



TO ALL SUPPLIERS SEEKING REGISTRATION AS AN APPROVED SUPPLIER ON THE DATABASE OF THE NORTHERN CAPE ECONOMIC DEVELOPMENT, TRADE AND INVESTMENT PROMOTION AGENCY (ACT no.4 OF 2008) - NCEDA

All suppliers are herewith invited to register as an approved supplier on the database of NCEDA.

In order to comply with the procedures set out in the Accounting Officers Procurement

Procedures (AOPP), as referred to in the Public Finance Management Act, 1999 (Act 1 of

1999)(PFMA), NCEDA developed a supplier database to be used by the procurement office.

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The purpose of this database is to give all prospective suppliers an equal opportunity to submit quotations to NCEDA.

Preference will be given to registered suppliers but it does not necessarily follow that suppliers who are not yet registered will be totally exempted from quoting for the supplying of goods or services to NCEDA. It is envisaged however, that this database will contribute to efficient administration and compliance with the PFMA.

Attached please find an official registration form to assist us in updating our database according to legislation. **It is imperative that suppliers read the application document carefully, complete it in full and sign it.** Please note that a valid Tax Clearance Certificate must be attached. Also complete attached banking detail form with the original bank stamp to validate the account.

When complete, **deliver** to:

NCEDA Offices



**For Attention: The Supplier Database Administrator
Procurement Office**

Or alternatively send it to:

NCEDA

227 Du Toitspan Road

Belgravia

Kimberley

8301

**For attention: The Supplier Database Administrator
Procurement Office**



NCEDA SUPPLIER DATABASE REGISTRATION FORM

Please read carefully

- ✦ To be completed by **all** vendors seeking registration as an approved supplier;
- ✦ The questionnaire must be completed in **full** and be **signed**;
- ✦ A **company profile** may accompany the registration form but will **not be accepted** as substitute for the application form – all fields on application form **MUST** be completed by applicant;
- ✦ Applicants will be contacted via fax and **must** therefore submit an **operating fax number**; failure to comply will result in excluding the supplier from the data base;
- ✦ It should be noted that the DTI reserves the right to accept or reject any application **without being obliged to give any reasons** in this respect;
- ✦ Suppliers will **not be notify** whether application was accepted or not but will be advised of the outcome if telephonically requested;
- ✦ Supplier must comply with all the **registration-criteria** for registration to be finalised - **failure** to do so may result in the application being declined.

Supplier detail

Company / Personal Details

Registered Name : _____

Trading Name : _____

Tax Number : _____

VAT Number : _____

Title : _____

Initials : _____

First Name : _____

Surname : _____



Address Detail

Payment Address : _____
 (Compulsory) _____

Postal Code : _____

Supplier Account Details

(Please note that this account MUST be in the name of the supplier. No 3rd party payments allowed).

Account Name		
Account Number		
Branch Name		
Branch Number		
Account Type (indicate with x)	Cheque / Current Account	
	Savings Account	
	Transmission Account	
	Bond Account	
Other account type (Please Specify)		
ID Number		
Company Registration Number		
*CC Registration		
*Please include CC/CK where applicable		
Practice Number		

Bank stamp

Date : _____
Name of Bank Official : _____
Signature of Official : _____

Contact Details

Business telephone number : _____
Home telephone number : _____
Fax number : _____
Cellular phone number : _____
Email Address : _____
Contact Person : _____

Company / Supplier Name

Company / CC Registration Number : _____
VAT registration number (if applicable) : _____
Income tax reference number : _____
Web Address : _____
E-Mail Address : _____
Number of full time employees : _____

Company/Supplier Classification: (Please **x** the relevant box or boxes)

ISO Listed	Importer	Services	Manufacturer	Repairer	Distributor	Exporter	Sales

(Please **x** the relevant box)

Tax Clearance Certificate Attached	Yes		No	
Expiry date:				

Supplier Grouping Detail: Type of Firm: (Please **x** 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 Foreign Company	
9 Partnership	
10 Trust	
11 Section 21 Company	
12 Government / Parastatals	

Main contact person in your company:

Name : _____

Company Position : _____

Cell phone Number : _____

Fax Number : _____

E-mail address : _____



Contact person (sales) in your company:

Name : _____

Position in company: _____

Cell Phone Number: _____

Fax Number : _____

E-mail address : _____

Trade names: Maximum of 10 will be registered

Trade names (Example: HP or Dell)	Description of commodities (E.g.: Cartridge) see list of commodities

SMME status of your enterprise:

- Please use this table to determine the SMME Status of your enterprise
- Please (x) the relevant box in each column

