



Transnet SOC Limited
T/A Transnet Capital Projects

REQUEST FOR QUOTATION

TFR RME RFQ BOARD
TRANSNET FREIGHT RAIL RME
XXXXXXXXXX
XXXXXXXXXX

Registration Number: 1990/000900/06
Vat Number : 4720103177

Attention:
TFR RFQ BOARD
Telephone Number :
Fax Number :
Vendor Number :500000

Quotation Deadline Date : 25.07.2013
Quotation Deadline Time : 16H00

REQUEST for QUOTATION
Transnet Capital Projects
RFQ Number / Date
6000167279 / 17.07.2013
Contact Person / Telephone
Anne Mongie / 031 361 1759
Return to VAX Number/EMAIL
0318300001 / TCPtendersDurban@Transnet.net

Item	Material	Description	RFQ Qty	UoM	Required Del date	Confirm Del date	Unit Price Excl	Total Price Excl
00010		RILSAN COATING OF PIPE	50	m	05.08.2013			

RILSAN COATING OF PIPE INTERNALLY AND EXTERNALLY
DIA OF PIPE 12"

FOR MORE INFO U CAN CONTACT JANNIE ON 0832862069

THE CLOSING TIME FOR THE RECEIPT OF QUOTES :
THURSDAY 25 JUNE 2013 AT 16H00
QUOTES MUST BE SENT TO TCPTendersDurban@transnet.net
PLEASE ATTACH COPIES OF BBBEE AND TAX CLEARANCE CERTIFICATES.
ALL PROCUREMENT RELATED QUERIES TO BE DIRECTED TO :
ANNE MONGIE : 031-361 1759
E-MAIL : anne.mongie@transnet.net



Transnet SOC Limited
 T/A Transnet Capital Projects
 TFR RME RFQ BOARD
 TRANSNET FREIGHT RAIL RME
 xxxxxxxxxxx
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Delivery Address

This RFQ is subject to the following conditions:

1. Price/s : The price/s quoted in SA currency and is excluding of V.A.T
2. Delivery : The price/s quoted should include delivery cost to the delivery address stated on the RFQ
3. Returnables : A valid tax clearance certificate and BBBEE certificate from a SANAS accredited verification agency attached to quotation for all quotes above R30 000.
Please note that only the official Transnet RFQ will be accepted and all other correspondence to be attached to the original
4. Safety : To confirm to Transnet Capital Projects Health & Safety plan and specification; HAS-std-0001, copy available on request.
5. Confirmation: To confirm your participation in this tender process please sign and return this document as immediate effect prior to the quotation deadline.
6. Negotiations: The Employer may elect to negotiate the final terms of the contract/order with the preferred tenderer in accordance with Clauses F.2.17 and F.3.13 of the CIDB Standard Conditions of Tender. A copy of which is available upon request.

 Signature

 Date



**REQUEST FOR SERVICES
DEMAND REQUEST FOR SERVICE / GOODS REQUIRED
(RFS)**

Applicable to purchases between R20 000 and R 2 million as per iCLM and P2P guidelines (SCS to engage market).

A. DETAILS (TO BE COMPLETED BY LINE FUNCTION)

PLEASE ATTACH A DETAILED COPY OF THE RELEVANT SPECIFICATIONS

Indicate if:	Service	<input checked="" type="checkbox"/> Goods	Planned Maintenance	Capex	Other (specify):
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Name of SCS Contact: Anne Mongie

PeDB Number: RFQ Number

Commodity type: Building Material

RFQ Description: Rilsan pipe coating or Similar

Period of Contract:	2 Months	Delivery date:	1 August 2013
Is briefing session / site meeting required?	Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/>	Suggested briefing/site date and venue:	N/A
SAP REQUISITION NUMBER	10306833	Plans / Drawing no/Specs:	N/A
Retention fee to be held:	N/A	E7/1 Working near railway line or OHT – (Yes or No)	N/A
DELIVERY ADDRESS:	120 EEL RD BAYHEAD		

Material Master Item

Does a material master (item) exist for this product/material/service?

YES	<input type="checkbox"/>
NO	<input checked="" type="checkbox"/>

If negative, confirm that the correct documentation been forwarded to MM for its creation and that the MM has in fact been created. Attach confirmation

Environmental Impact Assessment:

- Obtain written confirmation and signoff from TFR Enterprise Risk Management Department (Elekanyani Phundulu) on this procurement event and whether an EIA is necessary as well as the evaluation criteria (where necessary).

