



REQUEST FOR AN EXPRESSION OF INTEREST

UKZN EOI 02/18

UNIVERSITY OF KWAZULU-NATAL

PROVISION OF VENDOR CATERING SERVICES FOR 2018
GRADUATION FOR THE UNIVERSITY OF KWAZULU-NATAL
(WESTVILLE CAMPUS)

RESPONDENT'S NAME : _____
MAILING ADDRESS : _____
TELEPHONE NUMBER : _____

I certify that this Expression of Interest is made without prior understanding, agreement, or connection with any corporation, firm or person submitting a bid for the same materials, supplies or equipment and is in all respects fair and without collusion or fraud. I agree to abide by all conditions of this bid and certify that I am authorized to sign this bid.

AUTHORISED SIGNATURE

PRINT NAME

Sealed documents marked "PROVISION OF VENDOR CATERING SERVICES FOR 2018 GRADUATION FOR THE UNIVERSITY OF KWAZULU-NATAL (WESTVILLE CAMPUS) must be dropped off in the Expression of Interest box situated in UKZN Westville Campus: Procurement Office, L block building, Level 8, before stipulated time.

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PART E1: SUBMISSION PROCEDURES

E1.1 NOTICE AND INVITATION TO SUBMIT AN EXPRESSION OF INTEREST

DESCRIPTION: REQUEST FOR AN EXPRESSION OF INTEREST FOR THE PROVISION OF VENDOR CATERING SERVICES FOR 2018 GRADUATION FOR THE UNIVERSITY OF KWAZULU-NATAL (WESTVILLE CAMPUS)

The University of KwaZulu-Natal (UKZN) is looking for highly professional and experienced catering vendors with an excellent track record in their field to supply catering services at our graduation ceremonies scheduled to take place in Durban.

The catering vendor must be qualified to provide a large amount of quality food, presented in a professional manner and supply excellent service at a reasonable price. This service is to be rendered to guests and the public attending the Graduation ceremonies. The vendor must manage the food station/truck outside the Sports Hall.

Please note: No costs will be attached for space rental.

Service Dates:

Catering in Durban: 16 - 21 April 2018 (please refer to document detailing each ceremony and date)

Queries relating to the issue of these documents shall be addressed to the Employer's Agent(s):

UKZN Representative to whom Procurement Enquiries must be addressed to	Name: Amile Ndelu Email address: NdeluS@ukzn.ac.za (All enquires must be in writing.)
UKZN Representative to whom Technical Enquires must be addressed to	Name: Rakshika Sibran Telephone Number: 031 260 7197 Email address: Sibran@ukzn.ac.za (All enquires must be in writing.)

Offers shall be delivered to:

Place: **8th Floor, L-Block, UKZN Westville Campus, University Road**
Date: **6th of April 2018**
Time: **12h00**

E1.2 SUBMISSION INFORMATION & EVALUATION CRITERIA

The information below provides clarity, amends or adds to the standard conditions of the EOI. Each item of the data given below is cross-referenced to the clause in the standard conditions of Expression of Interest to which it mainly applies.

CLAUSE NUMBER	EXPRESSION OF INTEREST DATA & EVALUATION CRITERIA
	H.1.1 SUPPORTING DOCUMENTS
H.1.1	<p>The Expression of Interest Documents issued by the Employer comprise of the documents as listed on the Content Page.</p> <p>In Addition, Respondents are advised, in their own interest, to obtain their own copies of the following acts, regulations, standards and conditions of contract included, by reference, in this procurement document.</p> <ol style="list-style-type: none"> 1. UKZN Expression of Interest Procedures for Acquisition of Goods & Services http://finance.ukzn.ac.za/Libraries/Procurement-Expression_of_Interests/Expression_of_Interest_Procedures.sflb.ashx 2. UKZN Procurement Policy http://finance.ukzn.ac.za/Libraries/Procurement-Expression_of_Interests/Procurement_and_Contracting_Policy_Approved_Council_20_June_2016.sflb.ashx
	H.2. ELIGIBILITY
H.1.2	<p>The University will only appoint with those Respondents who satisfy the following criteria:</p> <ol style="list-style-type: none"> 1. Tax Clearance Certificate Requirements It is a condition of the bid that the taxes of the successful Respondent must be in order. <ul style="list-style-type: none"> • Bidders are required to complete the Letter of Authorisation Form on E2.4, Page 21 of the bid document, granting UKZN authority to verify/validate the Respondents Tax Compliance Status from SARS. The Respondent is also required to attach a copy of the Respondents Tax Clearance Status printed from the online portal. • Upon evaluation of the bid, should the Respondents Tax Clearance Status printed from the online portal, not be in order, this will lead to the invalidation of the bid.

