FORM PA001

KwaZulu-Natal Department of Economic Development, Tourism and Environmental Affairs
Requisition form for Goods / Services

To	MANAGER: SCM	Requisition No.	2023042809
Requestor's (Official) Name:	Samukelisiwe Zuma	Required delivery Date:	
Designation:	Auxiliary Services	Delivery address:	46 Bisset Street Port Shepstone
Business Unit			
Telephone Number	0332642657		

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

Full Description
Request SCM to appoint a service provider for a contract who will supply and maintain the plants at Port Shepstone district office. For 36 Months. ~~13 plants~~

MOTIVATION FOR ACQUISITION:

Requestor's (Official) Signature _____ **Date:** 29/3/2023

ALLOCATION OF EXPENDITURE

Funds	Voted
Responsibility	Corporate Services
Objective	Auxiliary Services
Project	No project
Net Asset	~~Non-Asset-Related~~ Office Buildings
Regional Indicator	KZN whole Province
Item	P/P : Gardening Services

Budget Allocation	R 36 700 000
Less Expenditure	R -
Less Commitments	R -
Budget Available	R 36 700 000
Budget Estimate	R200·000·00

Approved / Not Approved

Responsibility Manager: Name: N.P. Kunene **Rank:** Acting Director

Signature: _____ **Date:** 29/03/23

Comments: _____

Certification of funds:

Budget Controller Name: Mdudyzi **Signature:** _____ **Date:** 11/04/2023

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:	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:

FORM PA001

KwaZulu-Natal Department of Economic Development, Tourism and Environmental Affairs
Requisition form for Goods / Services

To	MANAGER: SCM	Requisition No.	2023042815
Requestor's (Official) Name:	Samukelisiwe Zuma	Required delivery Date:	
Designation:	Auxiliary Services	Delivery address:	Marine Building 10th Floor
Business Unit			
Telephone Number	0332642657		

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

Full Description
Request SCM to appoint a service provider for a contract who will supply and maintain the plants at Ministry Office district office. For a period of 36 Months. ~~7 plants~~

MOTIVATION FOR ACQUISITION:

Requestor's (Official) Signature _____ **Date:** 2023-03-29

ALLOCATION OF EXPENDITURE

Funds	Voted
Responsibility	Corporate Services
Objective	Auxiliary Services
Project	No project
Net Asset	~~Non-Asset Related~~ Office Buildings
Regional Indicator	KZN whole Province
Item	P/P Guarding Services

Budget Allocation	R 36700 000
Less Expenditure	R
Less Commitments	R
Budget Available	R 36700 00
Budget Estimate	R200.000.00

Approved / Not Approved

Responsibility Manager: Name: N.P. Khumalo **Rank:** Acting Director

Signature: _____ **Date:** 29/03/23

Comments: _____

Certification of funds:

Budget Controller Name: Mdukuzi **Signature:** _____ **Date:** 15/04/2023

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:		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:	