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Medical Research Council
Supplier Database

* A P P *

Name of Registering Firm:

Type of Application: NEW | UPDATE

FOR UPDATED APPLICATION, PLEASE SPECIFY VENDOR CODE:

Application Form for Registration on the Supplier Database

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The purpose of this application is to register a Vendor/Firm on the Medical Research Council Supplier Database as a prospective provider with the Medical Research Council. This Supplier Database enables the Medical Research Council to:

1. Adhere to the Public Finance Management Act (PFMA), the Supply Chain Management Regulations, and the Preferential Procurement Policy Framework Act (PPPFA)
2. Provide a source for obtaining supply of required goods and services
3. Ensure that it deals with suppliers that have their taxes are in order (Tax Clearance)
4. Allow for effective evaluation of quotations based on suppliers' BEE profiles

GUIDELINES FOR APPLYING FOR REGISTRATION

Submitting Application Form

To ensure speed of processing, it is recommended that you complete your application online via the Medical Research Council's website.

a) Applying for Registration via the Medical Research Council's Website:

In order to apply for registration via the Medical Research Council's website you require access to the Internet and a Printer.

1. Log on to https://mrcescape.mrc.ac.za
2. Click on 'Apply for Registration' at the top right corner of the page. Read and agree to the 'Registration Requirements'. Create a secure login by entering a password, your company email address or fax number and other required information.
3. Read and agree to "Conditions of Access" and "Terms and Conditions for Registration on the Supplier Database". Indicate whether you would like to be notified of other supplier databases for registration purposes.
4. Complete all required information by following instructions on the website.
5. Once you have entered all information required for the application, click "Print and Submit Application". Your completed application form will be printed to your installed printer. You are then required to check that you have completed the application form correctly, read the declarations and terms and conditions and sign the form. Failure to sign will result in your application form being unacceptable.
6. Return the signed, completed application together with the required supporting documents to the Medical Research Council, at the above mentioned address (top right hand corner).

b) Applying for Registration if no access to the Internet:

Please follow the guidelines below if you do not have access to the Internet.

1. Fill in all the required information on this application form. ***Please NOTE the following:-***
   - Handwriting must be neat and legible at all times.
   - Where ticks are required, please do not put in crosses as this will not be captured correctly.
   - Section 2B should only be completed where the registering firm is owned by companies or trusts.
   - Only information entered on the applications forms will be captured. Any information supplied through attachments will not be considered (e.g. company profile).
   - Optional fields are indicated as such and all other fields are mandatory.
2. Read the declarations and the terms and conditions on the application form and sign the form. Failure to sign will result in your application form being unacceptable.
3. Return signed, completed application together with the required supporting documents to the Medical Research Council, at the above mentioned address (top right hand corner).

GUIDELINES FOR UPDATING YOUR APPLICATION

It is strongly recommended that you update your application via the website.

1. Log on to https://mrcescape.mrc.ac.za. Click on 'Apply for Registration' at the top right corner of the page
2. If you have previously submitted a written application or do not know your password, you can obtain your password by clicking on the "Did you forget your password?" link, enter your Vendor Code and click on continue. You will receive an email with your password to the email address registered in the Particulars of Firm section of the application form.
3. Logon using your Vendor Code and Password in the Login Section on the left of the page.
4. Click on "Edit Application"
5. You will be asked to confirm whether you want to continue editing your application. Any changes made to the application form must be confirmed with the submission of the signed, updated application form to the Medical Research Council.
6. Make the necessary changes, and follow steps 5 and 6 in section a above (Applying for Registration via the Medical Research Council's Website).
7. If you do not have Internet access, please fully complete this application form. Please tick "Update" under the Type of Application and enter your Vendor Code above. Follow section b above (Applying for Registration if no access to the Internet).

Please note that only outstanding or expired Supporting Documentation needs to be submitted in case of an update.

Required Supporting Documentation:

Please ensure that the following supporting documents are attached to your application form:

1. Banking Details with the bank stamp (as per Appendix B) OR a letter from the bank on the original bank letterhead
2. Copy of Company Registration and Proof of Ownership Documents (see Section 1.3 in Application Form for list of documents to submit)
3. A valid original Tax Clearance Certificate
4. Certified Copy of BBBEE Verification Certificate
5. Any other supporting documents pertaining to accreditation criteria and requirements per commodity group that you are registering for.
6. A letter on the company's letterhead or from the auditors substantiating ownership and HDI/Professional participation for company(s), trust(s) or partnership(s) that are shareholders
7. Company Profile

DO NOT ATTACH ANY OTHER DOCUMENTS EXCEPT FOR THE DOCUMENTS LISTED ABOVE. CV'S/FINANCIAL STATEMENTS/SHARE CERTIFICATES ARE NOT REQUIRED.

PLEASE DO NOT BIND THE DOCUMENTS.

FOR ANY FURTHER INFORMATION OR CLARIFICATION IN COMPLETING THIS FORM, PLEASE CALL 0861 111 951 or EMAIL mrcsupport@phi-series.co.za

1. PARTICULARS OF FIRM

1.1 LEGAL NAME:

1.2 TRADING NAME:

1.3 TYPE OF ENTITY	Supporting Documents required to be submitted with your application Copy of Company Registration and Proof of Ownership Documents (See Document Reference for more details)	Tick
Public Company (Listed)	Registered under old CIPRO: CM29 and CM1 (OR if the company name has changed with CIPRO, please provide CM29,CM9 and CM1) Registered/Amended under new CIPC: COR14.3 OR COR15.2 OR COR39 OR COR18.3 (Latest Certificate issued by CIPC)	☐
Private Company - (Pty) Ltd		☐
Close Corporation	CK1 (OR if company details have changed with the Registrar of Companies, please provide CK2)	☐
Partnership	Letters stating Partners with ID Numbers	☐
Trust	Deed of Trust	☐
Non-Profit Organisation (Section 21)	Certificate of Incorporation - Section 21 OR if registered under new CIPC: COR14.3)	☐
Individual/Sole Proprietor	Certified Copy of ID Document of Individual	☐
State Entity/Educational Organisation/Foreign Companies	Letter stating that the organisation does not have any registration documents	☐

