

**PROVINCE OF KWAZULU-NATAL
DEPARTMENT OF PUBLIC WORKS
..... REGION**

Telephone No. Fax:	Project File No.: 10/11..... Enquiries: Extension:
REQUEST FOR FINANCIAL APPROVAL FOR SERVICE TO PROCEED PROGRAMME 3 : MAINTENANCE OF BUILDINGS AND EQUIPMENT	
DESCRIPTION OF SERVICE:	
ESTIMATE / RECOMMENDED AMOUNT: R..... CLIENT DEPARTMENT : INSTITUTION : EXPENDITURE CODES :	
MOTIVATION FOR SERVICE TO PROCEED: 	
CHECKED BY WORKS INSPECTOR: DATE: CHECKED BY CHIEF / WORKS INSPECTOR (SUPERVISOR): DATE:	
SUPPORTED, SUBJECT TO AVAILABILITY OF FUNDS / NOT SUPPORTED	REASON FOR NON-SUPPORT
CONTROL WORKS INSPECTOR: DATE	

NOTE: Below is to be completed by the Client Department and returned by facsimile to the District Office of the Department of Public Works.

APPROVED / NOT APPROVED	REASON FOR NON-APPROVAL
HEAD: DEPARTMENT OF DATE	