N.B.: This form must be completed in detail, and be forwarded to the KZNTAFA: Supply Chain Management Unit. Failure to comply with these requirements may result in the quotation being disregarded.

|  |  |  |
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| **NAME AND ADDRESS OF bidder (FIRM)** |  | **DETAILS OF institution** |
| **Company name:**  |  |  | KWAZULu-natal tourism and film authoritySUPPLY CHAIN MANAGEMENT Ithala Trade Centre, 29 Canal Quay (Signal) Road, Durban, 4001**enquiries: NQOBILE SHOZI****TEL NO. 031 003 9000** |
| **Address:**  |  |
|  |  |
| **tel no.**  |  |
| **fax no.**  |  |
| **contact person:**  |  |
| CLOSING DATE AND TIME |  | **VALIDITY PERIOD:** | 90 | DAYS |
| **03/12/2024 @11:00Am** |  |

 **INFORMATION REQUIRED: . SHAREHOLDING AND OWNERSHIP DETAILS**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **Quantity** | **Description** | **Price** |  | **Name**  | **ID Number**  | **%****Equity** | **Male / Female**  | **Dis-abled Yes/No**  | **African****Coloured Indian** **White**  | **Youth****Yes/****No** | **% Time devoted to Company**  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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|  |   |  | **OFFICIAL STAMP OF BUSINESS**: |  |  |  |  |  |  |  |
| **TOTAL QUOTATION PRICE ( INCLUSIVE OF VALUE ADDED TAX @ 15%)** |  | COMPLYING  |  |  |  |  |  |  |  |  |  |
| **Does the offer comply to specification?** *If not, furnish details of deviation in space provided for “Remarks”* |  |   |  |  |  |  |  |  |  |
| **CSD NUMBER** |  |  |  |  |  |  |  |  |  |  |  |
| **REMARKS ( IF ANY)**  |  | SIGNATURE OF BIDDER: DATE: |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |