

**ENTERPRISE & SUPPLIER DEVELOPMENT – RISK MANAGEMENT DATABASE REGISTRATION FORM**

<b>COMPANY NAME</b>	
<b>COMPANY NUMBER</b>	
<b>TRADING NAME</b>	

The completed Enterprise & Supplier Development database registration form must be submitted by email to the following email address [esd.database1@umgeni.co.za](mailto:esd.database1@umgeni.co.za)

Umgeni Water uses its external whistle-blowing hotline service managed by an external service provider as means of fraud detection. This 24/7/365 days facility provides an anonymous and confidential communication channel for all stakeholders to report suspicious of fraud or otherwise unethical conduct.

- Toll Free number: 0800 864 463
- Email: [umgeniwater@whistleblowing.co.za](mailto:umgeniwater@whistleblowing.co.za)
- Toll Free Fax: 0800 212 698
- Postal: FREEPOST KZN665, MUSGRAVE, 4062
- SMS: 33490
- ONLINE: [www.whistleblowing.co.za](http://www.whistleblowing.co.za)

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**IMPORTANT NOTES:**

1. Form to be completed in full (Incomplete documents will not be considered)
2. Please print, complete and attach the supporting documents.
3. The document must be completed in full. Non-submission of valid pre-requisite documents and incomplete forms will not be considered.
4. Registered mail will not be accepted.
5. Only successful suppliers will be notified in writing of the status of their application.

<b>CHECKLIST</b>	<b>SUBMITTED</b>	<b>NOT SUBMITTED</b>
Company Registration Certificate (Strictly 51% Black ownership or more)		
Share Holding Certificate		
VAT registration Certificate (If applicable)		
Tax Clearance Certificate		
Proof of Banking Details (Stamped bank letter)		
Original/ certified copy of a B-BBEE rating certificate OR an original Sworn affidavit if you are an EME/QSE		
List of shareholders & certified ID copies		
Proof of business address (within Umgeni Water's area of supply)		
Independently reviewed Annual Financial Statements (AFS) for the previous financial years		
Central Supplier Database report		
Copy of three months' Payroll		
Proof of Disability (where applicable)		
Military Force Number (where applicable)		

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<b>1. COMPULSORY EXPERIENCE</b>	<b>SUBMITTED</b>	<b>NOT SUBMITTED</b>
Individuals must be an Associate member of Institute of Risk Management South Africa (IRMSA) provide proof.		
Relevant qualification of NQF Level 6 or higher, provide proof.		
3 years Risk Management experience and a Risk Management qualification (minimum NQF Level 6) provide proof		

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**2. COMPANY DETAILS**

Company Name of Business as registered with the Registrar of Companies	
Trading as	
Company Registration Number	
VAT Registration number (if applicable)	
National Treasury Central Supplier Database (CSD) Number	
Postal address	
Physical address	
District Municipality	
Local Municipality	
Ward No.	
Contact Person:	
Telephone No:	
Cellular No:	
Fax Number	
E-mail address	
Core Business	

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**3. TYPES OF BUSINESS (please tick one)**

TYPE OF BUSINESS	“X”	DOCUMENTS REQUIRED
1. Sole Proprietor (One-Person Business)		ID Copy
2. Public Company LTD		Copy of certificate of Incorporation (CM 1)
3. Private Company (Pty) Ltd		ID Copies & Company Registration Certificate (CM 1)
4. Close Co-operation		ID Copies & Company Registration Certificate (CK 1 and CK 2)
5. Incorporated		Copy of certificate of Incorporation (CM 1 & CM 19)
6. Partnership		Partnership Agreement, ID Copies and Tax Certificates of members
7. Co-operatives		Co-operative Registration Certificate, ID Copies & Constitution
8. Joint Venture		JV Agreement, Member’s ID Copies & Tax Certificates

**4. OWNERSHIP GROUPS**

Umgeni Water is committed to developing and providing people from previously disadvantaged communities with business opportunities. Please indicate the number of shares held by people from previously disadvantaged group.

BEE EQUITY OWNERSHIP	PERCENTAGE OF TOTAL SHARES OWNED BY EACH OF THE FOLLOWING GROUPS					
	Group (this must add-up to 100% of ownership)	%	Group	%	Group	%
	African Ownership of the whole company		African Female		African Disabled	
	Coloured Ownership of the whole company		Coloured Female		Coloured Disabled	
	Indian Ownership of the whole company		Indian Female		Indian Disabled	
	White Ownership of the whole company		White Female		White Disabled	
	Foreign Ownership of the whole company		Foreign Female		Foreign Disabled	

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**5. OWNERSHIP INFORMATION** (*List ALL persons/entities who are owners in the business*)

Full name	Designation	Exec / Non Exec	Race	ID number

**6. BOARD MEMBER’S (if any)**

Please indicate percentage BEE control at board level if any. Additional documentation **must** be attached.

Full name	Designation	Exec / Non Exec	Race	ID number

**7. STAFF ESTABLISHMENT**

Full name	Designation	Exec / Non Exec	Race	ID number

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**8. E-COMMERCE**

7.1 Umgeni Water conducts its business by means of email.	
7.2 Would your company be able to receive quotations and accept orders electronically	
7.3 If yes, what is the email address for receiving the quotations and orders	

**9. VESTED INTEREST**

Any financial interest in your company by an Umgeni Water employee and/or its family must be declared in detail, failing which will result in the immediate termination of the business relationship	
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**10. DECLARATION**

I, the undersigned (full names) \_\_\_\_\_ certify that the information furnished to Umgeni Water is true and correct. I accept that Umgeni Water may reject this database application form or act against me should this declaration prove to be false.

SIGNED BY \_\_\_\_\_ SIGNED AT \_\_\_\_\_ DATE \_\_\_\_\_