A. Sector	B. Full time paid employees				C. Annual Turnover (millions)				D. Total Gross asset value (property excluded) (millions)			
	Medium	Small	Very Small	Micro	Medium	Small	Very Small	Micro	Medium	Small	Very Small	Micro
Agriculture	100	50	10	5	4	2	0.4	0.15	4	2	0.4	0.1
Mining and Quarrying	200	50	20	5	30	7.5	3	0.15	18	4.5	1.8	0.1
Manufacturing	200	50	20	5	40	10	4	0.15	15	3.75	1.5	0.1
Construction	200	50	20	5	20	5	2	0.15	4	1	0.4	0.1
Retail and Motor trade	100	50	10	5	30	15	3	0.15	5	2.5	0.5	0.1
Wholesale Trade	100	50	10	5	50	25	5	0.15	8	4	0.5	0.1
Catering, Accommodation	100	50	10	5	10	5	1	0.15	2	1	0.2	0.1
Transport, Storage	100	50	10	5	20	10	2	0.15	5	2.5	0.5	0.1
Finance & Business Services	100	50	10	5	20	10	2	0.15	4	2	0.4	0.1
Repair/Allied Services	100	50	10	5	30	15	3	0.15	5	2.5	0.5	0.1
Communications	100	50	10	5	20	10	2	0.15	5	2.5	0.5	0.1
Other Trade	100	50	10	5	10	5	1	0.15	2	1	0.2	0.1
Commercial Agents	100	50	10	5	50	25	5	0.15	8	4	0.5	0.1
Community & Social Services	100	50	10	5	10	5	1	0.15	5	2.5	0.5	0.1
Personal Services	100	50	10	5	10	5	1	0.15	5	2.5	0.5	0.1



SMME status of your enterprise: (Please x the relevant box)

(According to SMME table) (compulsory)

Micro	
Very Small	
Small	
Medium	
Large	

List all partners, proprietors and shareholders (compulsory)

Name	Position occupied in the enterprise	Date RSA Citizenship obtained	RSA	Province	ID Number	% owned by HDI	% owned by Women	% owned by Disabled Individuals

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

HDI Ownership Status: Please read notes below very carefully

Instructions and Definitions:

(Please read carefully before completing HDI Ownership Status)

Legislation:

Procedures are set out in the **Accounting Officers Procurement Procedures (AOPP)**, as referred to in the **Public Finance Management Act, 1999 (Act 1 of 1999)(PFMA)**, to give all prospective suppliers an equal opportunity to submit quotations to NCEDA.

Terminology:

- ✦ **Commodities:** The commodities the company wishes to be registered for as a supplier to the Department.
- ✦ **Trade Names:** The trade names that the company own or distribute, which you wish to be registered for as a supplier to the Department.
- ✦ **Province:** the province where your business is located, e.g. Northern Cape or Free State etc. (proof of address should be given – compulsory)
- ✦ **Owned:** Having all the customary elements of ownership, including the right of decision-making and sharing all the risks and profits commensurate with the degree of ownership interests as demonstrated by an examination rather than the form of ownership arrangements.
- ✦ **Historically Disadvantaged Individuals (HDI):** For the purpose of registering as a supplier for NCEDA, the refutable presumption shall be made that SA citizens who fall into population groups that had no franchise in national elections prior to the introduction of the 1983 and 1993 constitution are Historically Disadvantaged Individuals. It is incumbent on individuals to demonstrate their claims to fall into such population groups on the basis of identification and association with and recognition by the members of such a group.
- ✦ **Women:** A female person who is a SA citizen.
- ✦ **Establishment of HDI / Women Equity Ownership in a enterprise:** Equity ownership shall be equated to the percentage of an enterprise which is owned by individuals, or in the case of a company, the percentage shares that are owned by individuals who are actively involved in the management and daily business operations of the enterprise and exercise control over the enterprise, commensurate with their degree of ownership.

Where individuals are not actively involved in the management and daily business operations and do not exercise control over the enterprise commensurate with their degree of ownership, equity ownership may not be claimed.



Declaration of any conflict of interest:

I/we the undersigned acknowledge(s) that:

- **The information furnished is true and correct**
- **The Equity Ownership claimed is in accordance with the General Conditions**
- **Any conflict of interest will be declared in the comment space below**

**SIGNATURE OF OWNER OR
AUTHORISED REPRESENTATIVE**

DATE

**PRINT NAME OF OWNER
AUTHORISED REPRESENTATIVE**

Comments / Notes:

Commodities (Principal business or services of company or supplier)

(Maximum of 5 commodities will be registered - please x the relevant boxes)

(Failure to complete this section will result in the application being declined)

