



# public works

Department:  
Public Works  
**REPUBLIC OF SOUTH AFRICA**

**DEPARTMENT OF PUBLIC WORKS**  
Private Bag XX3  
Braamfontein  
2001



<b>REFERENCE</b>	:	<b>JHB20/08</b>
Enquiries	:	MARK STEPHENS
Tel	:	+27 (0) 11 219 7860
Fax	:	+27 (0) 11 516 7743
Date	:	2021-02-15
<b>DELIVERY ADDRESS</b>	:	<b>DEPARTMENT OF PUBLIC WORKS, 78DE KORTE &amp; DE BEER STREE. MINERALIA BUILDING. BRAAMFONTEIN. JOHANNESBURG (Ground floor) GAUTENG</b>

.....

**THE MANAGER/DIRECTOR:** MR SHANE NIENABER  
**COMPANY** : LINVAR (PTY) LTD  
**CSD REG NO** :  
**COMPANY REG NO** : 1968/002820/07  
**TAX REF NO** : 9360030846  
**VAT REG NO** : 4650104260  
**TELL NO** : 031 700 1434  
**CELL NO** : N/A  
**FAX NO** : 031 700 1793  
**EMAIL** : salesdbn@linvar.co.za  
**ATTENTION** : Shane Nienaber

**REFERENCE** : JHB20/08 QUOTATION CONTRACT: SUPPLY AND DELIVERY OF 184 DGM30-R FIRE HYDRANTS

**THE DEPARTMENT OF PUBLIC WORKS** is pleased to inform your company that your submitted quotation on the above mentioned Ref number has been successful.

The contract entered into is between **DEPARTMENT of PUBLIC WORKS REPUBLIC OF SOUTH AFRICA** and **LINVAR (PTY) LTD** for the supply and delivery of 210 **DGM30-R FIRE HYDRANTS** for an amount of **R 481 792.50** inclusive of VAT.

Your urgent attention is drawn on the following:

THE COMMENCEMENT OF THE CONTRACT SHALL BE THE DATE STATED ON THE OFFICIAL ORDER FORM.

COMMENCEMENT DATE: **15 February 2021.**

DELIVERY DATE: **17 February 2021.**

THE INVOICE SHOULD BE SUBMITTED AND PAID TO SUPPLIER NAME: **LINVAR (PTY) LTD.**

- BANK NAME :
- ACCOUNT NAME :
- ACCOUNT NUMBER :
- ACCOUNT TYPE :
- BRANCH CODE :
- BRANCH NAME :

Hope you find the above in order.

DEPARTMENT  
DEPARTMENT of PUBLIC WORKS





## TERMS AND CONDITIONS

As per the Public Finance Management Act (PFMA), 1999 (Act No. 1 of 1999) as amended by Act No. 29 of 1999, DEPARTMENT of PUBLIC WORKS is by the Act not allowed to make payment before Goods or Services is rendered.

Due to the urgency of suppliers' payments, DEPARTMENT of PUBLIC WORKS uses Delivery Note Payment Method System so that all suppliers receive their payments within 2-5 working days after delivery.

Whereby a supplier delivers the goods and supplier is issued with a delivery note which is sent to the financial department in order for processing of funds. The DEPARTMENT of PUBLIC WORKS Delivery Note therefore is full proof that DEPARTMENT of PUBLIC WORKS has received Goods or Services rendered.

When a Supplier renders the service awarded within a mandated time frame repeatedly then that supplier is deemed trustworthy and is listed on DPW's Grade A Register of Accredited Potential Providers for more tender awards in future.

At present DEPARTMENT of PUBLIC WORKS affects all payments by means of the Electronic Funds Transfer (EFT). We do not issue any cheques any more.

Please mail your signed delivery note to Lernfort Mntanywa in order to ensure that your payment is made in time.

For more information with regards to answers that might not be included in this payment process contact us on +27 (11) 219 7860.

Yours Sincerely

.....  
LERNFORT MNTANYWA  
FINANCE DEPARTMENT  
DEPARTMENT of PUBLIC WORKS

**DIRECTORATE OF FINANCE**



Private Bag X479  
Pretoria  
0048  
Date:2021-02-15



**DIRECTORATE OF PUBLIC WORKS**



**AUTHORISATION FOR ELECTRONIC TRANSFER OF FUNDS (EFT) TO SUPPLIER'S BANK ACCOUNT**

**Banking details**

Bank: .....

Account No: .....

Account Type: .....

Branch: .....

Branch Code: .....

I, the undersigned hereby authorise the DEPARTMENT of PUBLIC WORKS finance department to credit my/the company account via Electronic Funds Transfer as afore mentioned with the amount payable/due to specified beneficiary for goods and services rendered.

\_\_\_\_\_

Full Name \_\_\_\_\_ Capacity \_\_\_\_\_

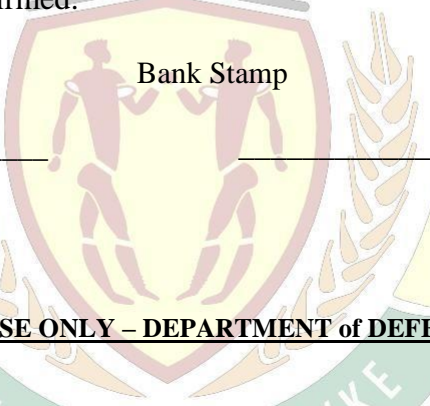
\_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**FOR USE OF BANK (In case where a cancelled cheque or proof of banking details is not attached)**

Above Information checked and confirmed:

Signature \_\_\_\_\_



Full Name \_\_\_\_\_

Capacity \_\_\_\_\_

**FOR OFFICE USE ONLY - DEPARTMENT of DEFENCE**

Information confirmed and submitted to computer on: \_\_\_\_\_ day of \_\_\_\_\_ year \_\_\_\_\_

\_\_\_\_\_

Full Name

\_\_\_\_\_

Capacity

\_\_\_\_\_

Date

\_\_\_\_\_

Signature