Health and Safety

- Obtain written confirmation and signoff from TFR Corporate Safety Department (Natalie Skeepers or Siphwo Ngqeza) on this procurement event as well as the evaluation criteria (where necessary).

PROCUREMENT STRATEGY / MECHANISM (Tick whichever is applicable)	PPM	(To be completed by SCS)
Request For Quote (RFQ)	2.4	<input checked="" type="checkbox"/>
Confinement Emergency (PPM 2.5)	2.5	<input type="checkbox"/>
Approved List, Number & Last Updated (PPM 2.6)	2.6	<input type="checkbox"/>
Open Tender (2 Stage RFI/RFP) (PPM 2.10)	2.10	<input type="checkbox"/>
Consultant (PPM 2.14)	2.14	<input type="checkbox"/>
CIDB and Level (PPM 2.17)	2.17	<input type="checkbox"/>
EVALUATION PRINCIPLES (Tick)	TICK	(To be completed by Line & SCS)
1. Technical, Commercial & BBBEE (50/40/10 Principle)		
2. Commercial – Price & BBBEE (80/20 Principle)		<input checked="" type="checkbox"/>
3. CIDB & NEC		
4. SD & Further Recognition Principle with one of above.		


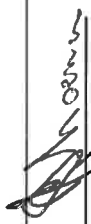
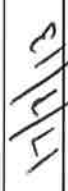




EVALUATION CRITERIA AND WEIGHTS (By Example) (Sub-criteria if applicable)				
CRITERIA	WEIGHT	Sub Weights	EFFECTIVE WEIGHT	
Category: Technical / Practical (Scoring Matrix) (By Example)	0%		(to be completed by SCS)	
•				
•				
•				
•				
•				
Category: Commercial (Scoring Matrix) (By Example)	80%		(to be completed by Line)	
• Commercial Price and Preference (90/10 – 80/20)				
•				
•				
•				
•				
Category: B-BBEE (Scoring Matrix) (By Example)	20%		(to be completed by SCS)	
• B-BBEE certificate and scorecard				
Category: SUPPLIER/ENTERPRISE DEVELOPMENT/(SCORING MATRIX) (By Example)	0%		(to be completed by SCS)	
•				
•				
•				
•				
•				
1.				
Category: Further Recognition (Where Applicable) (By Example)	0%		(to be completed by SCS)	
•				
•				
•				
•				
•				
1.				
TOTAL	100%		100%	

FINANCIAL INFORMATION (Line Function to complete)				
Estimated value of service/goods:	R65 000.00	Warrant no and copy attached: (Capex)	N/A	
Cost Centre Number:	4123380150	GL Account Number:	677000	
Has this service been budgeted for?	Yes No	If YES state amount:	R65 000.00	
If No has specific approval been sought		Financial Year:	2013/2014	
Insurance Required	Yes	Type of Insurance	N/A	



CONTACT DETAILS OF REQUESTOR (Line Function to complete)			
Name of person requesting Service:	JANNIE STIGLING	Manager / Project Manager:	PIET SCHOEMAN
Department :	TFR RME PIPELINES	Depot:	TFR RME PIPELINES
Contact number:	0832862069	Contact number:	0832582063
CFST Nomination/Composition (if it applies)	N/A		

COST CENTRE OWNER / APPROVER / LINE MANAGER (Line Function to complete)	
The proposed procurement per the Demand request is done in terms of my approved delegation of authority (DOA) as loaded on SAP and that all declaration of interests (DOI) have been duly declared (attach DOI where applicable e.g. Confinements).	
 Name, designation	 Signature
Pension Number:	1745
User ID Number:	
	 Date

RFS GOVERNANCE CHECKLIST (SCS Compliance & Governance to complete)	
The CONTRACT ADMINISTRATION DEPARTMENT confirms that:-	
1. The PEDB Number has been issued	
2. The Correct Tender Template has been issued and is attached	
 Name, designation	 Signature
Pension Number:	17107113. Date
The GOVERNANCE DEPARTMENT confirms that:-	
1. The DOA has been verified on SAP	
2. The Criteria have been pre-defined and checked	
3. The RFS (PeDB) has been registered on the tender register	
4. The Confinement DOA/DOI has checked and verified	
 Just for notification	 Signature
Pension Number:	Date