



SUPPLIER APPLICATION FORM

COMPANY NAME:

PRODUCT/SERVICE:

Upon completion return to: **SENIOR MANAGER: PROCUREMENT ATNS**

Eastgate Office Park, Block C, South Boulevard Road Bruma, 2198	Private Bag X15 Kempton Park Johannesburg 1620
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1. The following important notes should be read carefully prior to completion of this form.

- 1.1 The form must be completed in full and signed by the owner(s)
- 1.2 Full signatures are required when alterations are made on this document.
- 1.3 If the information required is not applicable to your business, clearly insert N/A in the appropriate space.
- 1.4 Mark the appropriate square with an '**X**' where it is applicable to you.
- 1.5 All fields on the application **must** be completed by the applicant; if the space provided is left blank, it will be regarded as information still outstanding and you will not be registered.
- 1.6 No faxed or emailed application forms will be accepted
- 1.7 Businesses providing information intentionally incorrect or fraudulently will be disqualified.
- 1.8 Blacklisted businesses by the state must first be cleared from the blacklist registering.
- 1.9 The following documents must be attached to the application form:
 - Company Profile
 - Company Registration documents
 - Certified Identity documents of the owner, partners, shareholders and directors (copies of certified copies will not be accepted)
 - Partnership / Joint Venture agreements signed and witnessed by all parties



concerned

- Share / shareholder certificates if applicable
- Proof of registration with Workman's Compensation commission & Letter of Good Standing
- Valid Original Tax Clearance Certificate
- Audited financial statements for the two previous financial years/Credit rating
- Proof of registration with the Unemployment Insurance Fund (UIF) & PAYE if applicable
- SANAS accredited BBBEE Certificate (must be valid)

2. BUSINESS INFORMATION

Full registered name of business	
Company registration number	
Trading number	
VAT registration number	
Tax Number	
Type of business	

Sole Proprietor		Private company (Pty) Ltd		Closed Corporation (CC)	
Foreign Company		Other (specify)		Public company (Ltd)	
Joint venture		Consortium		Partnership	
Trust		Section 21 Company		Government/ Parastatal	

2.2 Physical address of business:

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2.3 Postal address of business:

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2.3 Premises: Owned or Rented

Owned		Rented	
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Name of landlord if rented

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Indicate (X) the geographical areas where your business is willing and capable of supplying ATNS:

Johannesburg		Pretoria		East London	
Kruger/Mpumalanga		Pilanesburg		Mafikeng	
Bisho/King Williamstown		Upington		George	
Port Elizabeth		Bloemfontein		King Shaka	

3.1 State names of Directors / Owners /Partners with vested interest in ATNS.

Name	Race	Gender	Percentage Shareholding

3.2 State whether directors/owners/Partners are ex ATNS employees or relatives.

4. Technical Information

4.1 Is the company a certificate holder under ISO, SABS or any other authority?

YES		NO	
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If no, to what standard does the company adhere to?

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4.2 Does the company operate within a formal, auditable Quality Management System?

YES		NO	
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4.3 Does the company have an Occupational Health, Safety and Environmental Policy and system?

YES		NO	
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4.4 State the grading company and the grading body (e.g. NOSA)

YES		NO	
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4.5 Are you registered with any Bargaining Council? (If yes please attach Certificate of Compliance).

YES		NO	
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If no, please explain.

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4.6 Does the company carry any grading for the Occupational, Health, Safety and environment System?

YES		NO	
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4.7 Does the company comply with the Compensation of Occupational Injuries and Disease Act.

YES		NO	
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If no, please explain.

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4.8 Please indicate the products/services provided by the company and for how long such products/services have been provided.

