



**Tshwane University
of Technology**

We empower people

VENDOR REGISTRATION

Revision 9-2021

APPLICATION BY

Name of company *(Please print):* _____

Full registered trade name *(Please print):* _____

Company/CC registration number: _____

**PRINT THE DOCUMENT, COMPLETE BY HAND AND SUBMIT AS A HARD
COPY TO TSHWANE UNIVERSITY OF TECHNOLOGY OR AS SPECIFIED IN
A SPECIFIC BIDDING PROCESS.**

Supplier Database Tshwane University of Technology

These forms must be completed in full and submitted electronically to Ms Hentie Bekker, email address: BekkerH@tut.ac.za or otherwise specified in a bidding process.

All forms to be completed in black ink only
Please PRINT so that all information is legible.
Forms that are not readable or are incomplete will be rejected.

New Application: Yes No

If No, please supply current TUT creditor number:

Are any of the Directors, Officers or Employees in your Organization a Tshwane University of Technology staff member? Yes No

If YES, please provide detail (of TUT staff member/s):

1. Surname and initials (of staff member): _____
Staff number:
2. Surname and initials (of staff member): _____
Staff number:

Do any of the Directors, Officers or Employees of Tshwane University of Technology have a relationship to or interest in your Organization? Yes No

If YES, please provide detail (of TUT staff member/s and relationship/interest):

1. Surname and initials (of TUT staff member): _____
Relationship/Interest: _____
2. Surname and initials (of TUT staff member): _____
Relationship/Interest: _____

PLEASE KEEP COPIES OF THE REGISTRATION FORM AND ALL DOCUMENTATION SUBMITTED FOR YOUR OWN RECORDS AS NO COPIES WILL BE MADE BY THE UNIVERSITY

- POINTS TO REMEMBER -

COMPLETING VENDOR REGISTRATION APPLICATION FORM

- **Mandatory fields** – Certain fields and documents are mandatory to certain business types only. Please ensure that all fields mandatory to your business type have been completed and if a field is not applicable to your business type, clearly mark it as N/A.
- **Required documentation** – Please refer to the attached table (following page) to determine the mandatory supporting documentation required for your business type. Please ensure that all copies of mandatory documents (certified copies where applicable) are attached.
- **Completion of questions** – Clearly state Yes, No or N/A to questions asked. Do not leave any Mandatory fields blank.
- **Certified documents** – Please ensure that a Commissioner of Oaths has certified the copy of your Identity document and Proof of Shareholding Certificates. The stamp of certification should be on the front of the document.
- **Copies of documents** - Please keep copies of the registration form and all supporting documentation submitted for your own records and ensure that all data is maintained and up to date on a continual basis. It is required from all applicants to update their detail every five years or as and when a change occurs.
- **Owners, Shareholders and Partners** – Please ensure that the percentage of ownership calculated up to 100% and that a field is completed for each of the business owners.
- **Certification of correctness** – Please ensure that the Certification of Correctness is signed and dated once all required documents and information have been attached and completed.
- **Collection points** – Completed registration forms and supporting documentation can be delivered to the address supplied herein.
- **Processing of registration** – Your completed registration will be processed and once verified, will be approved or rejected. The letter of confirmation of registration will be dispatched to the correspondence details supplied on page ten. Please note that this administration process will take a minimum of 5 working days. Once your registration has been included on the TUT Database your details will be accessible to the purchasing officers of TUT. Formal registration as a creditor of TUT shall only be done on placement of the first official order. A formal creditor number shall then be issued which shall have to be quoted in all future correspondence with the University.
- **Business opportunities** – Please note that registration on the TUT Supplier Database does not guarantee business opportunities. Inclusion of the name in a database does not in any way guarantee any persons, company, service provider, vendor, etc. any business from the Tshwane University of Technology. All procurement will be subjected to the Procurement- and Tender Policies of Tshwane University of Technology.
- **Amendments** – Please notify the Tshwane University of Technology – Procurement Department immediately of any changes to the information submitted.
- **Queries** – Should you have any queries or if you require assistance completing the registration form, please contact the Procurement Department on **Tel: 012-382 6550** or bekkerh@tut.ac.za OR as specified in a bidding process.
- If a company has more than one office, each office must fill in a separate form unless the point of transaction is centralized in the company's head office.
- **Commodities** – Please note that the key facilities in the database are classified as commodities and each potential vendor must indicate the commodity/commodities in which it would like to register for RFQ's. A vendor shall only be allowed to register for the **maximum of four (4) commodity groups**.

