# Order Form

**BUYING PROCESS:**

Step 1 – Customer discusses / negotiates with Contractor about service delivery and completes Part A.

Step 2 – Customer emails Order form to Contractor.

Step 3 – Contractor completes Part B, returns signed Form to the Customer and sends a copy to the Department of [Finance Contract Manager](mailto:robert.mayne@finance.wa.gov.au).

Step 4: – Contractor delivers services in accordance with the confirmed order.

PART A: REQUEST TO CONTRACTOR

TO: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Name of Contractor and Contact Name)

This Purchase Order incorporates the Department of Finance General Conditions of Contract (November 2022) and is in accordance with the Common Use Arrangement established under CUA DRS2023.

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| PUBLIC AUTHORITY DETAILS | | | | | | | | |
| Name of State agency |  | | | | Section: | | | |
| Contact Person Name and Title |  | | | | | | | |
| Contact Details: | Phone: | | | | Email: | | | |
| Authorised Purchaser Name |  | | | | | | | |
| Payment / Invoicing. [Advise of payment method, invoicing instructions] | | | | | | | | |
| Invoices to be sent to  (Include contact name and specify address ) |  | | | | | | | |
| Payment By Govt Purchasing Card | ❒ YES ❒ NO (Tick ✓ appropriate box) | | | | | | | |
| SERVICE REQUEST | | | | | | | | |
| Purchase Order Number  (if applicable) | |  | | | | Date: | |  |
| Service Period:  (i.e. Services required for the dates inclusive) | | From: | | | | To: | | |
| Service Period Extension: | | On expiration of ‘Service Period’, and provided that the Customer is paying for the Services, the Contractor will continue to provide the Services on a month by month basis, until it is cancelled by the Customer on 30 days notice. If CUA DRS2023 expires or is terminated, all Services that are being provided will continue until the Customer directs otherwise on 30 days notice. | | | | | | |
| Services Description (Please tick ✓ appropriate box) | | | | | | | | |
| ❒ Vacated rental debts  ❒ Bond assistance debts  ❒ Student debts  ❒ Overpaid salary debts  ❒ Hospital patient debts  ❒Liability Debt  ❒State Tax Debt  ❒ Overseas debts | | | ❒ General Debts (please give details) | | | | | |
| ❒ Other Debt Recovery Services (please specify) | | | | | |
| Other Chargeable Costs $  (if applicable, please specify) | | |  | | | | | |
| Contract Price $  (Tick ✓ appropriate box) | | | ❒ As per contracted rates CUA DRS2023 | ❒ Rates as negotiated: (as attached) | | | ❒ Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| Attachments  (to this Pick and Buy Purchase Order): | | | ❒ YES (Details): | | | | | |
| Customer Requirements / Specifications. [List special customer requirements, eg. transition requirements, other alternative service levels negotiated with Contractor] List as required | | | | | | | | |
| 1.  2. | | | | | | | | |

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| Special Requirements.  Please note: It is advisable that State agencies consult with the Department of Finance Contract Manager before agreeing to any special terms and conditions to ensure compatibility with the DRS2023 CUA terms and conditions. |
| 1.  2.  3. |
| Interface Requirements. [Specify any interface requirements, address and location of contact person, acceptance requirements etc. agreed with Contractor] List as required |
| 1.  2.  3 |

PART B: CONFIRMATION BY CONTRACTOR

|  |  |
| --- | --- |
| To: | |
| (List contact person name and name of State agency) | |
| ❒ Your Purchase Order has been confirmed  ❒ Other details attached for your information – see attachment. | |
| From: | |
| Contractor contact name |  |
| Signature: |  |
| Contractor name |  |
| Customer ID for Web Access |  |
| Web Access PIN |  |

**Note:** The Customer may modify this pro-forma from time to time.