

 **ANNEXURE A**

**To whom it may concern**

Good Governance Principles (whether legislated or not) require that those entrusted with leading organisations or are responsible for key separate identified unit/processes of an organisation (directors/prescribed officers) must avoid conflict of interest and not use such positions or any information obtained while acting in such capacities, to gain advantage for themselves other than the organisation [*Companies Act No. 71 of 2008, section 76(2)(a)* as well as Public Finance Management Act No.1 of 1999, section 50]

A conflict of interest exists where a director/prescribed officer or a person (including a juristic person) related to that director/prescribed officer has a personal financial interest in a matter in which the organisation has a financial interest [*Companies Act, section 1-definition of personal financial interest, and section 75- director’s personal financial interest, PFMA, section 50*]

An individual is related to another individual if they — (i) are married, or live together in a relationship similar to a marriage; or (ii) are separated by no more than two degrees of natural or adopted consanguinity or affinity; (father or mother, son or daughter (& spouse), grandparents, grandchildren, brothers or sisters, mother in law or father in law, brother in law or sister in law) [*Companies Act, section 2(1)(a)*]

An individual is related to a juristic person if the individual directly or indirectly controls the juristic person, as determined in accordance with subsection (2) [*Companies Act, section 2(1)(b)*]; and

A juristic person is related to another juristic person if — (i) either of them directly or indirectly controls the other, or the business of the other, as determined in accordance with subsection (2); (ii) either is a subsidiary of the other; or (iii) a person directly or indirectly controls each of them, or the business of each of them, as determined in accordance with subsection (2) [*Companies Act, section 2(1)(c)*]

A person considered for appointment as a Director/Councilllor or CEO, CFO or COO, or to a position deemed to be that of a prescribed officer will be disqualified from an appointment if there is an actual or potential conflict of interest determined based on the abovementioned criteria in paragraphs 2, 3, 4 and 5.

In order to assist the Department to identify a potential conflict of interest, you are required to complete **Annexure B**.

If you know that you or a person (including a juristic person) related to you in terms of paragraphs 3, 4, and 5 above, have/has a personal financial interest in conflict with the entities listed below, kindly **disclose full particulars in your cover letter, i**ncluding the Rand value, term of the contract and percentage revenue to the total revenue of the business.

|  |  |
| --- | --- |
| **Entity (state the name of the entity you are conducting business with.)**  | **Yes/No** |
|  USAASA |  |
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**ANNEXURE B**

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| **DECLARATION OF INTEREST FORM –** **CANDIDATE CONSIDERED FOR APPOINTMENT AS BOARD/COUNCIL MEMBER**  |

|  |  |
| --- | --- |
| **SURNAME** | **FIRST NAME** |
| **DATE OF BIRTH** | **ID NO** |
| **HOME ADDRESS** |
| **POSITION** |
| **POSTAL ADDRESS** |

|  |  |
| --- | --- |
| **PHONE NUMBER** | **FAX NUMBER** |
| **EMAIL ADDRESS** |

|  |  |
| --- | --- |
| **SPOUSE/LIFE PARTNER DETAILS (if any)** |  |
| **SURNAME** | **FIRST NAME** |
| **DATE OF BIRTH** | **ID NO** |

**COMPLETION OF FORM**

Please ensure that ***EVERY QUESTION IS ANSWERED*** by a tick on the "yes” or “no” box, even if the details remain unchanged from previous submissions.

Please attach ***ADDITIONAL DETAILS*** if there is insufficient space to fill in an answer, with the appropriate referencing.

**DECLARATION OF INTEREST FORM**

1. Are you a member of a Close Corporation? **Yes/No**

If yes, please provide details by completing the table below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of the CC** | **Type of Business Activity** | **Registration No.** | **Details of Ownership (e.g., sole member or 50% share)** | **Does the CC do business with the SSCI?** |
|  |  |  |  |  |
|  |  |  |  |  |
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2. Are you a director, member, shareholder, or committee member of a company or other corporate entity recognised by law? **Yes/No**

(This includes executive /non-executive memberships of companies, parastatals, cooperatives, SSCI[[1]](#footnote-1), NGOs, etc.)

If yes, please provide details by completing the table below.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of the Corporate Entity** | **Type of Business Activity** | **Registration No.** | **Details of Ownership** | **Does the Institution do business with the SSCI?** |
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3. Are you a trustee of any trust or do you have an interest in any trust? **Yes / No**

If yes, please provide details by completing the table below:

|  |  |  |
| --- | --- | --- |
| **Name of Trust** | **Nature of Trust** | **Does the Trust do business with SSCI?** |
|  |  |  |
|  |  |  |
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4. Do you have any financial interest in any partnerships? **Yes / No**

If yes, please provide details by completing the table below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Partnership** | **Type of business activity** | **Registration No.** | **Details of Ownership** | **Does the Partnership do business with the SSCI?** |
|  |  |  |  |  |
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5. Do you receive any remunerated benefits outside of the SSCI? **Yes / No**

(This will include consultancies and retainerships:

Consultancy refers to the provision of professional or expert service/advice to an individual or organisation and receiving remuneration for such

Retainership refers to a form of commitment where a person is available for advice and/or providing services to an organisation on a retainer basis.