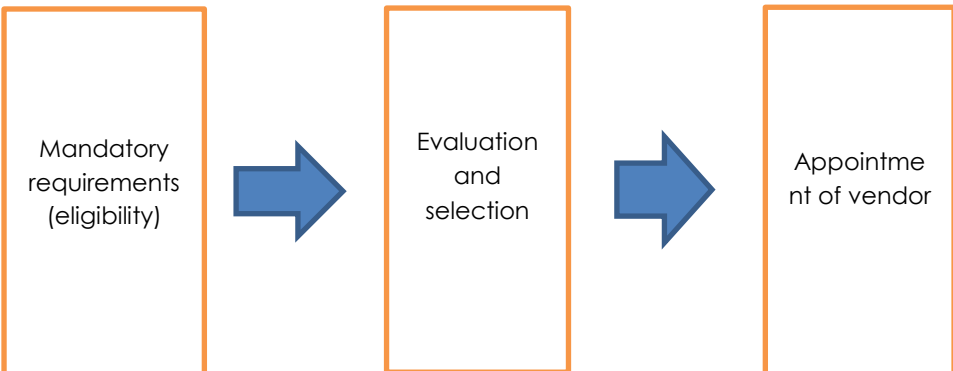
CLAUSE NUMBER	EXPRESSION OF INTEREST DATA & EVALUATION CRITERIA (CONTINUED)
	H.2. ELIGIBILITY (CONTINUED)
H.1.2	<ol style="list-style-type: none"> 1. The Respondent or any of its directors/shareholders should not be listed on the Register of Expression of Interest Defaulters in terms of the Prevention and Combating of Corrupt Activities Act of 2004 as a person prohibited from doing business with the public sector; 2. The Respondent has not: <ol style="list-style-type: none"> i. abused the Employer's Supply Chain Management System; or ii. failed to perform on any previous contract and has been given a written notice to this effect; 3. The Respondent has completed and signed the Declaration of Interest and there are no conflicts of interest which may impact on the Respondent's ability to perform the contract in the best interests of the Employer or potentially compromise the Expression of Interest process. 4. The Respondent has completed and signed the Declaration of Independent Expression of Interest Determination and has arrived at the accompanying Expression of Interest independently from, and without consultation, communication, agreement or arrangement with any competitor. 5. The Respondent has fully complied with this request for Expression of Interest and furnished all of the information and documents required listed in the Expression of Interest returnable schedule. 6. Submission of B-BBEE status level certificate 7. The Tenderer has fully complied with this request for BID and furnished all of the information and documents required listed in the tender returnable schedule.

CLAUSE NUMBER	EOI DATA & EVALUATION CRITERIA (CONTINUED)
	H.2.1 ACKNOWLEDGE ADDENDA
H.2.1.1	Respondents are to acknowledge receipt of any addenda in the method stated on the addenda.
	H.2.2 MAKING SUBMISSION

H.2.2	Identification details The identification details which must be stated in the offer outer package are:
	EOI NUMBER: UKZN EOI 02/18
	TITLE OF RFP: PROVISION OF VENDOR CATERING SERVICES FOR 2018 GRADUATION FOR THE UNIVERSITY OF KWAZULU-NATAL (WESTVILLE CAMPUS)
	CLOSING DATE: 5 th Of April 2018
	CLOSING TIME: 12H00
	RESPONDENT'S NAME:
	RESPONDENT'S ADDRESS:

E1.2 SUBMISSION INFORMATION (CONTINUED)

CLAUSE NUMBER	EOI DATA & EVALUATION CRITERIA
	H.2.3 CLOSING TIME
H.2.3.1	The closing time for submission of offers is as stated in the Notice and Invitation to submit an Expression of Interest
	TEST FOR RESPONSIVENESS
	Submission all documents listed as compulsory in the Returnable Schedule.

