

**DECLARATION OF INTEREST**

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 bid (includes an advertised competitive bid, a limited bid, a proposal or written price quotation). In view of possible allegations of favouritism, should the resulting bid, 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 bidder or his/her authorised representative declare his/her positionin relation to the evaluating/adjudicating authority where-

 - the bidder is employed by the state; and/or

 - the legal person on whose behalf the bidding document is signed, has a relationship with persons/a person who are/is involved in the evaluation and or adjudication of the bid(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 bid.

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

|  |  |  |
| --- | --- | --- |
| 2.1 | Full Name of bidder or his or her representative:  |  |
| 2.2 | Identity Number: |  |
| 2.3 | Position occupied in the Company (director, trustee, shareholder², member): |  |
| 2.4 | Registration number of company, enterprise, close corporation, partnership agreement or trust: |  |
| 2.5 | Tax Reference Number: |  |
| 2.6 | VAT Registration Number:  |  |

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.

2.7 Are you or any person connected with the bidder presently employed by the state? If so, furnish the following particulars:

|  |  |  |
| --- | --- | --- |
| 2.7.1 | Name of person/ director/ shareholder/ member |  |
|  | Name of State Institution to which the person is connected |  |
|  | Position occupied in the state institution |  |
| Any other particulars: |
|  |
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|  |  |  |  |
| --- | --- | --- | --- |
| 2.8 | Did you or your spouse, or any of the company’s directors / shareholders / members or their spouses conduct business with the state in the previous twelve months?Tick which is applicable (Yes or No) | **YES** | **NO** |
| If so, furnish particulars: |  |
| 2.8.1 |  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| 2.9 | Do you, or any person connected with the bidder, have any relationship (family, friend, other) with ta person employed by the state and who may be involved with the evaluation and or adjudication of this bid?Tick which is applicable (Yes or No) | **YES** | **NO** |
| If so, furnish particulars: |  |
| 2.9.1 |  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| 2.10 | Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between the bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this bid?Tick which is applicable (Yes or No) | **YES** | **NO** |
| If so, furnish particulars: |  |
| 2.10.1 |  |
|  |
| 2.11 | Do you or any of the directors / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this contract?Tick which is applicable (Yes or No) | **YES** | **NO** |
| If so, furnish particulars: |  |
| 2.11.1 |  |
|  |

# Full details of Directors / Trustees / Members / Shareholders.

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name** | **Identity Number** | **Personal Income Tax Reference Number** | **State Employee Number / Persal Number**  |
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# 4. DECLARATION

I, THE UNDERSIGNED

(NAME)……………………………………….............………………………………………………

CERTIFY THAT THE INFORMATION FURNISHED IN PARAGRAPHS 2 and 3 ABOVE IS CORRECT.

I ACCEPT THAT THE STATE MAY REJECT THE BID OR ACT AGAINST ME SHOULD THIS DECLARATION PROVE TO BE FALSE.

………………………………….. …………………………………

 Signature Date

…………………………………. ………………………………………………

 Position Name of bidder