DOCUMENT REFERENCE	
CK1	Founding Statement for CC
CK2	Amended Founding Statement
CM1	Certificate of Incorporation
CM9	Certificate of Change of Name of Company
CM29	Contents of Register of Directors, Auditors and Officers
COR14.3	Registration Certificate for a Local Company
COR15.2	Amendment of Memorandum of Incorporation
COR18.3	Registration Certificate of Conversion of Close Corporation to Company
COR39	Notice of Change of Company Directors

1.4 NAME OF CONTACT PERSON:

1.5 PRINCIPAL'S ID NUMBER (optional):

1.6 SOLE PROPRIETOR I.D NUMBER (if applicable):

1.7 COMPANY REGISTRATION NUMBER:

1.8 INCOME TAX REFERENCE NUMBER:

1.9 VAT REGISTRATION NUMBER: 4

1.10 TELPHONE: ( ) -

1.11 CELLPHONE: ( ) -

1.12 FAX NUMBER: ( ) -

1.13 EMAIL:

1.14 WEBSITE:

1.15 PREVIOUS VENDOR NUMBER (optional):

1.16 STREET ADDRESS:

POSTAL CODE:

1.17 POSTAL ADDRESS:

POSTAL CODE:

1.18 PREFERED METHOD OF COMMUNICATION: (For information purposes only) EMAIL | FAX

1.19 WOULD YOU LIKE TO RECEIVE AN ADDITIONAL SMS (IF AVAILABLE) FOR THE FOLLOWING (TICK, IF YES):

☐ Application status and activities (which includes the receipt of documents)

☐ Acquisition/Business opportunities (which includes RFQs/RFPs, etc)

Please note that Medical Research Council will use either the above email or fax number for all communications with your firm, including communicating opportunities (email might be used as priority; fax will only be used if no email is available). Therefore, please ensure that the above information is correct as you risk losing out on opportunities to respond to opportunities. The telephone number is also mandatory. The Company Registration Number, Income Tax Reference Number and Vat Registration Number should be reflected as contained in the Tax Clearance Certificate. Should these differ; the details on your Tax Clearance Certificate will take preference.

2. DETAILS PERTAINING TO SHAREHOLDERS IN THE FIRM

Instructions to fill in Vendor/Firm shareholding information:

- Shareholders may be Individuals and entities that are not individuals (e.g. Trusts or Companies).
- Fill in details for shareholders who are Individuals in Section 2A, and shareholders who are entities that are not individuals in Section 2B.
- “HDI” mean a South African citizen who is “NFPIC”, “Disabled” and/or “Female”.
- "Disabled" means, in respect of a person, a permanent impairment of a physical, intellectual, or sensory function, which results in restricted, or lack of, ability to perform an activity in the manner, or within the range, considered normal for a human being.
- "NFPIC" means persons who had no franchise in national elections prior to the introduction of the Constitution of the Republic of South Africa, 1983 (Act No 110 of 1983) or the Constitution of the Republic of South Africa, 1993, (Act No 200 of 1993) ("the interim Constitution") (example: Black, Indian or Coloured individuals who had no franchise in the interim Constitution).
- Equity ownership shall be equated to the percentage of a registering firm which is owned by individuals classified as HDIs, or in the case of a company, the percentage shares that are owned by individuals classified as HDIs, who are actively involved in the management and daily business operations of the registering firm and exercise control over the registering firm, commensurate with their degree of ownership.
- HDI ownership may not be claimed in respect of individuals who are not actively involved in the management of a registering firm and who do not exercise control over an registering firm commensurate with the degree of ownership.
- Equity claims for a trust will only be allowed in respect of those persons who are both trustees and beneficiaries and who are actively involved in the management of the trust.
- Publicly Listed companies and tertiary institutions do not qualify for HDI preference points.

NAME	CITIZENSHIP		ID NUMBER	INCOME TAX REFERENCE NUMBER	NFPIC	DISABLED	GENDER		% OWNERSHIP IN REGISTERING FIRM
	SA	NON-SA			TICK IF YES	TICK IF YES	MALE	FEMALE	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	
	☐	☐			☐	☐	☐	☐	

2B. COMPANIES (USE THIS SECTION TO COMPLETE DETAILS OF THOSE SHAREHOLDERS WHO ARE COMPANIES AND/OR TRUSTS)

Where a shareholder of the registering firm is NOT an individual (e.g. shareholding by Trusts or Companies in the registering form), please provide details below of these shareholders that are not individuals
Please note that where there is shareholding in the registering firm by entities that are not individuals (e.g. Trusts), HDI points can only be claimed if HDI individuals that are indirect shareholders in the registering firm (e.g. through shareholding by a Trust) are also actively involved in management of the registering firm and exercise control over the registering firm, commensurate with their degree of ownership in the registering firm (indirect in this case). Note: Publicly Listed Companies may NOT claim HDI percentages.

Instructions: Provide details below of entities that are **NOT** individuals/persons.

- For each entity, indicate percentage ownership of HDIs in the entity, which are also actively involved in the management of the registering firm and exercise control over the registering firm, commensurate with their degree of ownership in the registering firm.
- Then indicate what percentage shareholding that the entity has in the registering firm.