If yes, please provide details by completing the table below:

|  |  |  |
| --- | --- | --- |
| **Name of Business/ Institution** | **Type / Nature of Commitment** | **Details of approval from the relevant authority** |
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6. Do you, your spouse, partner, business, business associate, or close family member compete in the same nature of business as an entity. **Yes / No**

 If yes, please provide details by completing the table below:

|  |  |
| --- | --- |
| **Name of Business/ Institution** | **Type / Nature of Commitment** |
|  |  |
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7. Do you anticipate that you, your spouse, partner, business, business associate, or close family member will be competing in the nature of business as an entity or its subsidiaries in the next 12 months? **Yes / No**

 If yes, please provide details by completing the table below:

|  |  |
| --- | --- |
| **Name of Business/ Institution** | **Type / Nature of Commitment** |
|  |  |
|  |  |
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8. Have you, your spouse, partner, business, business associate, or a close family member been a beneficiary of any sponsorship from the entity in the last 24 months? **Yes / No**

If yes, please provide below by completing the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Name Source of Subsidy(s) or Sponsorship(s)** | **Description of Subsidy(s) or Sponsorship(s)** | **Is the Assistance from a Non-Party source?** | **Value of Subsidy or Sponsorship** |
| **Yes** | **No** |
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10. Have you, your spouse, partner, business, business associate, or close family member submitted any Bid to the entity in the last 24 months? **Yes / No**

If yes, please provide details by completing the table below:

|  |  |  |
| --- | --- | --- |
| **Name of Business/ Institution** | **Type / Nature of Commitment** | **Details of approval from the relevant authority** |
|  |  |  |
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11. Have you, your spouse, partner, business, business associate, or a close family member been awarded any contract or performed any work on behalf of the entity in the last 24 months **Yes / No**

If yes, please provide details by completing the table below:

|  |  |  |
| --- | --- | --- |
| **Name of Business/ Institution** | **Type / Nature of Commitment** | **Duration of the contract** |
|  |  |  |
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12. Did you travel abroad on a sponsored trip? **Yes / No**

 (Foreign travel for which SSCI did not pay)

If yes, please provide details by completing the table below:

|  |  |  |  |
| --- | --- | --- | --- |
| **Destination** | **Reason** | **Sponsor** | **Authority Obtained** |
| **Yes** | **No** |
|  |  |  |  |  |
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13. Do you, your spouse, partner, business, business associate, or close family member intend to contract (*register as a supplier*) with the entity in the next 12 months?

If yes, please provide details by completing the table below:

|  |  |
| --- | --- |
| **Name of Business/ Institution** | **Type / Nature of Commitment** |
|  |  |
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**DECLARATION**

I, ………………………………….............….................................... (Insert Name and Surname)

Declare that the information provided in this declaration is, to the best of my knowledge, a true and correct reflection of my interests as of the date of my signature.

I know and understand the contents of the declaration. I have no objections to taking the prescribed Oath. I consider the Oath binding on my conscience.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name and Surname of Deponent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Declarer

Date:………………………..

The above-mentioned statement was made by the deponent and the deponent knows and understands the contents of the statement. The statement was sworn by the deponent and his/her signature placed thereon in my presence on this day ………………………..of ……………………(Month) at …………………………. (Place)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Commissioner of Oaths

**For office use only:**

# GENERAL INFORMATION

Every Director and employee must declare immediately any interests wherein their spouses, partners, close family member, business, or business associates have submitted bids to deliver goods and services to the SSCI.

# DESCRIPTION OF INTEREST TO BE DISCLOSED

* Shares and securities in any company;
* Membership of a Close Corporation;
* Interest in any trust;
* Directorships;
* Partnerships;
* Remunerated commitment outside SOC including consultancies and retainerships;
* Other financial interest in any business understanding;
* Other work and Remuneration; and/or
* Sponsorship by any organization.

# DETAIL OF REGISTRABLE INTEREST TO BE DISCLOSED

The following details of registrable interest must be disclosed:

3.1 Shares and/or other financial interests in companies and other corporate entities –

* number, nature, and nominal value of shares of any type in any public and private company;
* name of that company; and
* the nature and value of any other financial or any other corporate entity.

3.2 Membership of a close corporation -

* name of that Close Corporation;
* nature and value of interest; and
* nature of business of the Close Corporation.

3.3 Interest in any trust -

* name of the trust; and
* nature and value of financial interest.

3.4 Directorships and Partnerships -

* the name, type of business activity of the corporate entity or partnership; and
* the amount of any remuneration received for such directorship or partnership.

3.5 Sponsorships -

* the source and description of direct financial sponsorship or assistance from non-party sources; and
* the value of the sponsorship and assistance.

3.6 Benefit -

* the nature and source of any other benefit of material nature; and
* the value of that benefit

3.7 Foreign Travel -

* a brief description of the journey abroad; and
* particulars of the sponsor.
1. SSCI- State and State Controlled Institutions includes national and provincial public entities and government business enterprises, SOCs and subsidiary SOCs of public entities, and a public entity or enterprise of a SOC owned by a municipality [↑](#footnote-ref-1)