



IN ASSOCIATION
WITH
CBRE
CB RICHARD ELLIS

SUPPLIER APPLICATION FORM

All supplier information will be treated strictly confidential.
Application forms to be in writing (email / fax / mail / hand delivered).
Broll Property Group and its subsidiary companies promote the empowerment of Black Enterprises. In procurement, preference will be given to Black Enterprises.

NB: Copies of the following documents are to be included in your application (where applicable)

EME's (Exempt Micro Enterprises)

- ID Documents of owners / partners
- Letter from accountant/auditor confirming turnover
- Copy of COID registration certificate (if applicable)
- Any other registration certificate pertaining to your relevant industry, e.g. ECB (Electrical Contractors Board)
- Public Insurance Certificate, Public Indemnity Cover details
- BEE status/rating confirmation
- Registration certificate pertaining to relevant industry e.g. ECB (Electrical Contractors Board)

Companies & CC's - aforementioned documents as well as :-

- Registration Documents
- Certificate from External Auditors confirming turnover.
- Company Organogram, showing holding and subsidiary company(s), indicate ownership and shareholding that this company holds in other companies
- Companies claiming Black Empowerment as per Broll Property Group's definitions are to submit: - Documents that provide proof of ownership and management by Black individuals.

All to submit :-

- An original cancelled cheque or stamped letter from the bank, verifying banking details. Please note that any changes to bank details in future will be subject to the same requirement.

Application by

:

Name, physical and postal, email address of business

Telephone / Fax numbers : _____

Contact Person : _____

Supplier represented by : _____

Name of duly authorized person completing the form

Nature of business e.g. Manufacturer, Service Provider, Product Supplier, etc.

Registered Company Name _____

Trading Name _____

Company Registration Number _____

VAT registered Yes/No _____

VAT Number _____

Date of application _____

SUPPLIER PROFILE

In order for Broll to build up a profile of its suppliers, we would like you to complete the following.

Section A: Financial

1. What is your Gross Turnover per annum?

1 – 2 million per annum

2 – 5 million per annum

5 – 10 million per annum

10 – 20 million per annum

Above 20 million per annum

2.

2.1 What Public Liability Insurance do you hold?

Insurance Company _____

Value R _____ Excess _____

2.2 Do you hold Professional Indemnity Cover? (y/n) _____

Limit of liability R _____

Insurance Company _____

(**Attach copy of current cover/certificate**)

Section B: Black Economic Empowerment (BEE)

1. Please provide us with your BEE rating certificate for BEE recognition.
(NB - You will only be rated if a certificate is provided)

Section C: Commercial

1. Name 3 commercial references / referees of previous projects and provide their name(s) and telephone number(s):

Section D: Safety

1. Are you registered with Compensation of Occupational Injuries and Disease Act (COID) (y/n)_____ COID Registration Number: _____

Section E: Quality (To be completed by Companies & CC's)

1. Does your business operate a Quality Management System covering the product / service applying for? (y/n) _____ Please elaborate:

2. Has your Quality Management System been assessed and certified by any National / internationally recognized accredited body? (y/n) _____ If yes, please provide copy of certificate.

Please indicate (x) the geographical areas where your business is willing and capable of supplying services to Broll Property Group:

Gauteng_____ Kwa-Zulu Natal_____ Western Cape_____

Other _____

CONDITIONS FOR APPROVAL

1. **Broll Property Group will, after evaluation and approval by designated staff of the application, notify suppliers on the acceptance of their application and inclusion into the Broll Property Group Approved Contractors List. At this point the supplier will be issued a vendor number.**
2. **Broll Property Group reserves the right to verify all claims made by the supplier in this application.**
3. **Changes in control of firm after registration in supplier database should be communicated to Broll within 30 days following the change.**
4. **The attached Health and Safety Contract between Employer and Contractor is completed in full, signed and dated.**

Applicants Declaration

I declare that :-

- **The information furnished in this form is true and correct in every respect**
- **All specialized work will be performed by qualified persons**

_____ **Applicants signature**

Name _____ **Date** _____

_____ **Proposers signature**

Name _____ **Date** _____

_____ **Approvers signature**

Name _____ **Date** _____