Does another Company or Trust have ownership in the registering firm? **IF YES, PLEASE SPECIFY IN THE TABLE BELOW.**	Yes	No

NAME OF COMPANY OR TRUST THAT HAS OWNERSHIP IN THE REGISTERING FIRM	REGISTERED IN		ENTITY REGISTRATION NUMBER	INCOME TAX REFERENCE NUMBER	% OF ENTITY OWNED BY			% THAT COMPANY OWNS IN REGISTERING FIRM
	SA	NON-SA			NFPIC	DISABLED	FEMALE	
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						
	☐	☐						

Note:

1. Substantiating documentation of shareholding must be attached to this application form where there is shareholding by a company; trust; or partnership.
2. For Companies which are shareholders: Please attach a letter stating HDI ownership in company on the company letterhead or from the auditors stating that the company does indeed have ownership in the registering firm. In addition, if that particular company is claiming points for NFPIC, Woman and/or Disabled, an additional letter on that company's letterhead or from the auditors should be attached providing detail in support of the active involvement of the individuals (for whom points are being claimed) in the management and daily business operations of the enterprise and exercise control over the enterprise, commensurate with their degree of ownership.
3. The total ownership between individual (section 2A); companies and trusts (section 2B) should equal 100%.

3. COMMODITY GROUPS (MAXIMUM OF 3 HIGH LEVEL GROUPS)

Tick the box next to the commodity codes that you are capable of providing. **You are only allowed to tick a maximum of 3 high-level commodity groups**. If you select more than three (3) high level commodity groups, **NO** commodities will be captured. Note: Commodity groups in grey blocks are high level commodity groups and some do not have sub-commodity groups.

TICK	CODE	COMMODITY GROUPS AND SUB-COMMODITY GROUPS
	C10100	ACCOMODATION, TRAVEL AND CONFERENCES
☐	C10101	Community Centres
☐	C10102	Conference and Meeting facilities
☐	C10103	Direct Accommodation (no travel agencies)
☐	C10104	Guest Lodges
☐	C10105	Hotels
☐	C10106	Travel Agencies
☐	C10107	Restaurants
	C10200	ADMINISTRATIVE SERVICES
☐	C10201	Clearing Agent
☐	C10202	Data and document archiving services
☐	C10203	Subscriptions (Newspapers, Magazines, Periodicals)
☐	C10204	Subscriptions (DSTV, TV etc.)
☐	C10205	Packaging Service and Equipment Supply
☐	C10206	Relocation services (furniture or office)
☐	C10207	Auctioning Services
	C10300	ADVERTISING, PUBLISHING, PRINTING AND CREATIVE DESIGN SERVICES
☐	C10301	Advertising & Media Placement
☐	C10302	Creative Design Services
☐	C10303	Editorial and support services
☐	C10304	Photographic Equipment, Consumables and Services
☐	C10305	Printing services (includes publishing, photocopying and binding)
	C10400	BUILDING AND CONSTRUCTION AND MAINTENANCE SERVICES
☐	C10401	Ablution services
☐	**C10402***	Air conditioning installation or maintenance or repair services
☐	C10403	Blinds and shades
☐	**C10404***	Bricklaying
☐	C10405	Building Hardware and Supplies
☐	**C10406***	Burglar Proofing
☐	**C10407***	Carpentry
☐	C10408	Carpet installation and maintenance
☐	**C10409***	Civil Works
☐	**C10410***	Concrete Fencing
☐	**C10411***	Dampproofing
☐	**C10412***	Electrical services
☐	**C10413***	Fire protection supply, installation and maintenance
☐	**C10414***	General building construction
☐	C10415	Glass or window cleaners (Over 2.5 meters)
☐	**C10416***	Glazing
☐	C10417	Grounds maintenance services
☐	**C10418***	Heavy duty Precast Walling
☐	C10419	Indoor Plant Rental and Maintenance
☐	C10420	Interior design, planning and finishing
☐	C10421	Irrigation Systems
☐	**C10422***	Lifts (installation, commissioning and maintenance)
☐	**C10423***	Lightening Conductors
☐	C10424	Locksmith services
☐	C10425	Marble or stone or tile installation
☐	C10426	Paint Contractors
☐	**C10427***	Palisade Fencing
☐	**C10428***	Partitioning and Dry walling
☐	C10429	Pest control products and services
☐	**C10430***	Plumbing system maintenance or repair

TICK	CODE	COMMODITY GROUPS AND SUB-COMMODITY GROUPS
☐	C10431	Prefabricated structures
☐	**C10432***	Quality Mains and Data Supply
☐	C10433	Refrigeration
☐	**C10434***	Retaining wall construction
☐	**C10435***	Waterproofing
☐	C10436	Welding services
	C10500	CATERING
☐	C10501	Catering Equipment and Supply Services
☐	C10502	Catering Equipment Hire and Deco
☐	C10503	Catering Equipment Repairs and Reconditioning
☐	C10504	Catering Services
	C10600	CLEANING SERVICES, EQUIPMENT AND SUPPLIES
☐	C10601	Brooms and mops and brushes and accessories
☐	C10602	Cleaning and disinfecting solutions
☐	C10603	Cleaning kits
☐	C10604	Cleaning machines and maintenance
☐	C10605	Cleaning rags and cloths and wipes
☐	C10606	Cleaning Services
☐	C10607	Cleaning Trolleys
☐	C10608	Fabric and furniture cleaning services
☐	C10609	Laundering and dry cleaning services
☐	C10610	Restroom supplies
☐	C10700	COMPUTER CONSUMABLES
	C10800	COMPUTER HARDWARE AND SOFTWARE
☐	C10801	Computer Equipment and Accessories
☐	C10802	Software
	C10900	COMPUTER SERVICES
☐	C10901	Hardware and Network Installation and Maintenance
☐	C10902	IT Consulting Services
☐	C10903	Software development, installation, maintenance and support
	C11000	CORPORATE CLOTHING
☐	C11001	Caps
☐	C11002	Jackets
☐	C11003	Overalls and coveralls
☐	C11004	Shirts and blouses
☐	C11005	Slacks, trousers, skirts and shorts
☐	C11006	T-shirts
☐	C11007	Uniforms
	C11100	DOMESTIC SUPPLIES AND KITCHENWARE
☐	C11101	Bedding, Linen and Curtains
☐	C11102	Beverages
☐	C11103	Cutlery
☐	C11104	Electrical Appliances
☐	C11105	Groceries
☐	C11106	Water Coolers & Refills
	C11200	EQUIPMENT AND FURNITURE HIRE
☐	C11201	Computer Equipment Hire
☐	C11202	Furniture Hire
☐	C11203	Plant and Equipment Hire
	C11300	EVENT MANAGEMENT
☐	C11301	Décor Management
☐	C11302	Entertainment Management
☐	C11303	Event Management