- **Transparency and Equality** – The main objective of this process is to enhance transparency and equality on the part of the University and to facilitate effective communication with its vendors.
- **Submission of Vendor Registration** – Applications must be e-mailed to bekkerh@tut.ac.za OR as specified in a bidding process; and must be fully completed with all the relevant documentation attached. It is a condition of bidding that a vendor's taxes must be in order or satisfactory arrangements must have been made with the Receiver of Revenue to meet his/her tax obligations. In bids where consortia/joint ventures/sub-contractors are involved, each party must submit a separate valid Tax Clearance Certificate.
- **Data Privacy Notice** – Tshwane University of Technology (TUT) is committed to safeguarding your personal information in line with the requirements of the *Protection of Personal Information Act No.4 of 2013 (POPIA)*. TUT confirms that any personal information collected in terms of this document shall be processed lawfully in compliance with POPIA. TUT will only process/use your personal information for the purposes set out in this form/document and in accordance with your data protection rights. The University may, if necessary, transfer and/or disclose your personal information to approved third parties or related agents to carry out its function according to the purpose for which the information is requested. Such disclosure shall always be subject to a written agreement concluded between the University and such third parties ("the recipient") obligating the recipient to comply with strict confidentiality and all the information security conditions and provisions as contained in POPIA. The third party may not use the personal information for any purpose other than as is expressly permitted.

PLEASE KEEP COPIES OF REGISTRATION FORM AND ALL DOCUMENTATION SUBMITTED

CONTACT DETAILS

Registrar of Close Corporations & Companies The Dti campus (Block F - Entfutukweni) 77 Meintjies Street, Sunnyside, Pretoria Tel: 0861 843 384	Department of Labour (U.I.F certificates) 94 Church street, Pretoria Tel: 012 337 1802
City of Tshwane/Local Authority if not based in Tshwane HB Phillip Building, 320 Bosman Street, Pretoria. Tel: 012 337 4000	Department of Labour (Workman's Compensation) Compensation House, Cnr Hamilton & Soutpansberg Rd, Pretoria Tel: 012 319 9111
Receiver of Revenue (SARS) c/o Schoeman & v.d. Walt Street, P.O. Box 436, Pretoria 0001 Tel: 012 317 2000	Security Service Industry Regulatory Authority 481 Belvedere Street, Arcadia Tel: 012 337 5500

COMMODITY GROUPS

PLEASE NOTE:

Any vendor may only register for a maximum of four commodity groups

Tick	Cat No	Description	Tick	Cat No	Description	Tick	Cat No	Description
	001	Laboratory equipment		032	Welding & Flame Cutting Equipment		063	Catering & Events Equipment Hire
	002	Fasteners, Bolts, Nuts, Rivets & Washers		033	Office Furniture, Components & Accessories		064	Engineers & Contractors
	003	Containers & Packaging		034	Hospital, Medical & Surgical Equipment & Furniture		065	Castors, Ladders, Trolleys & Wheels
	004	Bricks & Blocks		035	Outdoor & Pavement Furniture		066	Recreational & Sports Requisites
	005	Canteen, Kitchen & Cooking equipment & Appliances		036	Agricultural & Horticultural Equipment & Machinery		067	Artwork, Crafts, Curios & Gifts
	006	Tableware, Hollowware & Utensils		037	Compressors, Blowers & Vacuum Equipment		068	Hygiene, Beauty & Cosmetic Products
	007	Sand, Soil, Cement & Concrete		038	Air conditioners, Ventilation, Fans & Coolers		069	Publications, Videos & Films, Books, Newspapers, Magazines & Periodicals
	008	Home & Industrial Fabrics & Textiles		039	Furnaces, Kilns, Ovens & industrial Dryers		070	Fresh Flowers, Plants & Seeds
	009	Clothing, Safety Clothing & Footwear		040	Office Machines & Equipment		071	Medications & Pharmaceuticals by General Classification
	010	Cordage, Ropes, Twines, String & Nets		041	Machine Tools & Accessories		072	Financial, Insurance & Legal Services
	011	Electronic Components & Equipment		042	Radio, Television, Audiovisual & Communication Equipment		073	Analysis, Inspection & Evaluation Services
	012	Computer Hardware & Supplies		043	Pumps, Engines, Spares & Accessories		074	Installation Services
	013	Computer Software & Solutions		044	Fertilizers		075	Maintenance & Repair Services
	014	Electric & Data Cable, Wire & Equipment		045	Animal Feeds		076	Manufacturing & processing Services
	015	Electric Lamps, Lighting & Accessories		046	Transport Vehicles, Trailers, Motorcycles, Boats, Aircraft & Spares & Accessories		077	Cleaning Services
	016	General Electrical Equipment & Parts		047	Washing, Scrubbing, Cleaning Plant and Supplies		078	Administration & Management Services