CLAUSE NUMBER	EOI DATA & EVALUATION CRITERIA (CONTINUED)
	H.2.4 EVALUATION OF RESPONSIVE SUBMISSIONS
H.2.4.1	UKZN will utilise the following methodology and criteria in selecting a preferred bidders, if so required: <div style="text-align: center; margin-top: 20px;">  <pre> graph LR A[Mandatory requirements (eligibility)] --> B[Evaluation and selection] B --> C[Appointment of vendor] </pre> </div>

PART E2: RETURNABLE DOCUMENTS

E2.1 LIST OF ALL RETURNABLE & COMPULSORY DOCUMENTS

The Respondent shall complete and submit the following returnable schedules and documents together with the completed section E1 (Part1):

Returnable Schedules

Item	Description	Details	Compulsory (Yes / No) Non-Submission will render to Respondent non-responsive	Compulsory (Yes / No) For Expression of Interest Evaluation Purposes	Respondents Check	UKZN Check
Documents Required for Eligibility to proceed to next Phase of Evaluation						
E2.2	Declaration of Interest	Completion of attached forms	Yes			
E2.3	Declaration of Respondent's Past Supply Chain Management Practices	Completion of attached forms	Yes			
E2.4	Tax Clearance Certificate Requirements	Respondents are to complete Letter of Authorisation Form on E2.4, Page 21 of the bid document, granting UKZN authority to verify/validate the Respondents Tax Compliance Status from SARS. The Respondent is also required to attach a copy of the Respondents Tax Clearance Status printed from the online portal and a pin issued by SARS. Upon evaluation of the submission should the Respondents Tax Clearance Status printed from the online portal, not be in order, this will lead to the invalidation of the bid.	Yes			
E2.5	Authority for Signatory	Form duly completed and signed.	Yes			
E2.6	B-BBEE Status Level Certificate	B-BBEE Status Level Certificate or sufficient evidence to confirm status as a qualifying EME	Yes			
Front Cover	The UKZN cover sheet with details of authorised signatory	The form duly completed.		Yes, for information purposes only		

E2.2 DECLARATION OF INTEREST

1.	If Respondent is a Sole Proprietor: Are you (or your spouse, child or parent) currently employed by UKZN?	Yes	No
1.1	If yes, provide particulars:		
2.	If Respondent is a Sole Proprietor: Have you (or your spouse, child or parent) been employed by UKZN in the past 12 months?	Yes	No
2.1	If yes, provide particulars:		
3.	If Respondent is a Sole Proprietor: Do you (or your spouse, child or parent) have any relationship (family, friend or other) with any person who may be involved with the evaluation or adjudication of this Bid?	Yes	No
3.1	If yes, provide particulars:		
4	If Respondent is a company, close corporation, partnership, trust or association: Are any of the Respondent's employees, shareholders, directors, members, partners, beneficiaries or trustees (or any of their spouses, children or parents) currently employed by UKZN?	Yes	No
4.1	If yes, provide particulars:		
5.	If Respondent is a company, close corporation, partnership, trust or association: Have any of the Respondent's employees, shareholders, directors, members, partners, beneficiaries or trustees (or any of their spouses, children or parents) been employed by UKZN in the past 12 months?	Yes	No
5.1	If yes, provide particulars:		
6.	If Respondent is a company, close corporation, partnership, trust or association: Do any of the Respondent's employees, shareholders, directors, members, partners, beneficiaries or trustees (or any of their spouses, children or parents) have any relationship (family, friend or other) with any person who may be involved with the evaluation or adjudication of this Bid?	Yes	No
6.1	If yes, provide particulars:		

E2.2 DECLARATION OF INTEREST (CONTINUED)

I, _____ (full names), certify that the information furnished in this declaration of interest is true and correct.