*** These commodity groups have accreditation criteria that must be completed in section 4 of this application form.**

3. COMMODITY GROUPS (MAXIMUM OF 3 HIGH LEVEL GROUPS)

Tick the box next to the commodity codes that you are capable of providing. **You are only allowed to tick a maximum of 3 high-level commodity groups**. If you select more than three (3) high level commodity groups, **NO** commodities will be captured. Note: Commodity groups in grey blocks are high level commodity groups and some do not have sub-commodity groups.

TICK	CODE	COMMODITY GROUPS AND SUB-COMMODITY GROUPS
☐	C11400	FLORISTS
	C11500	LABORATORY AND CLINIC
☐	C11501	Animal bedding material
☐	C11502	Animal cages and other animal related accessories
☐	C11503	Animal feed
☐	C11504	Cell/tissue culture consumables and reagents
☐	C11505	Cell/tissue culture equipment
☐	C11506	Laboratory and scientific equipment
☐	C11507	General laboratory supplies, consumables and reagents
☐	**C11508***	Laboratory equipment calibration
☐	C11509	Laboratory liquid waste disposal (liquid waste from instruments)
☐	C11510	Laboratory solid waste disposal (gloves, needles, etc)
☐	C11511	Laboratory water purification/distilled water systems installation and maintenance
☐	C11512	Measuring and observing and testing instruments
☐	C11513	Medical Equipment and Accessories and Supplies
☐	C11514	Molecular biological consumables and reagents
☐	C11515	Molecular biological equipment
☐	C11516	Oligonucleotide/primer/probe synthesis
☐	C11517	Outsourced laboratories examples (BARC, CLS)
☐	C11518	Pharmaceutical medicines and drugs
☐	C11519	Sequencing services
☐	C11520	Temperature monitoring systems
☐	C11521	Chemicals
☐	C11522	Gas Supply/Rental
☐	C11523	Waste Management, Transportation & Disposal
☐	C11524	Research Animals
☐	C11525	Educational material supplies
	C11600	OFFICE EQUIPMENT, ACCESSORIES, SUPPLIES AND MAINTENANCE
☐	C11601	Audio visual equipment, supply, installation and maintenance
☐	C11602	Office Machine Maintenance
☐	C11603	Office machines and their supplies and accessories
☐	C11604	Office Equipment Rental
☐	C11700	OFFICE FURNITURE
	C11800	POWER GENERATION AND SERVICES
☐	C11801	Diesel fuel
☐	C11802	Power Generation Maintenance
☐	C11803	Transformer Purification
	C11900	PROFESSIONAL SERVICES
☐	C11901	Business and corporate management consultation services
☐	C11902	Financial and Insurance Services
☐	C11903	Health and safety consulting services
☐	C11904	Human Resource Services
☐	C11905	Legal Services
☐	C11906	Medical practitioners services
☐	C11907	Pathology research services
☐	C11908	Project management
☐	C11909	Risk Assessment and Management
☐	C11910	TB Laboratory quality systems consulting services
☐	C11912	Translation Services
☐	C11913	Facility Management
☐	C11914	Architects
☐	C11915	Quantity Surveys
	C12000	PROTECTIVE CLOTHING AND EQUIPMENT SUPPLY

TICK	CODE	COMMODITY GROUPS AND SUB-COMMODITY GROUPS
☐	C12001	Face and head protection
☐	C12002	Hearing protectors
☐	C12003	Respiratory protection
☐	C12004	Safety apparel and Equipment
☐	C12005	Safety footwear
☐	C12006	Vision protection and accessories
	C12100	SALES AND MARKETING SERVICES
☐	C12101	Corporate Gifts
☐	C12102	Sales and business promotion activities
☐	C12103	Signage and accessories
	C12200	SECURITY AND SURVEILLANCE SERVICES
☐	**C12201***	Access Controls
☐	**C12202***	Armed Response Services
☐	**C12203***	Cash in Transit Services
☐	**C12204***	Guard services
☐	**C12205***	Security systems and Equipment Supply
☐	**C12206***	Surveillance, monitoring and detection equipment
☐	**C12207***	Vehicle Tracking Equipment and Services
☐	C12300	STATIONERY
	C12400	TELECOMMUNICATIONS
☐	C12401	Analog Telephones
☐	C12402	Answering machines
☐	C12403	Cell Routers
☐	C12404	Digital enhanced cordless telecommunications DECT cordless phones
☐	C12405	Digital Telephones
☐	C12406	Mobile phones
☐	C12407	Telecommunication Maintenance
☐	C12408	Telecommunication Supply and Installation
	C12500	TRANSPORTATION AND COURIER SERVICES
☐	C12501	Posting and Courier Services
☐	C12502	Transportation of biological material (blood, mosquitoes, etc)
☐	C12503	Transportation of biological material on dry ice
☐	C12504	Transportation of biological material throughout Africa
	C12600	VEHICLE HIRE/PURCHASE
☐	C12601	Chartered bus services
☐	C12603	Shuttle services
☐	C12604	Vehicle purchasing/leasing
☐	C12605	Vehicle rental
☐	C12700	VEHICLE MAINTENANCE AND REPAIR SERVICES AND PARTS
☐	C12800	VEHICLE SUPPLIERS
	C12900	VETINARY SERVICES AND CONSULTING
☐	C12901	Veterinary consulting
☐	C12902	Veterinary services
☐	C13000	PROPERTY LEASING
	C13100	TRAINING PROVIDERS
☐	C13101	Administration/Personal Training
☐	C13102	Health and Safety Training
☐	C13103	HR Training
☐	C13104	IT Training
☐	C13105	Scientific Research Training
☐	C13106	SCM/Finance Training

*** These commodity groups have accreditation criteria that must be completed in section 4 of this application form.**

4. ACCREDITATION

BUILDING AND CONSTRUCTION AND MAINTENANCE SERVICES

Please complete the following information, if the firm provides **BUILDING AND CONSTRUCTION AND MAINTENANCE SERVICES** and any of the sub-commodities indicated below.

