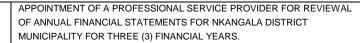


CONTRACT DATA

DATA PROVIDED BY THE EMPLOYER

The Name of the Employer is Nkangala District Municipality The address of the Employer is: 2A Walter Sisulu Street MIDDELBURG 1050 P O Box 437 Middelburg 1050 Telephone: 013 249 2000	
2A Walter Sisulu Street MIDDELBURG 1050 P O Box 437 Middelburg 1050	
2A Walter Sisulu Street MIDDELBURG 1050 P O Box 437 Middelburg 1050	
MIDDELBURG 1050 P O Box 437 Middelburg 1050	
P O Box 437 Middelburg 1050	
P O Box 437 Middelburg 1050	
Middelburg 1050	
1050	
Telephone: 013 249 2000	
Telephone: 013 249 2000	
1 GIGPHONE. 010 248 2000	
Facsimile: 013 249 2145	
The project is for the appointment of a professional service provider for reviewal of annual finar statements for Nkangala District Municipality for three (3) financial years.	ncial
statements for tykangala district Municipality for three (3) financial years.	
3 The Period of Performance is as per letter of appointment.	
4 The Service Provider may not release public or media statements or publish material related to	the
Services or Project without the written approval of the Employer.	
5 The Service provision shall be completed as per letter of appointment.	
6 The Service Provider shall provide the Professional Indemnity Insurance from recognized institution.	ution of
7 The client shall not be responsible for any overtime worked or overtime payments made to the of the Service Provider.	personnel
of the Service Provider.	
8 Copyright of document prepared for the project shall be vested with the Nkangala District Munic	cipality
9 Service Providers will be paid in accordance with the Nkangala District Supply Chain Managem	nent
Policy.	
10 A Service Provider may not subcontract any work not approved by the employer the Nkangala I	Dietrict
Municipality	ווופוע





PART 1: DATA PROVIDED BY THE SERVICE PROVIDER

l 1.	
'.	The Service Provider is
	Address:
	Telephone:
	Facsimile:
2	The authorised and designated representative of the
	Service Provider is:
	Name:
	The address for receipt of communications is:
	Telephone:
	Facsimile:
	Address:
1	