

BID OPENING REGISTER  
 MOHOKARE  
 LOCAL MUNICIPALITY  
 P.O BOX 20, ZASTRON 9950

BID No. SCM/MOH/24/2023

Bid Description: Re-advert: Appointment of an occupational practitioner to conduct medical surveillance for a period of 1 year.

Date: 31 January 2024

Time: 14:00

Consultant: .....

BIDDER

|  | AMOUNT              |
|--|---------------------|
| 1. <u>Therapy on the go</u>                      | R <u>373 175,00</u> |
| 2. <u>Avia occupational health care services</u> | R <u>249 652,35</u> |
| 3. <u>Potch health care pty ltd.</u>             | R <u>160 000,00</u> |
| 4. <u>Milly occupational health</u>              | R <u>—</u>          |
| 5. <u>Matubaz 321 pty ltd</u>                    | R <u>3 859,63</u>   |
| 6. ....  | R .....             |
| 7. ....  | R .....             |
| 8. ....  | R .....             |
| 9. ....  | R .....             |
| 10. ....   | R .....             |
| 11. ....   | R .....             |
| 12. ....   | R .....             |
| 13. ....   | R .....             |
| 14. ....   | R .....             |
| 15. ....   | R .....             |



I hereby certify that I have received all documents as stated above and will return all documents together with the evaluation report.

Name: .....  
Print Name

Representing: .....

Signed: .....

Date: .....

| MOHOKARE LOCAL MUNICIPALITY  |   |
|--|---|
| Bid Received:  |   |
| Date: <u>31/01/2024</u>  | Time: <u>14:00</u>  |
| <u>Pule</u><br><small>Print Name</small>   | <u>Thandino</u><br><small>Print Name</small>  |
| <br><small>Signature</small> | <br><small>Signature</small> |