



University of Venda

Application to be registered in the University of Venda Supplier Database

NB: Forms must be returned either by post or hand to the under mentioned address and not via faxes or e-mail.

TO: Head: Supply Chain Management Section
Private Bag X5050
Thohoyandou
0950

For office use

Documents required	Yes	No	N/A
Company registration certificate (certified copies)			
Proof of ownership with ID copies(certified)			
Two year audited financial statement			
Proof of banking details			
Valid SARS Tax pin code			
VAT registration			
UIF certificate			
Workman compensation			
Proof of registration to professional body regulating the industry			
Proof of BBBEE certificate			
Name of directors other than ownership with ID copies (certified)			
Skills Development levy			
Company profile			
CIDB registration certificate			
Company or Director listed on the Treasury list of forbidden suppliers ?			

Checked by: _____ Signature _____

Date _____

Approved by: _____ Signature _____

Date _____



Instruction

1. Questionnaire to be completed by all current and prospective suppliers and service providers to the University of Venda.
2. This form must be completed in detail and returned to the University of Venda as soon as possible

3. Please note

- 1 Registration in the supplier database does not entitle the supplier to any business opportunity offered by the University nor will it place any obligation to the University whatsoever
- 2 Arrangements may be made for officials of the University of Venda to inspect your premises in order to assess your competency before your company is accepted.
- 3 A specific requirement of registration will be signing a Declaration of Interest to ensure no corruption will be tolerated.
- 4 Details of offices and staff in the Limpopo province must be provided
- 5 All service provider information will be treated strictly confidential
- 6 It should be noted that should any information provided be found to be incorrect, The university of Venda reserve the right to exclude the service provider from the database at any time prior to or after acceptance of the database registration form.



2. Particulars of the contact person

Initials and Surname	<input type="text"/>
Designation	<input type="text"/>
Direct Telephone number	<input type="text"/>
Direct fax number	<input type="text"/>
Cell phone number	<input type="text"/>
E-mail address - representative	<input type="text"/>
Email address- Director	<input type="text"/>
Cell phone number	<input type="text"/>

3. Type of Business

<input type="checkbox"/> Partnership	<input type="checkbox"/> Company
<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> State Owned Enterprise
<input type="checkbox"/> Close Corporation	<input type="checkbox"/> Trust
<input type="checkbox"/> Other	Specify _____



3. Relationship with employees of the University of Venda

Surname and Initials	Relationship
1.	
2.	

4. Detailed work done for the University of Venda for the past five years .

1.
2.
3.
4.
5.

5. Other References

Client	Type of service	Contact person	Contact Number
1.			
2.			
3.			

6. Category of work to be registered for: (One service /or product the company specialise on:

1.



7. Current contract (Past 18 months)

1.
2.
3.

9. Size of the company based on Annual Turnover

Turnover	(✓)
<R 1,000,000	
R 1,000,000 -- R 10,000,000	
R 10,000,000 -- R 50,000,000	
>R 50,000,000	

10 Credit order instruction

1. I/We hereby request and authorize the University of Venda to pay any amount which is accrued to me/us to the credit of my/our account with the mentioned bank.
2. I/We understand that the credit transfer hereby authorized will be processed through a system known as EBT (Electronic Bank Transfer), and I/We understand that no additional advice of payment will be provided by my/our bank, but details of each payment will be printed on my/our bank statement or any accompanying voucher.
3. I/We also understand that a payment advice will be supplied by the University of Venda in the normal way and that it will indicate the date on which funds will be available in the account.
4. This authority may be cancelled by giving thirty days' notice.
5. I/We will not hold the department of transport liable for payment not made into the bank account if the bank account details are incorrect or were not supplied to the University of Venda prior to payment.



11. Declaration by the Supplier

I, the undersigned, hereby:

Declare that:

- I am duly authorised to sign this application on behalf of the enterprise.
- The information furnished and all documentation submitted for this application, is true and correct in every respect; and have been lawfully obtained;
- The enterprise will abide by the Companies amendment Act, 2011 for trading in South Africa;
- No partner, member, director, manager or other person, who wholly or partly exercises, or may exercise, control over the business, has been convicted of fraud or corruption in the past five years.

Understand that:

- Registration is subject to the conditions referred to in this form;
- Incomplete applications may result in a delay in processing the application.
- Applications without supporting documentation will not be processed.
- False information provided or a false declaration remains a punishable offence

Authorise:

- I/We grant permission that the above information may be audited by the University of Venda.

NAME: _____ SIGNATURE: _____

DESIGNATION: _____ DATE: _____