SIGNED at _____ on this _____ day of _____ 20

Signed by or on behalf of **THE RESPONDENT**

If signed on behalf of the Respondent, the signatory hereby warrants that (she/he) is duly authorised to sign this declaration on its behalf.

Signature: _____

Designation: _____

**E2.3 DECLARATION OF RESPONDENT'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES
 (TO BE COMPLETED BY RESPONDENT)**

1. This Section must form part of all Expression of Interests invited.
2. It serves as a declaration to be used by UKZN in ensuring that when goods and services are being procured, all reasonable steps are taken to combat the abuse of the supply chain management system.
3. The Expression of Interest of any Respondent may be disregarded if that Respondent, or any of its directors have:
 - a. abused UKZN's supply chain management system;
 - b. committed fraud or any other improper conduct in relation to such system; or
 - c. Failed to perform on any previous contract.
4. **In order to give effect to the above, the following questionnaire must be completed and submitted with the Expression of Interest.**

Item	Question	Yes	No
4.1	Is the Respondent or any of its directors listed on the National Treasury/UKZN's database as companies or persons prohibited from doing business with the public sector?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.1.1	If so, furnish particulars		
4.2	Is the Respondent or any of its directors listed on the Register for Expression of Interest Defaulters in terms of section 29 of the Prevention and Combating of Corrupt Activities Act (No 12 of 2004)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.2.1	If so, furnish particulars		
4.3	Was the Respondent or any of its directors convicted by a court of law (including a court outside of the Republic of South Africa) for fraud or corruption during the past five years?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.3.1	If so, furnish particulars		
4.4	Was any contract between the Respondent and any organ of state terminated during the past five years on account of failure to perform on or comply with the contract?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4.4.1	If so, furnish particulars		

**E2.3 DECLARATION OF RESPONDENT'S PAST SUPPLY CHAIN MANAGEMENT PRACTICES
(TO BE COMPLETED BY RESPONDENT) (CONTINUED)**

I, the undersigned

(Full name) _____

Certify that the information furnished on this declaration form is true and correct. I accept that, in addition to cancellation of a contract, action may be taken against me should this declaration prove to be false.

Signature

Date

Position

Name of Respondent

E2.4 TAX CLEARANCE CERTIFICATE REQUIREMENTS

[Tax Clearance certificate to be inserted here]

LETTER OF AUTHORISATION

I, the undersigned

(Full name) _____

Hereby grant authorisation to the University of KwaZulu-Natal to validate my organisation/
Companies current tax status.

Tax Payers Tax No.: _____

Tax Payers Pin No. issued by SARS: _____

Signature of authorized representative/signatory

Date

Position

Name of Respondent

Respondents are to insure that the information supplied in the above form is completed in whole and the that the information is true and correct, failing which, this will lead to the Employer not being able to validate the Respondents tax status online, which shall lead to the invalidation of the Respondents bid.



E2.5 AUTHORITY FOR SIGNATORY

Fill in the relevant portion applicable to the type of organization

A. COMPANIES

If a Respondent is a company, a certified copy of the resolution by the board of directors, personally signed by the chairperson of the board, authorizing the person who signs this Expression of Interest to do so, as well as to sign any contract resulting from this Expression of Interest and any other documents and correspondence in connection with this Expression of Interest and/or contract on behalf of the company must be submitted with this Expression of Interest, that is before the closing time and date of the Expression of Interest

AUTHORITY BY BOARD OF DIRECTORS

By resolution passed by the Board of Directors on _____
..... 20_____

Mr/Mrs _____ (whose signature appears below) has been duly authorized to sign all documents in connection with this Expression of Interest on behalf of

(Name of Company) _____

IN HIS/HER CAPACITY AS: _____

SIGNED ON BEHALF OF COMPANY: _____
(PRINT NAME)

SIGNATURE OF SIGNATORY: _____ **DATE:** _____

WITNESSES: _____

E2.5 AUTHORITY FOR SIGNATORY (CONTINUED)

B. SOLE PROPRIETOR (ONE - PERSON BUSINESS)

I, the undersigned _____

Hereby confirm that I am the sole owner of the business trading as

SIGNATURE

.....

