



BA-PHALABORWA MUNICIPALITY  
MEMORANDUM  
- BUDGET AND TREASURY –

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**TO** : *Prospective Service Provider*  
**FROM** : *SCM /STORES*  
**DATE** : *30/04/2021*  
**ENQUIRIES** : *STORES*  
**TELEPHONE** : *015 780 6362/61*  
**REF** : *129666*

*Kindly furnish this office with a written quotation for supply of goods/ services as detailed below. The quotation must be submitted on the letterhead of your Business and Brought to our offices 3 Nyala Street, Phalaborwa not later than 10/05/2021 12H00*

<b>QUANTITY</b>	<b>Description</b>	<b>PRICE/UNIT (Inc. VAT)</b>	<b>DELIVERY PERIOD</b>
500	70% ALCOHOL ANTIBACTERIAL DISINFECTANT SPRAY		
	➤ MAKE: SAFEQUARD		
	➤ SIZE: 500ML		

**Please number your quotes (Your Ref no)**

*The following conditions will apply:*

- *Price (s) quoted must be valid for at least thirty (30) days from date of your offer.*
- *The municipality retains the prerogative to reject any quotes it deems to be excessive  
A firm delivery period must be indicated.*
- *Tax Clearance Certificate*
- *A service provider be registered with central supplier database (CSD)*
- *Registered with CIPRO (CK 1 or 2 document)*
- *BBBEE Certificate certified by a SANAS accredited institution.*
- *Completed MBD4 (Declaration of Interest) Form*
- *COMPLETE MBD6.2*