapers



(PLEASE COMPLETE ALL SECTIONS FROM 1-17)

1. COMPANY DETAILS

Company Name of Business as registered with the Registrar of Companies																																								
Trading As																																								
Company Registration number																																								
Company's Local Municipality where your business operates.																																								
Postal Address																																								
	Code:																																							
Physical Address																																								
	Code:																																							
Contact Person:																																								
Telephone No:																																								
Cellular No:																																								
Fax Number																																								
e- mail address																																								
After Hours numbers																																								
Core Business																																								
Please attach a schedule of materials/goods/ service categories																																								
What are your company's subsidiary business																																								
Number of Employees (Please attach an organogram of your company, indicating the number of employees at the different level)																																								
Is your company a subsidiary of another company or group of companies	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO																																					
YES	NO																																							
If, yes what is the name of the company and address of the holding company.																																								
Current Major Customers	<table border="1"> <thead> <tr> <th>Customer's Name</th> <th>Contact Person</th> <th>Contact Details</th> </tr> </thead> <tbody> <tr> <td></td> <td></td> <td>Tel:</td> </tr> <tr> <td></td> <td></td> <td>Fax:</td> </tr> <tr> <td></td> <td></td> <td>Email:</td> </tr> <tr> <td></td> <td></td> <td>Tel:</td> </tr> <tr> <td></td> <td></td> <td>Fax:</td> </tr> <tr> <td></td> <td></td> <td>Email:</td> </tr> <tr> <td></td> <td></td> <td>Tel:</td> </tr> <tr> <td></td> <td></td> <td>Fax:</td> </tr> <tr> <td></td> <td></td> <td>Email:</td> </tr> <tr> <td></td> <td></td> <td>Tel:</td> </tr> <tr> <td></td> <td></td> <td>Fax:</td> </tr> <tr> <td></td> <td></td> <td>Email:</td> </tr> </tbody> </table>	Customer's Name	Contact Person	Contact Details			Tel:			Fax:			Email:			Tel:			Fax:			Email:			Tel:			Fax:			Email:			Tel:			Fax:			Email:
	Customer's Name	Contact Person	Contact Details																																					
			Tel:																																					
			Fax:																																					
			Email:																																					
			Tel:																																					
			Fax:																																					
			Email:																																					
			Tel:																																					
			Fax:																																					
			Email:																																					
			Tel:																																					
			Fax:																																					
		Email:																																						

2. TYPE OF BUSINESS (PLEASE TICK ONE (1))

TYPE OF BUSINESS	'X'	DOCUMENTS REQUIRED
A. Sole Proprietor (One-Person Business)		ID Copy
B. Public Company LTD		Copy of certificate of Incorporation (CM 1)
C. Private Company (PTY) Ltd		ID Copies & Company Registration Certificate (CM 1)
D. Close Co-operation		ID Copies & Company Registration Certificate (CK 1 and CK 2)
E. Incorporated		Copy of certificate of Incorporation (CM 1 and CM 19)
F. Partnership		Partnership Agreement, ID Copies and Tax Certificates of members
G. Co-operatives		Co-operative Registration Certificate, ID Copies & Constitution
H. Joint Venture		JV Agreement, Member's ID Copies & Tax Certificates
I. Trust		Copy of Trust Document
J. Section 21 Company e.g NGO's		Registration certificates with CIPRO, a valid constitution
K. Parastatal/Government		Registration certificates if registered

3. OWNERSHIP STRUCTURE:

Business	Tick (X) the relevant cell
Black Company (75.1 – 100 % black owned)	
Black Company (50.1% - 75% black owned)	
Black empowered company (25.1% - 50% black owned)	
Black influenced companies (5% - 25%)	
Engendered company (≥30% owned and managed by black women)	

4. OWNERSHIP GROUPS

Umgeni Water is committed to develop and provide people from the previously disadvantaged communities with business opportunities. Please indicate the number of shares held by people from the previously disadvantaged

BEE EQUITY OWNERSHIP	PERCENTAGE OF TOTAL SHARES OWNED BY EACH OF THE FOLLOWING GROUPS					
	Group (this must add-up to 100% of ownership)	Percentage	Group	Percentage	Group	Percentage
	African Ownership of the whole company	%	African Female	%	African Disabled	%
	Coloured Ownership of the whole company	%	Coloured Female	%	Coloured Disabled	%
	Indian Ownership of the whole company	%	Indian Female	%	Indian Disabled	%
	White Ownership of the whole company	%	White Female	%	White Disabled	%
	Foreign Ownership of the whole company	%	Foreign Female	%	Foreign Disabled	%

5. OWNERSHIP INFORMATION

List ALL persons/entities who are owners in the business. (Compulsory)

Full name	Designation	Exec/ Non Exec	Race	ID Number

6. BOARD MEMBERS IF ANY

Please indicate percentage BEE control at board level if any.

