FORM PA001

Province of KwaZulu-Natal Department of Economic Development
Requisition form for Goods / Services

To	MANAGER: SCM		202408261l
Name of Official:	Zama Dlomo	Requisition No.	
Business Unit:	Auxiliary services	Delivery Address	8 Warwick avenue Cascade PMB
Tel. Number:	076 943 2628	Required Delivery Date:	

REQUIRED GOODS / SERVICES (For all services/projects TOR must be attached together with the procurement strategy)

Full Description
Request SCM: To appoint service provider who will supply and deliver water coolers at uMgungundlovu District office cascade for the period of 24 months.

MOTIVATION FOR ACQUISITION: At the uMgungundlovu District office there is a shortage of water therefore the cascade requires the water dispensers.

Official's Signature ____________ **Date:** 14 / 08 / 2024

ALLOCATION OF EXPENDITURE

Funds	voted
Responsibility	Auxiliary services
Objective	Corporate services
Project	No project
Net Asset	NON ASSET RELATED
Regional Indicator	KZN EDTEA
Item	~~Water coolers~~ O/PERATING LEASES: OTH MACH & EQUIPM

Budget Allocation	R ~~545 000~~ 42 000 000
Less Expenditure	R ~~(381 428,06)~~ (10 611 901)
Less Commitments	R —
Budget Available	R 38 611 901,95
Projects/Goods/Services Estimated Amount	R 90 000

Approved / Not Approved

Responsibility Manager: Name and Rank: Zhgweuya

Signature: ____________ **Date:** 19/8/24

Comments: ____________

Budget Controller: ____________ **Date:** 14/08/2024

For SCM use only

ASSET MANAGEMENT / ICT UNIT				
Condition of existing asset	Obsolete/ Redundant	Irrepairable (Condition report for all IT equipment required)	Satisfactory	New
Name:	Signature:	Designation:		Date:

DEMAND SECTION					
Does this appear on the procurement plan?	YES	NO	If not on procurement plan does a motivation exist	YES	NO
Name:	Signature:	Designation: Njabulo		Date:	

ACQUISITION SECTION				
Quotation Number.		Funding Approval	YES	NO
Name:	Signature:	Designation:		Date:

LOGISTIC SECTION					
Award Approved by:	Name:		Date:		
Order No.:		Date:		Total Cost:	
Name:	Signature:	Designation:		Date:	