****

 **FINANCE DEPARTMENTC- SCM**

**INKOSI LANGALIBALELE LOCAL MUNICIPALITY – UMKHANDLU WENDAWO**

**PO BOX 15, Estcourt, 3310] Physical Address: Civic Building, 1 Victoria Street, Estcourt**

**Tel. No.: 036 342 7800**

Dear Sir / Madam

# REQUEST FOR WRITTEN OR VERBAL QUOTATION

# REQ 0024

Kindly furnish me with a written quotation for the supply of the goods/services as detailed in the enclosed schedule.

The quotation must be submitted on the letterhead of your business and can either be faxed to or emailed to andile@ilm.gov.za or quotations@ilm.gov.za and can be hand delivered to Civic Building, Victoria street 3310 not later than 22 June 2017 @ 13H00.

The following conditions will apply:

* Price(s) quoted must be valid for at least thirty (30) days from date of your offer.
* Price(s) quoted must be firm and must be inclusive of VAT.
* A firm delivery period must be indicated.

Failure to comply with these conditions may invalidate your offer.

Yours faithfully

Andile

(SCM Clerk)

**SCHEDULE**

|  |  |
| --- | --- |
| **QUANTITY** | **DESCRIPTION** |
|   | Kindly appoint service provider to do Data Cleansing on suppliers database  |
|  | For former Imbabazane and Umtshezi Municipalities  |
|  |   |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

+

DELIVERY ADDRESS:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Civic building, Victoria Street

Estcourt

3310