DMS No. insert DMS number

Checklist for Low Value Purchase for Cultural Heritage Services from Aboriginal or Torres Strait Islander Party or 3rd Party Provider

### up to $25,000 inclusive of GST

## Sole Provider Information

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Region/District** |  | | | |
| **Project Name & Number:** |  | | | |
| **Cost Object:**  (Cost Centre, WBS element, Project code) |  | | | |
| **Contract Number:** |  | | | |
| **Aboriginal or Torres Strait Islander Party** **/** **3rd Party Provider:** |  | | | |
| **ABN (if applicable):** |  | | | |
| **Requirement:** |  | | | |
| **Estimated contract value (incl. GST):** |  | | | |
| **Estimated Engagement Period:** | From |  | To |  |

## Engagement Justification

|  |  |
| --- | --- |
| **Approval is sought to procure based on the following justification**: [select applicable box below] | |
|  | Sole Provider Services from Aboriginal or Torres Strait Party 🡪This Party is registered under the *Aboriginal Cultural Heritage Act* 2003 or *Torres Strait Islander Cultural Heritage Act* 2003 and is the only party for the area. |
|  | Sole Provider Services from 3rd Party Provider 🡪 This is the nominated 3rd Party Provider of the Aboriginal or Torres Strait Islander Party. The Party is not set up as registered business. |
|  | Aboriginal Party's Technical Adviser 🡪 ensure conditions in Part B, Schedule A of EP173 are met. |
|  | Aboriginal Party's legal representative 🡪 ensure conditions in Part B, Schedule A of EP173 are met. |

## Tender Exemption

|  |  |  |  |
| --- | --- | --- | --- |
| Does the project have federal funding | | Yes | No |
| Has a tender exemption been sought and approved? | | Yes | No |
| If no, this needs to be arranged ASAP | Date approved: | | |

## Endorsement –Cultural Heritage Officer

|  |  |  |
| --- | --- | --- |
| Name: |  | |
| Position Title: |  | |
| Branch: |  | |
| Signature: |  | Date: |

## Approval – Procurement Delegate

|  |  |  |
| --- | --- | --- |
| As a Procurement Delegate with the appropriate level of delegation, based on the information provided I am satisfied that:   * the evaluation process defined in this Check List and Request for Quote is in accordance with the Transport and Main Roads procurement procedures * the process ensures probity, transparency and accountability will be maintained * the approach will provide value for money for the department.   I am aware of my responsibilities under the probity and accountability provisions of the Queensland Procurement Policy and I acknowledge that I am accountable for this decision. | | |
| **Name:** |  | |
| **Position Title:** |  | |
| **Branch:** |  | |
| **Delegation Level:** | 3  4  5 | |
| **Signature:** |  | **Date:** |

## Approval – Financial Delegate

|  |  |  |
| --- | --- | --- |
| As a Financial Delegate with the appropriate level of delegation, based on the information provided I am satisfied that:   * the expenditure is for authorised purposes and is necessary for the proper conduct of departmental business * the works or services acquired are included in an approved program, project or budget * the expenditure represents value for money, having considered all reasonable options available for achieving the desired purpose * I have budgetary control for the specific type of expenditure within the relevant division, branch, program or cost centre, or I have written authority to act on behalf of the officer who does, and I confirm funds are available for the purchase * the amount for the endorsement is the total price including GST payable and any other relevant charges e.g. delivery * I am an impartial party in the transaction. * I am aware of my responsibilities under the *Financial Accountability Act 2009* and I acknowledge that I am accountable for this decision. | | |
| **Name:** |  | |
| **Position Title:** |  | |
| **Branch:** |  | |
| **Financial Band:** | ELT  1  2  3  4  5  6  7 | |
| **Signature:** |  | **Date:** |

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