Tick	Cat No	Description	Tick	Cat No	Description	Tick	Cat No	Description
	017	Control, Process & Measurement Instrumentation		048	Nails, Pins, Screws & Staples		079	Engineering & Related Services
	018	Test & Analysis instrumentation		049	Fuels, Petrol, Oils & Lubricants		080	Advertising & Marketing Services
	019	Scopes, Lenses & Optical Equipment		050	Coatings, Waterproofing & Paints		081	Consultants
	020	Security Equipment & Requisites, Walling, Fencing & Gates		051	Stationery		082	Communication, Publishing & Printing Services
	021	Signs, Nameplates, Notices & Labels		052	Steel, Pipes and Profiles		083	Consulting Engineers
	022	Engravers, Die-Sinkers & Embossers		053	Valves and Pressure Vessels		084	Chemicals & Associated Products
	023	Insulation Products		054	Pest Control and Cleaning materials		085	Security Services
	024	Precious Stones and Materials		055	Adhesives		086	Food Services
	025	Building requisites, fittings & Materials		056	Heaters and Heating Equipment		087	Computer Related Services
	026	Flooring Products		057	Timbers and Timber materials		088	Accommodation, Tourism & Entertainment
	027	Sanitary ware & Accessories		058	Plant & Equipment Hire		089	Agricultural Services
	028	Sewing, Knitting & Textile Machines & Equipment		059	Brush ware		090	Retailers & Wholesalers
	029	Printing, Marking, Engraving & Labeling Equipment		060	Power Tools & Accessories		091	Government Services – National, Local & Municipal
	030	Printing Supplies		061	Hand Tools & Accessories		092	Other (Please specify):
	031	General Foodstuffs		062	Transport Hire & Transport and Cartage Services			

Documents Attached	Please tick box		
	Yes	No	N/A
Workman's Compensation Certificate (Certified)			
VAT 103 (Certified)			
P.A.Y.E./SDL/UIF (EMP103) (Certified)			
Company Registration Document (Certified)			
Proof of Ownership/Shareholder certificate (Certificate)			
Tax Clearance Certificate (Original)			
Proof of Banking Document			
Three (3) months Bank Statements			
Disability Documents (Certified)			
Security Officer's Board registration (Certified)			
Municipal Account			
Labour Broker			
Company Profile with Organogram			
Joint Venture Agreement/s			
B-BBEE CERTIFICATE - COMPULSORY			

Please note: Proof of documents for all of those above are required to ensure successful registration on the Supplier Database. In event of a document not being required please tick the N/A box.

1. COMPANY REGISTRATION DOCUMENTS

NB. DOCUMENTARY PROOF MUST BE PROVIDED WHERE APPLICABLE (Please mark N/A if not applicable.)

NB: All fields marked with * are mandatory. Fields marked with # are to be completed only if applicable

1.1 COMPANY TYPE * (NB. Documentary Proof of Registration must be provided)

PUBLIC COMPANY LTD	CERTIFIED COPY OF CERTIFICATE OF INCORPORATION (CM 3)
PRIVATE COMPANY (PTY) LTD	CERTIFIED COPY OF CERTIFICATE OF INCORPORATION (CM 3)
CLOSE CORPORATION CC	CERTIFIED COPY OF CK1 DOCUMENT OR CK2 IF APPLICABLE
SOLE PROPRIETOR	CERTIFIED COPY OF REGISTRATION DOCUMENT
PARTNERSHIP	CERTIFIED COPY OF PARTNERSHIP AGREEMENT
BUSINESS TRUST	CERTIFIED COPY OF REGISTRATION DOCUMENT
OTHER (If Joint Venture)	CERTIFIED COPY OF REGISTRATION DOCUMENTS

Company or CC number

Not applicable to all companies, please specify if N/A.

