

DECLARATION OF INTEREST

No bid will be accepted from persons in the service of the municipality/state/state entity

Any person, having a kinship with persons in the service of the municipality/state/state entity, 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 connected with or related to persons in service of the municipality/state/state entity, it is required that the bidder or their authorised representative declare their position in relation to the evaluating/adjudicating authority and/or take an oath declaring his/her interest.

1 In order to give effect to the above, the following questionnaire must be completed and submitted with the bid.

1.1 Full Name:

1.2 Identity Number:

1.3 Company Registration Number:

1.4 Tax Reference Number:

1.5 VAT Registration Number:

1.6 Are you presently in the service of the municipality/state/state entity YES / NO

1.7 If so, furnish particulars.
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1.7 Have you been in the service of the municipality/state/state entity for the past twelve months? YES / NO

1.8 If so, furnish particulars.
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3.8 Do you, have any relationship (family, friend, other) with persons in the service of the municipality/state/state entity and who may be involved with the evaluation and or adjudication of this bid? YES / NO

3.8.1 If so, furnish particulars
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3.9 Are you, aware of any relationship (family, friend, other) between a bidder and any persons in the service of the municipality/state/state entity who may be involved with the evaluation and or adjudication of this bid?

YES / NO

3.9.1 If so, furnish particulars

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3.10 Are any of the company's directors, managers, principle shareholders or stakeholders in service of the municipality/state/state entity?

YES / NO

3.10.1 If so, furnish particulars.

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2.11 Are any spouse, child or parent of the company's directors, managers, principle shareholders or stakeholders in service of the municipality/state/state entity?

YES / NO

3.11.1 If so, furnish particulars.

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CERTIFICATION

I, THE UNDERSIGNED (NAME)

CERTIFY THAT THE INFORMATION FURNISHED ON THIS DECLARATION FORM IS CORRECT.

I ACCEPT THAT THE MUNICIPALITY/STATE/STATE ENTITY MAY ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

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Signature

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Date

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Position

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Name of Bidder