Description of product/service provided	Years

4.9 Indicate membership of the company or its personnel to professional bodies.

Professional body	Date registered

4.10 Provide the company's BBBEE information.

BBBEE Details	
Company Size	
OWNERSHIP:	
%Black Owned	
%Black Women Owned	
%Black Youth Owned	
%Black People Living with Disability	
BEE Level	
Date of Verification	
Expiry Date	

4.11 Supply references of contracts/large orders completed by the company in the past twelve months.

Company	Contact Person	Contact details	Value



4.12 Indicate the magnitude of contracts that the company can successfully complete.

>5 Million	
R5Million &>R30 Million	
>R30 Million	

4.13 Company/ Supplier Classification: (Please X the relevant box or boxes)

ISO Listed	
Sales	
Importer	
Exporter	
Services	
Manufacturer	
Distributor	
Repairer	

5.1 Extensive List of commodities and services

Services Required	
We are looking for suppliers in the below listed categories:	
• Advertising Agencies	
• Air-conditioning maintenance & repair	
• Catering and Events	
• Cleaning Services	
• Construction and related services	
• Crane & hoist certification	
• Electrical maintenance & repair	
• Engineering	
Specify:	
• Fire Systems maintenance & repair	
• Forensics	
• General Building maintenance & repair	
• Legal Services	
• Management Consultants	
Specify:	
• Marketing (Photography, Event Management, Corporate Clothing and gifts)	



Specify:	
• Pest control	
• Plumbing maintenance & repair	
• Publications	
• Security Services, Permanent and ad hoc	
• Site maintenance, grass cutting, gardening etc	
• Stationery	
• Medical	
• Human Resource	
• IT	
• Office Furniture	
• Furniture Removals	
• Accounting	
• Architects	
• Training Services(valid proof of accreditation by the relevant SETA)	
Specify:	
• Other	



**ANNEXURE 1
BANK DETAILS**

ATNS prefers effecting payment via EFT hence complete the details below (Attach original cancelled cheque or original bank verification letter)

Supplier Name				
Postal Address		P O Box	Code	
Physical Address				
Telephone Numbers:				
• Business				
• Facsimile Number				
• After hours				
• Cell Phone				
• E-mail address				
Contact person				
Payment terms/discount				
VAT Registration number				
Bank details				
Bank				
Branch name & code				
Account number				
Type of account	Current (Cheque)	Savings	Transmission	Other (specify)



If there are any changes to the information supplied on this form, please inform the relevant ATNS Management Units / ATNS Procurement Office within 7 working days. Outdated information could lead to your company not being invited to tender or not receiving correct payment!

ATNS reserves the right to verify and /or follow-up on any of the claims made or references in this application form. Additional information can be requested by ATNS during its evaluation process. Suppliers will be re-accessed at regular intervals. Incomplete submissions will not be processed. This includes the supporting documentation as stipulated on the first page.

NOTE: ATNS PAYMENT TERMS ARE 30 DAYS OF STATEMENT

I certify that I have the appropriate authority to furnish the above-mentioned information, sign this document on behalf of my employer, and confirm that the information is correct at the time of completion. I hereby confirm acknowledgement of the abovementioned and agree to abide by it.

YES		NO	
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AUTHORISED SIGNATORY

DATE



For internal office use only

Checked By: _____ Procurement Specialist	Authorised by: _____ Senior Manager: Procurement
Processed by: _____ Procurement administrator	Vendor No: _____
_____ Date	



CHECK LIST

- Company Registration documents
- Certified Identity documents of the owner, partners, shareholders and directors (copies of certified copies will not be accepted)
- Partnership / Joint Venture agreements signed and witnessed by all parties concerned
- Share / shareholder certificates if applicable
- Proof of registration with Workman's Compensation commission & Letter of Good Standing
- Valid Original Tax Clearance Certificate
- Audited financial statements for the two previous financial years/Credit rating
- Proof of registration with the Unemployment Insurance Fund (UIF) & PAYE (if applicable)
- SANAS accredited BBBEE Certificate (must be valid)
- Original Cancelled Cheque/original stamped letter from the bank
- Certificate of Compliance (If line of business requires registration with any statutory body)