Did you attach your company Registration document? Y N N/A

1.2 PROOF OF SHAREHOLDING *

CERTIFIED COPIES of Shareholders certificates or CC members share allocation documents must be supplied.

Not applicable to all companies, please specify if N/A.

Did you attach your proof of shareholders documents? Y N N/A

1.3 PROOF OF BANKING DETAIL *

Current bank statement or copy of cancelled cheque.

Did you attach your proof of banking detail? Y N N/A

1.4 VAT REGISTRATION #

VAT Registration Number

If you qualify for VAT exemption, please attach confirmation of VAT exemption.

Not applicable to all companies, please specify if N/A

Did you attach proof of your VAT registration (VAT 103)? Y N N/A

NB: All fields marked with * are mandatory. Fields marked with # are to be completed only if applicable

1.5 P.A.Y.E. REGISTRATION #

Not applicable to all companies, please specify if N/A

Did you attach proof of your P.A.Y.E. registration? YNN/A

1.6 UNEMPLOYMENT INSURANCE FUND REGISTRATION #

U.I.F Number

Not applicable to all companies, please specify if N/A

Did you attach proof of your UIF registration? YNN/A

1.7 WORKMAN'S COMPENSATION FUND REGISTRATION #

Workman's Compensation Fund No.

Not applicable to all companies, please specify if N/A

Did you attach proof of your Workman's Compensation Fund registration? YNN/A

1.8 SECURITY OFFICERS BOARD REGISTRATION #

Security officers board registration no.

Not applicable to all companies, please specify if N/A

Did you attach proof of your Security Officers Board Registration? YNN/A

1.9 DISABILITY #

Not applicable to all companies, please specify if N/A

Did you attach proof of your disability? YNN/A

1.10 INCOME TAX REGISTRATION #

Income Tax Registration number

Not applicable to all companies, please specify if N/A

Did you attach proof of your Income Tax Registration? YNN/A

NB: All fields marked with * are mandatory. Fields marked with # are to be completed only if applicable

1.11 TAX CLEARANCE CERTIFICATE *

Original of valid Tax Clearance Certificate must be supplied

Did you attach a valid Tax Clearance Certificate?

Y N N/A

1.12 CIDB REGISTRATION #

CRS Registration number

Current CIDB Grading

Not applicable to all companies, please specify if N/A

Did you attach proof of your CIDB Registration?

Y N N/A

1.13 NHBRC REGISTRATION #

NHBRC Registration number

Not applicable to all companies, please specify if N/A

Did you attach proof of Registration?

Y N N/A

1.14 TRANSPORT OPERATORS #

PDP Permit No.

Not applicable to all companies, please specify if N/A

Did you attach a copy of your PDP Permit?

Y N N/A

NB: All fields marked with * are mandatory. Fields marked with # are to be completed only if applicable

3. SALES AND ACCOUNTS DEPARTMENT *

3.1 Sales Department #

Contact Name

Cell No

E-Mail Address

Telephone Fax

3.2 Accounts Department *

Contact Name

Cell No

E-Mail Address

Telephone Fax

4. CORE BUSINESS OPERATION *

(Mark with X in applicable fields)

Primary Contractor Sub-Contractor (Less than 25% generated turnover as prime contractor) Labour-only Contractor

Supplier Manufacturer Labour Agency

Professional Services Education, Development & Training Service Provider Construction (CIDB)

Other, please specify

.....

5. ANNUAL AVERAGE TURNOVER *

Indicate annual average turnover excluding Value Added Tax during the past three years:

R

Indicate total gross asset value (fixed property excluded):

R

Indicate number of permanent employees 0-5 6-50 51+

NB: All fields marked with * are mandatory. Fields marked with # are to be completed only if applicable

Note: Certified copy of shareholder certificates or proof of ownership must be supplied
(Multiple copies of this page may be submitted if required)

10.1 Complete the following for the shareholders who are actively involved in the management and daily business operation of the business

First Name

Surname

Identification Number

Percentage of Share %

Capacity Gender HDI Status

Disabled (a permanent impairment of a physical, intellectual or sensory functions resulting in restricted or lack of ability to perform in a manner considered normal for a human being)
Yes No

Were you a South African citizen on or before 26th April 1994?
Yes No

Are you actively involved in the management and the daily business operation of the business?
(Please provide a written breakdown e.g. company profile) Yes No

First Name

Surname

Identification Number

Percentage of Share %

Capacity Gender HDI Status

Disabled (a permanent impairment of a physical, intellectual or sensory functions resulting in restricted or lack of ability to perform in a manner considered normal for a human being)
Yes No