1. Sales/Distribution/Wholesales	
2. Other Service	
ARTWORK & PAINTINGS COLLEGES	
AUDIO VISUAL AIDS & EQUIPMENT CONFERENCE CENTRES & FACILITIES	
BAGS CONFERENCE / TRAVEL / PROMOTIONAL ENTERTAINMENT FACILITIES	
BUILDING MATERIALS & HARDWARE GOVERNMENT SERVICES	
CARTRIDGES GUESTHOUSE & LODGES	
CATERING EQUIPMENT & EQUIPMENT HIRE HOTELS	
CELLULAR TELEPHONES INSTITUTES	
CLEANING CHEMICALS LIBRARIES	
CLOTHING GENERAL/PROTECTIVE & UNIFORMS MEDICAL PRACTITIONERS	
COMPUTER CABLING SYSTEMS PHARMACEUTICALS	
COMPUTER CONSUMABLES PUBLICATIONS	
COMPUTER HARDWARE & PRINTERS PUBLISHERS	
COMPUTER NETWORKING RECRUITMENT AGENTS	
COMPUTER SOFTWARE RESTAURANTS	
CONFERENCING SYSTEMS UNIVERSITIES	
CORPORATE GIFTS & PRODUCTS	
COSMETICS	
3. Construction	
CROCKERY & CUTLERY AIR CONDITIONING SYSTEMS	
CURTAINING, RAILS & ACCESSORIES ELECTRICAL CONTRACTORS	
ELECTRICAL APPLIANCES HARDWARE & BUILDING SUPPLIES	
ELECTRICAL COMPONENTS & EQUIPMENT LOCKSMITHS	
ELECTRONIC APPLIANCES PAINTING CONTRACTORS	
ELECTRONIC COMPONENTS & EQUIPMENT PARTITIONING CONTRACTORS	
FIRE EXTINGUISHING PLUMBING CONTRACTORS	

FLAGS & MAPS	
FURNITURE	
GIFTS PROMOTIONAL	
LABORATORY CONSUMABLES & EQUIPMENT	
MEDICAL EQUIPMENT AND CONSUMABLES	
MEDICAL SUPPLIES	
OFFICE AUTOMATION EQUIPMENT	
OFFICE CONSUMABLES	
OFFICE EQUIPMENT	
OFFICE FURNITURE	
PACKAGING MATERIALS	
PERISHABLES SUPPLIERS	
PHOTOGRAPHY EQUIPMENT	
PRINTING CONSUMABLES	
REFRIGERATION & AIR CONDITIONING	
SECURITY & ACCESS CONTROL EQUIPMENT	
SOUND & MUSIC SYSTEMS/EQUIPMENT	
STATIONERY OFFICE BASIC	
STORAGE SYSTEMS (DOCUMENT & COMPUTER)	
TELECOMMUNICATION EQUIPMENT	
TRAINING MATERIALS & SOFTWARE	
VEHICLES	
VEHICLE ACCESSORIES	
4. General Services	
DRAIN CLEANING SERVICES PROGRAMMING	
DRY CLEANING SERVICES QUALITY CONTROL SERVICES	
EDITING SERVICES RECYCLING SERVICES	
ENGRAVING SERVICES & EQUIPMENT REMOVAL SERVICES FURNITURE	
ENVIRONMENTAL SERVICES RENOVATION SERVICES	
EQUITY DEALING SERVICES SAFES & SAFE REMOVAL SERVICES	
GARDENING SERVICES SECURITY & ACCESS CONTROL SYSTEMS	
GRAPHIC DESIGN SERVICES SHUTTLE SERVICES	
INSPECTION SERVICES TELECOMMUNICATIONS SYSTEMS	

LABELS & LABELLING SERVICES TRANSLATION SERVICES	
LEGAL INVESTIGATIONS & SERVICES TRANSPORT SERVICES (GOODS)	
MEDICAL EQUIPMENT MAINTENANCE & REPAIRS WASTE DISPOSAL	
PEST CONTROL SERVICES WEB PAGES & DESIGN	
PHOTOGRAPHY SERVICE WEB SOLUTIONS DESIGN & MAINTENANCE	
PRINTING & DESIGN SERVICES WORKSHOP FACILITATIONS	
TRAINING / WORKSHOPS	
5. Other not listed	

NOTE: The form must be completed, signed and deliver. No tipex or scratching is allowed on the forms.

The following **must** be attached:

1. Original valid Tax Clearance Certificate
2. Copy of Id
3. Bank Statement or Canceled Cheque. [A letter from the bank is not acceptable]
4. CIPC Certificates [CK]
5. Bank Detail Form must be signed at the bottom & Date!!
6. BB-BEE certification certificate

NCEDA OFFICE USE ONLY

Captured By : _____

Date Captured : _____

Authorised By : _____

Date Authorised : _____

SUPPLIER MAINTENANCE: Supplier code: _____

NB: All relevant fields must be completed