

Western Cape Supplier Evidence Bank Form

IMPORTANT - BEFORE completing this form, please ensure that you have registered your company on the Central Supplier Database (CSD) and have obtained your CSD registration number. To complete the registration process, please click on the following link: www.csd.gov.za If you require further assistance please contact Provincial Treasury via the following email address: csd.csd@westerncape.gov.za

Western Cape Supplier Evidence Bank (WCSEB) will utilise the National Treasury's CSD as the master database and serve as the central repository of governance documentation that will be used in the procurement process in order to give effect to the legislative requirements of the Western Cape Government (WCG).

CSD Supplier Number (MAA Number)										
Name of Business										
Trading Name										
D Number										
Cell Phone Number										
Email Address (Administrative										
Purposes) Email Address (Quotation)										

The **original**, duly completed, registration form with accompanying documentation must be submitted to:

Provincial Treasury, 4 Waterford Place, 2nd Floor, Century City, Cape Town Private Bag X9165, Cape Town, 8000









Accreditation Status (If Applicable)

EDUCATION, TRAINING AND DEVELOPMENT PROVIDERS

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CERTIFICATE OF CORRECTNESS OF INFORMAITON SUPPLIED IN THIS DOCUMENT

I, THE UNDERSIGNED, WARRANTS THAT I AM THE DULY AUTHORISED REPRESENTITIVE ON BEHALF OF THE SUPPLIER. I HEREBY CERTIFY THAT TO MY KNOWLEDGE, THE INFORMATION SUPPLIED IN TERMS OF THIS DOCUMENTION AND SUPPORTING DOCUMENTATION IS CORRECT AND VALID WITH THE DATE OF VERIFICATION AS THE EFFECTIVE DATE AND ACKNOWLEDGES THAT:

- 1. The supplier will be required to furnish documentary proof of the claims if requested to do so.
- 2. If the information provided is found to be incorrect the client (Western Cape Government) may, in addition to any remedies it may have:
 - i. Recover from the contractor all costs, losses or damages incurred or sustained by the client as a result of the award of the contract, and/or
 - ii. Cancel the contract and claim any damages which the client may suffer by having to make less favourable arrangements after such cancellations: and/or
 - iii. Impose a penalty on the contractor as provided for in the relevant organisation's regulations.

SIGNED ON THIS	DAY OF		201	_AT		
(SIGNATURE)					IN HIS /HER CAP	ACITY AS
(PRINT NAME)		-				
ON BEHALF OF THE (SUPP	PLIER'S NAME)					
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