Additional Documentation to be attached

Full name	Designation	Exec/ Non Exec	Race	ID Number

7. Indicate one (1) applicable sector related to the goods and services that you supply

SECTOR	TICK only 1 (X)	SECTOR	TICK (X) only 1 (X)
ADMINISTRATION		HEALTHCARE	
PROPERTY MAINTENANCE		HOSPITALITY	
CHEMICAL INDUSTRY		INFORMATION & COMMUNICATION	
CONSTRUCTION		PETROLEUM & LIQUID FUELS	
ELECTRICAL		PROFESSIONAL SERVICES-ENGINEER	
GENERAL CONSUMABLES		PROFESSIONAL SERVICES-LEGAL	
GENERAL EQUIPMENT		PROFESSIONAL SERVICES-ACCOUNTING	
ENVIRONMENTAL SERVICES		PROFESSIONAL SERVICES-OTHER	
EQUIPMENT		PIPES	
FINANCIAL SERVICES & INSURANCE		RETAIL	
FORESTRY		SAFETY & SECURITY	
HEALTHCARE		TRAINING	
HOSPITALITY		TRANSPORT, FREIGHT & LOGISTICS	
FORESTRY			

8. BANKING DETAILS (Attach bank stamped proof/copy of cancelled cheque)

Name of Bank:	
Branch Name:	
Account Number:	
Type of Bank Account:	
Accounts Manager's Name	

9. FINANCIAL INFORMATION (COPY OF VAT REGISTRATION CERTIFICATE TO BE ATTACHED if applicable)

VAT Registration number ()	
Date of Financial Year End	
Annual turnover R	
Has any of the Directors / Members / Partners / Owners ever been declared provisionally/ or finally sequestrated / liquidated?	
If rehabilitated,	Date of Rehabilitation:

10. BBBEE RATING DETAILS (Attach a certified BBBEE Certificate or a letter from the accountant/auditors)

Has your company been rated as per BBBEE by a Verification Agency accredited by SANAS or a Registered Auditor ? If YES, attach a BBBEE Certificate.	
Is your company an Exempted Micro Enterprise (EME)? If YES, please submit a certificate issued by an Accounting Officer as contemplated in the CCA.	
Is your company a Qualified Small Enterprise (QSE)?	
Is your company a Large Enterprise?	

11. WORKMEN'S COMPENSATION INFORMATION (copy of certificate/ letter of good standing to be attached)

Workmen's compensation certificate number:	
---	--

12. ISO ACCREDITATION INFORMATION (Attach ISO)

Is your company ISO 9000 accredited?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Do you have a formal quality system in place?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, please elaborate		
Is your company ISO 14001 accredited?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Do you have a formal environmental policy?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If yes, please specify		
Does your Company have a Safety Policy? If yes, please attach copy of Policy Statement	<input type="checkbox"/> YES	<input type="checkbox"/> NO

13. E-COMMERCE

Umgeni Water intends to conduct its business by means of electronic commerce in the future.	
Would your company be able to furnish quotations and to accept orders and payments electronically?	
If yes, elaborate on current system	
If no, what do you plan for the future?	

14. VALUE ADDING

How do you plan to service the requirements of Umgeni Water : (Details of your logistical facilities in respect of transport, after hours service and technical backup)	
Discount Structure	
Incoterms	
Name of Sales Contact Person	
Do you have a repair facility?	

15. VESTED INTEREST

Any financial interest in your company by a Umgeni Water employee and/or its family must be declared in detail, failing which will result in the immediate termination of the business relationship.	
---	--

16. CSI

Does your company have a HIV /AIDS policy?	
---	--

CONFIRMATION

I hereby warrant that I,..... am duly authorised to submit information on my company, and certify to the best of my Company knowledge that the information detailed above is correct.

Signed on behalf of the supplier at on theday of.....

Full name and surname:

Capacity:

Signature:

17. SUPPLIER'S DECLARATION OF INTEREST (COMPULSORY)

1. Any legal person, including persons employed by the state¹, 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 tender (includes a price quotation, advertised competitive tender, limited tender or proposal). In view of possible allegations of favouritism, should the resulting tender, 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 supplier or his/her authorised representative declare his/her position in relation to the evaluating/adjudicating authority where-
- the supplier is employed by the state; and/or
 - the legal person on whose behalf the tender document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the tender(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 tender.

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

2.1 Full Name of supplier or his or her representative: _____

2.2 Identity Number: _____

2.3 Position occupied in the Company (director, trustee, shareholder²): _____

2.4 Company Registration Number: _____

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.

¹"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.

²"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.

PLEASE TICK WHAT IS APPLICABLE

2.7 Are you or any person connected with the employee presently employed by Umgeni Water ?

YES	NO
-----	----

2.7.1 If so, furnish the following particulars:
Name of person / director / trustee / shareholder/ member:

Name of the station/site/section at which you or the person connected to the supplier is employed:
.....

Position occupied in Umgeni Water:

Any other particulars:
.....
.....
.....

2.7.2 Are you currently employed by the state?

YES	NO
-----	----

2.7.2.1 If you are presently employed by the state/Umgeni Water, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector?

YES	NO
-----	----

2.7.2.2 If yes, did you attach proof of such authority to the tender document?

YES	NO
-----	----

(Note: Failure to submit proof of such authority, where applicable, may result in the non-acceptance of the Database application form.

2.7.2.3 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/Umgeni Water in the previous twelve months?

YES	NO
-----	----

2.8.1 If so, furnish particulars:
.....
.....
.....

2.9 Do you, or any person connected with the supplier, have any relationship (family, friend, other) with a person employed by Umgeni Water and who may be involved with the processing of your database application form?

YES	NO
-----	----

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

2.10 Are you as a supplier, aware of any relationship (family, friend, other) between any other supplier and any person employed by the state.

YES	NO
-----	----

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

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

Full Name	Identity Number	Personal Tax Reference Number	State Employee / Persal /Salary Number

4. DECLARATION

**I, THE UNDERSIGNED (NAME)
 CERTIFY THAT THE INFORMATION FURNISHED TO UMGANI WATER IS CORRECT.
 I ACCEPT THAT UMGANI WATER MAY REJECT THE DATABASE APPLICATION FORM
 OR ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.**

.....
Signature

.....
Date

.....
Position

.....
Name of supplier