

**SERVICE TITLE  
AT**

**INSTITUTION NAME  
CITY/TOWN/PLACE  
FOR THE KZN DEPARTMENT OF PUBLIC WORKS  
PROVINCIAL ADMINISTRATION OF KWAZULU-NATAL**

**CONTRACT NO. ZNT ..... W**

DATE : \_\_\_\_\_

**SCHEDULE OF PROFESSIONAL FEES INCLUDED IN FINANCIAL REPORT NO.**

Architect .....	R
Quantity Surveyor.....	R
Civil/Structural Engineer .....	R
Electrical Engineer.....	R
Mechanical Engineer .....	R
	_____
<b>TOTAL</b>	R
	=====