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PanSALB
PAN SOUTH AFRICAN LANGUAGE BOARD

Directorate: Office of the Chief Financial Officer

Enquiries: Mr Zola Nkosi

Email: zola@pansalb.org

Tel No: (012) 341 9638 Fax No: (012) 341 5938

Dear Service Provider

EXTENSION OF VALIDITY PERIOD FOR BID NUMBER: RFP0001-PAN2025-26
APPOINTMENT OF A SUITABLY QUALIFIED AND EXPERIENCED SERVICE
PROVIDER TO PROVIDE INTERNAL AUDIT SERVICE FOR A PERIOD OF 36
MONTHS.

Your bid in respect of the above tender refers.

Please be advised that it has become necessary for Pan South African Language Board (PanSALB) to extend the period of validity for further 60 days in order to permit PanSALB to finalize the evaluation, adjudication and appointment of service provider.

Bid Validity is extended on the same terms and conditions, including pricing, as in the original bid. Bidder is required to indicate below the willingness to extend or not to extend the validity period of its bid related to the above tender as was closed on the 22 August 2025 at the terms and conditions applicable to the original invitation to tender and bid. The validity extension will expire on the 31 May 2026.

Please email your responses to zola@pansalb.org

Yours Sincerely

Mr Tebogo Matabane
Chief Financial Officer
Pan South African Language Board

EXTENSION OF VALIDITY PERIOD FOR BID NUMBER: RFP0001-PAN2025-26
APPOINTMENT OF A SUITABLY QUALIFIED AND EXPERIENCED SERVICE
PROVIDER TO PROVIDE INTERNAL AUDIT SERVICE FOR A PERIOD OF 36
MONTHS.

Previous Validity Expiry date	21 December 2025
Current Validity Expiry Date	22 March 2026
Extended Validity Date requested	31 May 2026

OPTIONS (PLEASE CIRCLE THE PREFERRED OPTION)

1. I/We hereby accept the extension of the tender validity period at the terms and conditions applicable to the original invitation to tender.
2. I/We hereby do not accept the extension of the tender validity period at the terms and conditions applicable to the original invitation to tender.

Name of Company: _____

Name and Surname of Signatory: _____

Capacity of signatory: _____

Signature: _____

Date: _____