

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 quote (includes a price quotation, advertised competitive quote, limited quote or proposal). In view of possible allegations of favouritism, should the resulting quote, 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 quote(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 quote.

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

- 2.1. Full Name of bidder/representative:.....
- 2.2. Identity Number:.....
- 2.3. Position occupied in the Company (director, trustee, shareholder?);2.6. VAT Registration Number:.....
- 2.4. Company Registration Number:.....
- 2.5. Tax Reference Number:.....
- 2.7. The names of all directors / trustees / shareholders / members, their individual identity numbers, tax reference numbers and, if applicable, employee / persal numbers must be indicated in paragraph 3 below.

2.8. Are you or any person connected with the bidder presently employed by the state?
 2.8.1. If so, furnish the following particulars:
 Name of person / director / trustee / shareholder/ member:.....
 Name of state institution at which you or the person connected to the bidder is employed:.....
 Position occupied in the state institution:.....
 If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector?
 YES NO

2.8.2. If you are presently employed by the state, did you obtain the appropriate authority to undertake remunerative work outside employment in the public sector?
 2.8.2.1. If yes, did you attach proof of such authority to the quote document?
 2.8.2.2. If no, furnish reasons for non-submission of such proof:.....
 (Note: Failure to submit proof of such authority, where applicable, may result in the disqualification of the quote.)
 YES NO

2.9. Did you or your spouse, or any of the company's directors / trustees / shareholders / members or their spouses conduct business with the state in the previous twelve months?
 2.9.1. If so, furnish particulars:.....
 2.10. Do you, or any person connected with the bidder, have any relationship (family, friend, other) with a person employed by the state and who may be involved with the evaluation and or adjudication of this quote?
 YES NO

2.10.1. If so, furnish particulars:.....
 2.11. Are you, or any person connected with the bidder, aware of any relationship (family, friend, other) between any other bidder and any person employed by the state who may be involved with the evaluation and or adjudication of this quote?
 2.11.1. If so, furnish particulars:.....
 2.12. 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 contract?
 YES NO

2.12.1. If so, furnish particulars:.....
 3. Full details of directors / trustees / members / shareholders.
 NB: The Department Of Health will validate details of directors / trustees / members / shareholders on CSD. It is the suppliers' responsibility to ensure that their details are up-to-date and verified on CSD. If the Department cannot validate the information on CSD, the quote will not be considered and passed over as non-compliant according to National Treasury Instruction Note 4 (a) 2016/17.

4 DECLARATION
 I, THE UNDERSIGNED (NAME).....
 FURNISHED IN PARAGRAPHS 2.
 I ACCEPT THAT THE STATE MAY REJECT THE QUOTE OR ACT AGAINST ME SHOULD THIS DECLARATION
 PROVE TO BE FALSE.
 CERTIFY THAT THE INFORMATION

Name of bidder..... Signature..... Position..... Date.....

¹State¹ means -
 a) any national or provincial department, national or provincial public entity or constitutional institution within the meaning of the Public Finance Management Act, 1998 (Act No. 1 of 1998);
 b) any municipally or municipal entity;
 c) provincial legislature;
 d) national Assembly or the national Council of provinces; or
 e) Parliament.
²Shareholder² 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.