



# KZN Public Works

Private Bag x

**Department:**  
**Public Works**  
**PROVINCE OF KWAZULU-NATAL**

**Enquiries:**  
**Tel:** ( )  
**Fax:** ( )  
**Email:**  
**Ref:**  
**Date :**

(As Per Registered Mail and Facsimile)

Name and Postal Address of Contractor

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Sirs

**WIMS NO \_\_\_\_\_ : ZNT \_\_\_\_\_ W: CITY/TOWN/PLACE: NAME OF INSTITUTION:**  
**DESCRIPTION OF SERVICE: OFFER OF CONTRACT**

1. Your offer in the sum of R\_\_\_\_\_ to undertake the above work has reference.
2. For administrative reasons, this Department can only consider accepting your offer upon receipt of the following documentation within twenty one (21) calendar days of the date of this letter.
  - Proof of having Works, liability and support insurances cover.
  - The priced Bills of Quantities *(delete this sentence if it is a Lump Sum Contract)*

All of the above must be given to the Principal Agent, \_\_\_\_\_ *(insert name and physical address)* to hand to the Department.

3. In addition to the above, the priced Bil of Quantities must be given to *(insert name of Engineer and physical address)* *(Delete this sentence if it is a Lump Sum Contract)*
4. Attached is a form for your completion to extend the Tender Validity Period to \_\_\_\_\_ and you are requested to return it by facsimile transmission to this Office without delay. *(delete this sentence and if its Annexure is not applicable)*
5. If all of the above documentation is found to be acceptable and provided within the stipulated period, a copy of the signed original Form of Offer and Acceptance including the Schedule of Deviations (if any) will be furnished to you at site handover and that day will be regarded as the "commencement date" of the contract.

Yours faithfully

**HEAD: PUBLIC WORKS**

**uMnyango WezemiSebenzi / Departement van Werke**

1. Head  
Department of \_\_\_\_\_(insert details of client department)  
\_\_\_\_\_  
\_\_\_\_\_  
(Fax \_\_\_\_\_)
2. \_\_\_\_\_(Principal Agent)  
\_\_\_\_\_  
(Fax \_\_\_\_\_)

Sirs

Kindly take steps to arrange to hand over the site to the Contractor once all of the above information has been received. The Site Handover Certificate, form DOW070 must be completed and distributed as indicated thereon.

Please also note that you have ten (10) calendar days from receipt of all of above information to hand over the site to the Contractor.

Enclosed for your completion and return are the following forms

- O.H.S.E. – WIMS WG24PU-01
- E.P.W.P. – WIMS WG26PU-01

*(The author is to select one of the following paragraphs with regard to dealing with the guarantee as per the actual Tender Document as submitted by the Contractor).*

In terms of the Tender, the Contractor is to provide a guarantee as per the attached Form DOW020. The Contractor must be given 21 calendar days from the Commencement Date to return the guarantee to you for onward transmission to this Office.

After Practical Completion kindly complete and return the following forms:-

- Contract Completion Report – DOW046
- Contractors Analysis Report – DOW047

These forms are contained in the SOPS for Contract Administration which is available on the Public Works Website.

Yours faithfully

\_\_\_\_\_  
HEAD: PUBLIC WORKS

3. \_\_\_\_\_(Engineer)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (Fax\_\_\_\_\_)

Sirs

*Kindly inform this Office and the Principal Agent immediately the priced Bills of Quantities have been received by you so that arrangements can be made for site handover. The priced Bills of Quantities received from the Contractor is to be bound and returned to this Office. (Please delete if a Lump Sum Contract)* Please liase with the Principal Agent to determine the number of copies to make of the Bills of Quantities for site administration.

You are also reminded that quarterly Financial Reports are required – as set out in the Conditions of Commission.

Yours faithfully

\_\_\_\_\_  
 HEAD: PUBLIC WORKS

4. \_\_\_\_\_(other Consultants)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 (Fax\_\_\_\_\_)

5. District Head/Manager  
 \_\_\_\_\_(insert detail)

6. Project Manager: \_\_\_\_\_

7. Projects Programme Manager: \_\_\_\_\_

8. Chief Professional: \_\_\_\_\_

**NB:** Endorse copies to the Official(s) of the Acquisition Sub-directorate who is/are responsible for:

- Updating WIMS, and
- Gather statistical data for the Provincial Treasury.

Extension of Validity Period Form

\_\_\_\_\_Region

Private Bag X\_\_\_\_\_

\_\_\_\_\_

(insert)

Fax: \_\_\_\_\_(insert)

**Attention:** \_\_\_\_\_(insert)

**WIMS NO \_\_\_\_\_ : ZNT \_\_\_\_\_ W: CITY/TOWN/PLACE: NAME OF INSTITUTION:  
DESCRIPTION OF SERVICE: EXTENSION TO TENDER VALIDITY PERIOD.**

This serves to confirm that the Tender identified under here is:

\* (a) willing to extend the validity period of my/our tender for the above service from  
\_\_\_\_\_ to \_\_\_\_\_(insert)

or

\* (b) not willing to extend the validity period of my/our tender for the above service.

\_\_\_\_\_  
**SIGNATURE OF  
AUTHORISED REPRESENTATIVE**

\_\_\_\_\_  
**DATE**

**Name of Tenderer:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*\*Delete that which is not applicable*