If the firm is registered in grade 2 or above, please provide a copy of the CIDB certificate.

CIDB Registration Number (CRS):

COMMODITY CODE	COMMODITY GROUPS AND SUB-COMMODITY GROUPS	IF ANY OF THE FOLLOWING COMMODITIES HAVE BEEN SELECTED, PLEASE INDICATE IF THE FIRM IS REGISTERED WITH THE CIDB FOR THE ASSOCIATED CLASS OF CONSTRUCTION WORKS?			WHAT IS THE CIDB GRADING?
EXAMPLE	EXAMPLE	General Building Works (GB)	✓	NO	3
C10402	Air conditioning installation or maintenance or repair services	Mechanical Engineering Works (ME)	YES	NO	
C10404	Bricklaying	General Building Works (GB)	YES	NO	
C10406	Burglar Proofing	Specialist Works (SL) (Structural Steelwork fabrication and erection)	YES	NO	
C10407	Carpentry	General Building Works (GB)	YES	NO	
C10409	Civil Works	General Building Works (GB)	YES	NO	
C10410	Concrete Fencing	Specialist Works (SQ) (Precast concrete security fencing or steel security fencing)	YES	NO	
C10411	Damp proofing	Specialist Works (SN) (Waterproofing of basements, roofs and walls using specialist systems)	YES	NO	
C10412	Electrical services	Electrical Engineering Works (EB)	YES	NO	
C10413	Fire protection supply, installation and maintenance	Specialist Works (SF) (Fire prevention and protection systems)	YES	NO	
C10414	General building construction	General Building Works (GB)	YES	NO	
C10416	Glazing	Specialist Works (SG) (Glazing, curtain walls and shop fronts)	YES	NO	
C10418	Heavy duty Precast Walling	Civil Engineering Works (CE)	YES	NO	
C10422	Lifts (installation, commissioning and maintenance)	Specialist Works (SI) (Lifts, escalators and travellators)	YES	NO	
C10423	Lightening Conductors	Electrical Engineering Works (EB)	YES	NO	
C10427	Palisade Fencing	Specialist Works (SQ) (Precast concrete security fencing or steel security fencing)	YES	NO	
C10428	Partitioning and Dry walling	Specialist Works (SG) (Glazing, curtain walls and shop fronts)	YES	NO	
C10430	Plumbing system maintenance or repair	Water Supply and Drainage for Buildings (SO)	YES	NO	
C10432	Quality Mains and Data Supply	Electrical Engineering Works (EB)	YES	NO	
C10434	Retaining wall construction	Civil Engineering Works (CE)	YES	NO	
C10435	Waterproofing	Specialist Works (SN) (Waterproofing of basements, roofs and walls using specialist systems)	YES	NO	

SECURITY AND SURVEILLANCE SERVICES (C12200)

Please complete the following information, if the firm provides **SECURITY AND SURVEILLANCE SERVICES** and any of the associated sub-commodities.
Please provide a copy of the PSIRA certificate if the firm is registered with PSIRA.

Is the firm registered with PSIRA?	Yes / No
PSIRA Number:	

LABORATORY EQUIPMENT CALIBRATION (C11508)

Please complete the following information, if the firm provides **Laboratory equipment calibration**.
Please provide a copy of the SANAS certificate if the firm is registered with SANAS.

Is the firm registered with the South African National Accreditation System (ISO/IEC 17025)?	Yes / No
SANAS Number:	

5. REGIONS

Complete the information next to the regions in which you have a **PHYSICAL OFFICE OR BRANCH**.

- **Where you have multiple offices within a region, please enter the details of ONE office for that region.**
- **If you have registered the same physical address, postal code, telephone or fax number for multiple regions, all these regions will be ignored and not captured.**
- **Each office MUST have at least a valid telephone number. Each office MUST also have either a valid email or valid fax number to be registered. If not provided, these offices will not be captured.**
- **If the postal code is not valid or does not correspond to the selected region, these regions will be ignored and not captured.**

REGIONS	CONTACT PERSON	PHYSICAL ADDRESS	POSTAL CODE	CONTACT DETAILS	EMAIL
South Africa					
Gauteng					
Tshwane				Tel: Cell: Fax:	
Rest of Gauteng				Tel: Cell: Fax:	
Eastern Cape				Tel: Cell: Fax:	
Free State				Tel: Cell: Fax:	
Kwazulu-Natal					
Durban				Tel: Cell: Fax:	
Rest of Kwazulu-Natal				Tel: Cell: Fax:	

REGIONS	CONTACT PERSON	PHYSICAL ADDRESS	POSTAL CODE	CONTACT DETAILS	EMAIL
Mpumalanga				Tel: Cell: Fax:	
Northern Cape				Tel: Cell: Fax:	
Limpopo				Tel: Cell: Fax:	
North West Province				Tel: Cell: Fax:	
Western Cape					
Cape Town				Tel: Cell: Fax:	
Rest of Western Cape				Tel: Cell: Fax:	
Outside South Africa				Tel: Cell: Fax:	

Which contact details would you like to use for communications with regards to Acquisitions:	☐	Notify system selected REGION for EACH acquisition (using contact details in section 5 above)
	☐	Notify the FIRM for ALL acquisitions (using contact details in Section 1-Particular)

6. REFERENCES

Complete the information for the references.

