



BERGRIVIER MUNICIPALITY

SUPPLY CHAIN MANAGEMENT

Enquiries: Ms. R. Hendricks Ref: 8/2/45-2025 Tel: (022) 022 913 6036 E-mail: hendricksr@bergmun.org.za

As per e-mail:

Dear Sir /Madam

NOTICE TO BIDDERS

ADDENDUM: 1

FQ NO 8/2/45 – 2025 (MN220 – 2025) SUPPLY, DELIVERY OF FULL/ COMPLETE SELF-CONTAINED BREATHING APPARATUS (SCBA) FOR BERGRIVIER MUNICIPALITY FIRE AND DISASTER MANAGEMENT SERVICES IN PIKETBERG FROM DATE OF APPOINTMENT TILL 30 JUNE 2026

Pursuant to the compulsory clarification meeting held on Tuesday, at 10H00 on 14 October 2025, bidders must kindly note that the following CHANGES were made:

- **Addition on Page 14 under D. GENERAL SPECIFICATIONS**
10. Self- Contained Breathing Apparatus should comply with NFPA 1981.
- Integrated Personnel Alert Safety Systems (PASS) should comply with NFPA 1982.
- **Removal from Page 11 under GENERAL REQUIREMENTS, the following sentence:**
“Steel cylinders require special consideration regarding moisture content when filled and the hydrostatic inspection must comply with the requirements referred to in ISO 11114-1”
- Kindly note that the total price is only for comparison purposes during the evaluation of bids, and the municipal reserves the right to procure any number of services or items during the duration of this contract, based on the unit price submitted as this is a rate based formal quotation.
- **THE CLOSING DATE has been extended to the 31 October 2025**

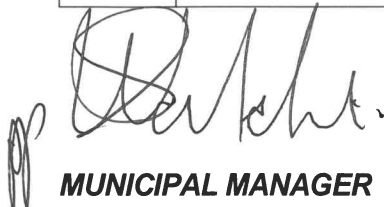
KINDLY NOTE THAT THIS NEW PRICING SCHEDULE BELOW REPLACES THE PRICING IN THE TENDER DOCUMENT :

Item NR	ITEMS REQUIRED	UNIT (RATES)	PRICE
1	Cylinder with protective covers	R	
2	<u>UNIT PLATE ASSEMBLY</u> • Backpacks/ Back plate assembly with harnesses • Demand valve assembly • Pressure reducers and safety valve • High pressure Hoses		
3	Full- face masks (with protective bag)		



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4	Additional full- face mask with protective bag, connecting hose and demand valve	
	Vat (15 %)	
	TOTAL	


MUNICIPAL MANAGER

DATE: 17/10/2025

Note: Confirmation to the addendum

CONFIRMATION

I (Name and Surname of designated person) hereby declare on behalf of
(Company's name),

That I take note of the above changes in the bidding documentation and that my offer will incorporate the changes.

Address: Tel no.:
..... Fax no.:
.....

Signature of bidder: Date:

This document must be completed by the bidder (above) and submitted with his offer.