DATE

E2.5 AUTHORITY FOR SIGNATORY (CONTINUED)

C. PARTNERSHIP

The following particulars in respect of every partner must be furnished and signed by every partner:

Full name of Partner	Residential Address	Signature
_____ ..	_____ ..	_____
_____ ..	_____ ..	_____
_____ ..	_____ ..	_____
_____ ..	_____ ..	_____

We, the partners in the business trading as _____

Hereby authorize _____

To sign this Expression of Interest as well as any contract resulting from the Expression of Interest and any other documents and correspondence in connection with this Expression of Interest and /or contract on behalf of

_____ ..	_____ ..	_____
Signature	Signature	Signature

_____ ..	_____ ..	_____
Date	Date	Date

E2.5 AUTHORITY FOR SIGNATORY (CONTINUED)

D. CLOSE CORPORATION

In the case of a close corporation submitting the Expression of Interest, a certified copy of the Founding Statement of such corporation shall be included with the Expression of Interest, together with the resolution by its members authorizing a member or other official of the corporation to sign the documents on their behalf.

By resolution of members at a meeting on _____ 20_____

At _____

Mr/Ms _____, whose signature appears below, has been authorized to sign all documents in connection with this Expression of Interest on behalf of (Name of Close Corporation)

SIGNED ON BEHALF OF CLOSE CORPORATION:

(PRINT NAME) _____

IN HIS/HER CAPACITY AS _____ **DATE:** _____

SIGNATURE OF SIGNATORY: _____

WITNESSES: 1. _____

2. _____

E2.5 AUTHORITY FOR SIGNATORY (CONTINUED)

E. CO-OPERATIVE

A certified copy of the Constitution of the co-operative must be included with the Expression of Interest, together with the resolution by its members authoring a member or other official of the co-operative to sign the Expression of Interest documents on their behalf.

By resolution of members at a meeting on _____ 20_____

At _____

Mr/Ms _____, whose signature appears below, has been authorized to sign all documents in connection with this Expression of Interest on behalf of (Name of Co-Operative)

SIGNATURE OF AUTHORIZED REPRESENTATIVE/SIGNATORY:

(PRINT NAME) _____

IN HIS/HER CAPACITY AS _____

DATE: _____

SIGNED ON BEHALF OF CO-OPERATIVE: _____

NAME IN BLOCK LETTERS: _____

WITNESSES: 1. _____

2. _____

E2.5 AUTHORITY FOR SIGNATORY (CONTINUED)

F. JOINT VENTURES

If a Respondent is a joint venture, a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of the enterprises, authorising the representatives who sign this Expression of Interest to do so, as well as to sign any contract resulting from this Expression of Interest and any other documents and correspondence in connection with the Expression of Interest and/or contract on behalf of the joint venture must be submitted with this Expression of Interest, before the closing time and date of the Expression of Interest.

Authority to sign on behalf of the Joint Venture:

By resolution/agreement passed/reached by the joint venture partners on _____
20____

Mr/Mrs _____, Mr/Mrs _____

Mr/Mrs _____ and Mr/Mrs _____

(Whose signatures appear below) have been duly authorised to sign all documents in connection with this Expression of Interest on behalf of:

(Name of Joint Venture) _____

In his/her capacity as: _____

Signed on behalf of (COMPANY NAME): _____
(PRINT NAME)

Signature _____ Date: _____

In his/her capacity as: _____

Signed on behalf of (COMPANY NAME): _____
(PRINT NAME)

Signature _____ Date: _____

In his/her capacity as: _____

Signed on behalf of (COMPANY NAME): _____
(PRINT NAME)

Signature _____ Date: _____

In his/her capacity as: _____

Signed on behalf of (COMPANY NAME): _____
(PRINT NAME)

Signature _____ Date: _____

E2.5 AUTHORITY FOR SIGNATORY (CONTINUED)

G. CONSORTIUM

If a Respondent is a consortium, a certified copy of the resolution/agreement passed/reached signed by the duly authorised representatives of the enterprises, authorising the representatives who sign this Expression of Interest to do so, as well as to sign any contract resulting from this Expression of Interest and any other documents and correspondence in connection with the Expression of Interest and/or contract on behalf of the consortium must be submitted with this Expression of Interest, before the closing time and date of the Expression of Interest.