- **At least 3 (three) contactable references MUST be provided.**
- **Failure to do so may result in your application not being accredited.**
- **A telephone number, client address and associated postal code for each reference MUST be provided. Failure to provide this will result in the references not being captured.**

	CLIENT NAME	NATURE OF BUSINESS TRANSACTION	CONTACT PERSON	CLIENT ADDRESS	POSTAL CODE	CONTACT DETAILS	EMAIL
1						Tel: Fax:	
2						Tel: Fax:	
3						Tel: Fax:	
4						Tel: Fax:	
5						Tel: Fax:	

7. DECLARATIONS

A. DECLARATION OF INTEREST (SBD 4)

Note according to legislation : -

Any legal person, including persons employed by the state[1], 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 a price quotation, advertised competitive bid, limited bid or proposal). 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 position in 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. "*

"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.

In view of the above and considering that as a "prospective provider", you may submit Quotations/bids, it is required that the following declarations are made.

Declarations	**Answers**	
1. Are any of the company's directors, managers, members, trustees, principle shareholders or stakeholders presently employed by the state?	Yes	No
If Yes, furnish particulars Name of Person: Name of State Institution: Position occupied: Any other particulars:		
If any of the company's directors, managers, members, trustees, principle shareholders or stakeholders, are presently employed by the state, has the appropriate authority to undertake remunerative work outside employment in the public sector been obtained?	Yes	No
If no documentation is provided, furnish reasons for non-submission of such proof:	If Yes, attach proof of such authority. (Failure to do so, may result in disqualification of this application)	
2. Did any of the company's directors, managers, members, trustees, principle shareholders or stakeholders or their spouses conduct business with the state for the past twelve months?	Yes	No
If Yes, furnish particulars		
3. Does any of the company's directors, managers, members, trustees, principle shareholders or stakeholders, have any relationship (family, friend, other) with persons in the service of the state and who may be involved with the evaluation and or adjudication of bids/quotations?	Yes	No
If Yes, furnish particulars		
4. Are you, aware of any relationship (family, friend, other) between the Company and any persons in the service of the state who may be involved with the evaluation and or adjudication of bids/quotations?	Yes	No
If Yes, furnish particulars		
5. Do you or any of the directors / trustees / shareholders / members of the company have any interest in any other related companies whether or not they are bidding for this application?	Yes	No
If Yes, furnish particulars		

7. DECLARATIONS (Continued)

B. DECLARATION OF VENDOR'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES (SBD 8)

The application of any Vendor/Firm may be rejected if that Vendor/Firm, or any of its directors have:

a. Abused the MEDICAL RESEARCH COUNCIL's supply chain management policy or committed any improper conduct in relation to such policy;
b. Been convicted for fraud or corruption during the past five years;
c. Wilfully neglected, reneged on or failed to comply with any government, municipal or other public sector contract during the past five years; or
d. Been listed in the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004).

In order to give effect to the above, the following questions must be answered:

Declarations	Answers	
1. Is the vendor or any of its directors listed on the National Treasury's database as a company or person prohibited from doing business with the public sector? (Companies or persons who are listed on this database were informed in writing of this restriction by the National Treasury after the audi alteram partem rule was applied).	Yes	No
If Yes, furnish particulars		
2. Is the vendor or any of its directors listed on the Register for Tender Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004)? (To access this Register enter the National Treasury's website, www.treasury.gov.za, click on the icon `Register for Tender Defaulters` or submit your written request for a hard copy of the Register to facsimile number (012) 326 5445)	Yes	No
If Yes, furnish particulars		
3. Was the vendor or any of its directors convicted by a court of law (including a court of law outside the Republic of South Africa) for fraud or corruption during the past five years?	Yes	No
If Yes, furnish particulars		
4. Was any contract between the vendor and MEDICAL RESEARCH COUNCIL or any other organ of state terminated during the past five years on account of failure to perform on or comply with the contract?	Yes	No
If Yes, furnish particulars		

7. DECLARATIONS (Continued)

C. GENERAL DECLARATIONS

I/we, the undersigned, who warrants that I/we am/are duly authorised to do so on behalf of the Vendor/Firm,

- Certify that all information provided in this form is correct,
- Have read and agree to the Terms and Conditions of registering on the Supplier Database, as set out in Appendix A, and

I / We acknowledge that:

- MEDICAL RESEARCH COUNCIL reserves the right to require a Vendor/Firm, at any time, to substantiate any information provided on this application form, in any manner required by MEDICAL RESEARCH COUNCIL.
- If information provided on this application is found to be incorrect, MEDICAL RESEARCH COUNCIL may, in addition to any other remedy -
  a. Recover costs, losses or damages it has incurred or suffered as a result of that person's/company's incorrect information being supplied; and
  b. Cancel a purchase order and claim any damages which it has suffered as a result of having to make less favourable arrangements due to such cancellation;

Would you like to be notified of other Supplier Databases for registration purposes?

