



To

: Prospective service provider

From

: SCM /store

Date

: 11/10/2024

Enquiries

: Procurement Office

Telephone

: 015 780 6400/06

Ref

: REQ6386

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 No.3 Nyala Street, Phalaborwa not later than 21/10/2024 at 12H00

	Description	Price/unit	Delivery
QUANTITY		(Inc. Vat)	Period
38	WALL MOUNTED AUTOMATIC PAPER TOWELS		
	DISPENSERS FOR BATHROOMS TOUCH FREE		
	DELIVERY AND INSTALLATION		
	SEE ATTACHED FOR SPECIFICATION		

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 Pin
- > A service provider be registered with central supplier database (CSD)
- > Completed MBD4 (Declaration of Interest) Form
- > Evaluation criteria: 80/20 (Whereby 80 is for price and 20 is for Objective goals)

20 is further evaluated: 20 for 100% Black owned;

18 for +51% Black owned; and 14 for Less than 51% Black owned Wall-mounted Automatic Paper Towel Dispenser For Bathroom