Authority to sign on behalf of the consortium:

By resolution/agreement passed/reached by the consortium partners on _____
20_____

Mr/Mrs _____,

(Whose signature appear below) have been duly authorised to sign all documents in connection with this Expression of Interest on behalf of:

(Name of Consortium) _____

In his/her capacity as: _____

Signature _____ Date: _____

E2.6 MANDATORY COMPANY CERTIFICATES

Important note to Respondent: The relevant supporting documents to the organization Expression of Interest i.e. B-BBEE status level certificate

[BEE certificate documents to be inserted here]

PART E3:

SPECIAL REQUIREMENTS

E.3.1 SPECIAL REQUIREMENTS

E 3.1. Service Area:

- UKZN will provide an area space for preparation, expediting and clean-up of food service (once in, the allocated space/structure remains fixed during the entire duration).

E 3.2. Areas of particular attention that the catering vendor will be responsible for:

- Prep area including tenting and lighting
- All food service equipment
- Disposal of "gray/other matter"
- Hot water access (a tap in the vicinity will be available)
- All linen and related
- Power source (generator).

E 3.3. UKZN will provide at no charge:

- Parking passes for staff (maximum of 3 passes daily)
- Parking in the area for service van.

E 3.4. Staffing requirements: All staff must exhibit themselves in a polished and professional manner, which covers the following areas:

- Clean and pressed uniform
- Groomed appropriately
- No eating and/or drinking in public/guest areas.
- No smoking in the serving space during the entire shift.

E.3.2. EVALUATION CRITERIA

- Interested service providers must meet all the requirements as per above stated; and this must include a **valid Tax Clearance Certificate**, an Income Tax Compliance Certificate and **BBBEEE compliance**.
- The service provider must have a tent to set up for operating
- **All service providers will be required to present a detailed list of their food/other products, pricing structures, etc., in their respective proposal.**
- **All service providers must be have a minimum of 1 years' experience in their field and are able to provide a high quality professional service throughout the duration of the graduation ceremonies.**
- UKZN SHEQ Management reserves the right to inspect and determine adequacy and suitability of service structure and space; and reject any aspects which do not comply with the requirements and specifications as per UKZN Management discretion.
- UKZN SHEQ Management reserves the right to inspect and determine the quality of food delivered and reject any meals which do not comply with the requirements and specifications as per UKZN Management discretion.
- Catering vendors must have capacity: be adequately stocked and able to service patrons in attendance at all ceremonies. Service stations must be open and running an hour from start of first graduation session till start of third/last session, unless agreed upon with UKZN Management team.

- Vendors will be responsible for the upkeep, management and cleanliness of their own designated area.
- The University will provide general security services to manage the area in the times between service i.e. (night hours between 20h00 – 08h00), however the onus is on the catering vendor to ensure that their service space/vehicle is secured. Should the catering vendor wish to increase security, they must liaise with UKZN Risk Management team and reach agreement.
- The service provider must be able to execute their service timeously and with an efficient on-site staff; this should be in line with UKZN's R.E.A.C.H. values (Respect, Excellence, Accountability, Client Orientation and Honesty).
- The designated vendor must be in compliance with Safe Quality Food Standard (SQF) Certification and maintain all current licenses, permits and health certifications required by South African national legislation.

Please note that the University of Kwa-Zulu Natal is looking to appoint two (2) service providers.

Please include the following contact information in your response:

Vendor name: _____

Address: _____

Contract administrator: _____

Person responsible for company and proposal submission

Name: _____

Phone: _____

Email: _____

How many years in business as a food service management: _____