Yes	No

Duly Authorised to sign on behalf of _____(Company Name):

SIGNATURE: _____

NAME: _____

CAPACITY: _____

DATE: _____

Appendix A: TERMS AND CONDITIONS

1. MEDICAL RESEARCH COUNCIL has a Supplier Database for the purpose of maintaining a "List of Prospective Providers" in order to be able to obtain quotations for commodities/services that may be required.
2. Vendors/Firms are required to apply for Listing and Accreditation on MEDICAL RESEARCH COUNCIL's Supplier Database in order to be eligible to provide quotations for goods and services required by MEDICAL RESEARCH COUNCIL.
3. Vendors/Firms may apply for accreditation and listing at any time, but may only be considered for listing onto the Supplier Database at the earliest convenience to MEDICAL RESEARCH COUNCIL, but at least on a quarterly basis with effect from the next quarter
4. Only Vendors/Firms that have submitted a signed copy of their latest application form for registration on the Supplier Database, together with all declarations and supporting documents, will be eligible for accreditation and listing on the Supplier Database.
5. Only Vendors/Firms who are contactable by email or fax or both will be eligible for listing on the Supplier Database.
6. The MEDICAL RESEARCH COUNCIL Supplier Database system will allocate HDI preference points for the Vendor/Firm based on the information supplied in the application for registration on the Supplier Database.
7. Vendors/Firms must register under each Commodity/Service Group that they can supply.
8. Only Vendors/Firms that have met the accreditation criteria for the Commodity/Service Group will be eligible for solicitation of quotations for those commodities/services.
9. Vendors/Firms must register each branch within MEDICAL RESEARCH COUNCIL's regions (as specified) from which they can offer the Commodities/Services selected.
10. No Vendor/Firm may apply for listing as the same legal entity as another Vendor/Firm on the Supplier Database. Where Vendors/Firms of the same name exist as different legal entities, each legal entity may register separately on the Supplier Database
11. Failure of a Vendor/Firm on the "List of Prospective Providers" to timeously update its information, declarations or supporting documents, may lead to that Vendor/Firm having to forfeit an opportunity to respond to an acquisition, if the changed information or declaration at the time of the request for quotation impacts on MEDICAL RESEARCH COUNCIL's ability to effectively evaluate a quotation
12. The Vendor/Firm has read, fully understand and accept/s MEDICAL RESEARCH COUNCIL's standard quotation Terms and Conditions as published on the official MEDICAL RESEARCH COUNCIL website.
13. Where Vendors/Firms are accredited on the basis that their application demonstrated that they were eligible for accreditation and listing on the Supplier Database and are subsequently found not to be eligible for listing on the Supplier Database, the Vendor/Firm shall be removed from the Supplier Database.
14. All information pertaining to the Vendors/Firms will be treated as confidential and maintained as such.
15. Vendors/Firms may provide their details on a continuous basis for consideration by completing and submitting the required application form. They will be considered for placement on the Supplier Database at the earliest convenience to MEDICAL RESEARCH COUNCIL, but on at least a quarterly basis with effect from the next quarter.
16. For various quotation thresholds, MEDICAL RESEARCH COUNCIL shall invite accredited, prospective providers (in the relevant commodity group and regions/areas), from the Supplier Database, to submit a quotations on a rotational basis
17. MEDICAL RESEARCH COUNCIL will not list a Vendor/Firm on the Supplier Database, in the following circumstances:
    1. Any Vendor/Firm whose name appears on the National Treasury's database as a person prohibited or restricted from doing business with the public sector.
    2. A person whose name appears on the Register of Tender Defaulters.
    3. A Vendor/Firm who has been placed in liquidation.
    4. A Vendor/Firm whose tax affairs are not in order.
    5. A Vendor/Firm involved in proven bribery, fraud and corruption.
    6. A Vendor/Firm who has not registered in accordance with statutory requirements.
18. No individual/company may be a shareholder of more than one Vendor/Firm, on the Supplier Database unless such Vendors/Firms supply goods and services from different Commodity Groups.
19. Vendors/Firms must respond to correspondence received in connection with a pending acquisition from the Supplier Database within the prescribed time period.
20. Vendors/Firms must update their registration particulars whenever a change in their Principals/Shareholders, Commodities and contact particulars occurs or when the Vendor/Firm is no longer eligible to remain on the Supplier Database. The update must be done within two months of such a change status occurring.
21. Existing Vendors/Firms on the Supplier Database will be required to update their particulars, declarations or supporting documents, whenever changes in their particulars, declarations or supporting documents will affect their listing or affect the evaluation of their quotations that they may submit to MEDICAL RESEARCH COUNCIL from time to time. Occurrences when Vendors/Firms will be required to update their particulars, declarations or supporting documents include, but are not limited to, the following:
    1. Vendors/Firms will be required to provide a new original valid tax clearance certificate prior to or when their registered tax clearance certificate expires, in order to continue to be eligible for solicitation of quotations for goods and services in excess of R30,000 (VAT Included).
    2. to update their HDI status information whenever there is a change in ownership.
    3. Vendors/Firms will be required to update their contact and address information whenever these may change, in order to continue to be contactable for requests for quotations when these are required.
    4. Vendors/Firms will be required to update their information and supporting documents whenever they no longer supply goods/services under the different commodities/categories or within the different regions/areas/locations, for which they have been accredited or when they wish to be accredited for other commodities/categories and regions/areas/locations.
    5. Vendors/Firms will be required to update their declarations whenever these change.
22. Vendor/Firm that did not qualify for placement on the Supplier Database, can re-apply at any stage later to be registered on the Supplier Database, if their status should change and it is felt that they will now conform to the requirements.
23. A Vendor/Firm will be removed completely from the Supplier Database under the following circumstances:
    1. The entity ceases to exist.
    2. Sole proprietor dies.
    3. Liquidation/sequestration of the entity.
    4. Continual proven non-delivery (two and more times) or unable to meet minimum specification continuously.
    5. Non-compliance with legislation or statutory requirement e.g. its tax status.
    6. Proven fraud and/or corruption
    7. On request from the Vendor/Firm.
    8. By mutual agreement, in writing.
24. A Vendor/Firm will be removed from a commodity category on the Supplier Database under the following circumstances:
    1. When the Vendor/Firm no longer meets the accreditation criteria for that commodity category;
    2. On the request from the Vendor/Firm.
25. A Vendor/Firm will be removed from a region/area/location on the Supplier Database under the following circumstances:
    1. When the Vendor/Firm no longer has a presence in or cannot supply to commodity category to a region/area/location;
    2. On the request from the Vendor/Firm.
26. A Vendor/Firm who fails to provide a valid original Tax Clearance Certificate or who fails to forward a new valid original Tax Clearance Certificate when the previous original Tax Clearance Certificate expires; will only be eligible to quote for requirements less than R30,000 (VAT Included).
27. A Vendor/Firm will not hold MEDICAL RESEARCH COUNCIL or its representatives accountable for any risk or loss arising from the registration and/or capturing of this information.
28. MEDICAL RESEARCH COUNCIL's payment terms are 30 days from date of statement.
29. No payment will be made to a vendor unless an original tax invoice complying with section 20 of the VAT Act No 89 of 1991, as amended, has been submitted to MRC.
30. Vendors shall be responsible for accounting to the appropriate authorities for its income tax, VAT or other moneys required to be paid in terms of the applicable law.
31. MRC is not compelled to accept lowest or alternative quotations/bid; reserves the right to accept part or whole of any quotation/bid or to cancel the quotation/bid.
32. The supplier shall be deemed to have satisfied him/herself before quoting as to the correctness and sufficiency of his/her quote for the Works and prices he/she has stated in the Schedules/quotation which rates and prices shall cover all his/her obligations under the contract/RFQ and all matters and things necessary for the proper completion of the Works.