Were you a South African citizen on or before 26th April 1994?
Yes No

Are you actively involved in the management and the daily business operation of the business?
(Please provide a written breakdown e.g. company profile) Yes No

First Name

Surname

Identification Number

Percentage of Share %

Capacity Gender HDI Status

Disabled (a permanent impairment of a physical, intellectual or sensory functions resulting in restricted or lack of ability to perform in a manner considered normal for a human being)
Yes No

Were you a South African citizen on or before 26th April 1994?
Yes No

Are you actively involved in the management and the daily business operation of the business?
(Please provide a written breakdown e.g. company profile) Yes No

NB: All fields marked with * are mandatory. Fields marked with # are to be completed only if applicable

6. CERTIFICATION OF CORRECTNESS OF INFORMATION SUPPLIED IN THIS DOCUMENT *

I/We the undersigned am/are duly authorized to do it on behalf of the firm, hereby certify that:

1. The information supplied is correct.
2. All copies of relevant information are attached.
3. The HDI points claimed are correct and based on owners/shareholders who are actively involved in the day to day management of the enterprise.
4. I take note that payment will be effected 30 days after delivery was accepted if delivered with an original invoice.
5. If I am classified as a dependent service provider/labour broker as stated in the fourth schedule of the Income Tax Act I hereby authorize the University to deduct P.A.Y.E. and supply me with a yearly IRP 30 (only if no valid Labour Broker Certificate can be supplied).

Signature of authorized person

Date

Personal information in block letters

Name	<input type="text"/>
Surname	<input type="text"/>
Telephone No	<input type="text"/>
Capacity	<input type="text"/>
ON BEHALF OF (Supplier's name)	<input type="text"/>

7. AUTHORISATION FOR ELECTRONIC TRANSFER OF FUNDS (EFT) TO VENDOR'S BANK ACCOUNT

PLEASE COMPLETE IN BLOCK LETTERS

Surname/Company name	<input type="text"/>
First Names/Company of Account Holder	<input type="text"/>
Address	<input type="text"/>
Telephone	<input type="text"/>
Mobile	<input type="text"/>
E-mail	<input type="text"/>
Bank	<input type="text"/>
Branch	<input type="text"/>
Bank Account	<input type="text"/>
Branch Number	<input type="text"/>
Type of Account	<input type="checkbox"/> Cheque (attach cancelled cheque as proof) <input type="checkbox"/> Savings (attach bank statement as proof) <input type="checkbox"/> Transmission (attach bank statement as proof)



I, the undersigned hereby authorize the Tshwane University of Technology to credit my account via EFT as aforementioned with the amount payable/due to specified beneficiary for goods and services rendered Please note: that if a cancelled cheque is not attached, an official stamp should be obtained from the bank to confirm the information given above.

Full Name and Surname: _____

Company Name: _____

Position in Company: _____

Signature

Date

TO BE COMPLETED BY BANK
(in cases where a cancelled cheque is not attached)

Above information checked and confirmed.

Surname & initials: _____

Designation: _____

Signature: _____

Official Stamp:



8. AUTHORISATION FOR AGREEMENT FOR TUT TO DO VETTING/SCREENING ON COMPANY

I, the undersigned hereby authorize the Tshwane University of Technology to conduct vetting on company.

Full Name and Surname: _____

Company Name: _____

Position in Company: _____

Signature

Date



8. FOR OFFICE USE ONLY

FOR OFFICE USE ONLY – PROCUREMENT DEPARTMENT

Information confirmed, scheduled and submitted for approval:

Signature: _____ Date: _____

FOR OFFICE USE ONLY – HOD: PROCUREMENT

Vendor approved for:

Commodity Code: _____ Description: _____

Commodity Code: _____ Description: _____

Commodity Code: _____ Description: _____

Commodity Code: _____ Description: _____

Signature: _____ Date: _____

FOR OFFICE USE ONLY – CREDITORS DEPARTMENT

Creditor Information Validity Check completed and returned to Tender Office

Approved (*mark with X*): Yes No

Reason/s for rejection attached: Yes No

Signature: _____ Date: _____

Captured on ITS:

Creditor code: _____

Signature: _____ Date: _____

Successful Vendor applicant notified by:

E-mail E-mail address: _____

Fax Fax Number: _____

Signature: _____ Date: _____