APPENDIX B: BANKING DETAILS (CANNOT BE FAXED)

Please insert **APPENDIX B: BANKING DETAILS (CANNOT BE FAXED)** after this page.

Appendix B: Banking Details Form

NAME OF ACCOUNT HOLDER:	
BANK NAME:	
BRANCH NAME:	
BRANCH CODE:	
ACCOUNT NUMBER:	
ACCOUNT TYPE:	CHEQUE ☐
	SAVINGS ☐
	TRANSMISSION ☐

Authorisation for Electronic Transfer of Funds (EFT) to supplier's bank account

I, the undersigned, hereby authorise MEDICAL RESEARCH COUNCIL to credit my company account via Electronic Fund Transfer as aforementioned with the amount payable/due to specified beneficiary for goods and services rendered.

SIGNATURE: _____

NAME: _____

CAPACITY: _____

DATE: _____

FOR COMPLETION BY YOUR BANK

BANK STAMP

I certify that I am duly authorized by _____ to give such information
Bank Name
and that such information given is correct.

SIGNATURE: _____

NAME OF AUTHORIZED OFFICIAL: _____

DATE: _____

ORIGINAL TAX CLEARANCE CERTIFICATE (CANNOT BE FAXED)

Please insert **ORIGINAL TAX CLEARANCE CERTIFICATE (CANNOT BE FAXED)** after this page.

CERTIFIED COPY OF BBBEE VERIFICATION CERTIFICATE

* B E E *

Please insert **CERTIFIED COPY OF BBBEE VERIFICATION CERTIFICATE** after this page.

COMPANY REGISTRATION AND PROOF OF OWNERSHIP

TICK ONE DOCUMENT ONLY FOR THIS PAGE

Please print this page for each document required depending on the type of entity: -

TYPE OF ENTITY	Supporting Documents required to be submitted with your application Copy of Company Registration and Proof of Ownership Documents
Public Company (Listed)	Registered under old CIPRO: CM29 and CM1 (OR if the company name has changed with CIPRO, please provide CM29,CM9 and CM1) Registered/Amended under new CIPC: COR14.3 OR COR15.2 OR COR39 OR COR18.3 (Latest Certificate issued by CIPC)
Private Company - (Pty) Ltd	
Close Corporation	CK1 (OR if company details have changed with the Registrar of Companies, please provide CK2)
Partnership	Letters stating Partners with ID Numbers
Trust	Deed of Trust
Non-Profit Organisation (Section 21)	Certificate of Incorporation - Section 21 OR if registered under new CIPC: COR14.3)
Individual/Sole Proprietor	Certified Copy of ID Document of Individual
State Entity/Educational Organisation/Foreign Companies	Letter stating that the organisation does not have any registration documents

DOCUMENT REFERENCE	
CK1	Founding Statement for CC
CK2	Amended Founding Statement
CM1	Certificate of Incorporation
CM9	Certificate of Change of Name of Company
CM29	Contents of Register of Directors, Auditors and Officers
COR14.3	Registration Certificate for a Local Company
COR15.2	Amendment of Memorandum of Incorporation
COR18.3	Registration Certificate of Conversion of Close Corporation to Company
COR39	Notice of Change of Company Directors

☐	CK1	* C K 1 *
☐	CK2	* C K 2 *
☐	CM1	* C M 1 *
☐	CM9	* C M 9 *
☐	CM29	* C M 2 9 *
☐	CERTIFICATE OF INCORPORATION - SECTION 21	* C I N C *

☐	COR14.3	* C O R 1 4 3 *
☐	COR15.2	* C O R 1 5 2 *
☐	COR39	* C O R 3 9 *
☐	DEED OF TRUST	* C D T *
☐	ID DOCUMENT OF SOLE PROPRIETOR	* C I D *
☐	LETTER STATING PARTNERS WITH ID NUMBERS	* C P L *
☐	STATE ENTITY/EDUCATIONAL ORGANISATION/FOREIGN COMPANIES	* S O E *

Please insert the selected **COMPANY REGISTRATION AND PROOF OF OWNERSHIP** after this page

COPY OF SANAS CERTIFICATE

* S A N A S *

Please insert **COPY OF SANAS CERTIFICATE**
(if LABORATORY EQUIPMENT CALIBRATION (C11508) is provided)
after this page.

COPY OF CIDB CERTIFICATE

* C I D B *

Please insert **COPY OF CIDB CERTIFICATE**
(if BUILDING AND CONSTRUCTION AND MAINTENANCE SERVICES is provided
and the firm is registered as Grade 2 of higher)
after this page.

COPY OF PSIRA CERTIFICATE

Please insert **COPY OF PSIRA CERTIFICATE**
(if SECURITY AND SURVEILLANCE SERVICES is provided)
after this page.