



Office of the Chief Procurement Officer System Account Application Form

CSD User Account	eTender User Account
<input type="checkbox"/> Primary User <input type="checkbox"/> Support View OTP <input type="checkbox"/> System Access	<input type="checkbox"/> Super User (System Administrator) <input type="checkbox"/> Planning Coordinator (Captures Procurement Plans) <input type="checkbox"/> Bid Administrator (Publish Tenders) <input type="checkbox"/> Tender Support (Awards and Bidders list) <input type="checkbox"/> Contract Administrator (Captures Contracts)

GMC Organs of State User Account	GMC National Treasury User Account
<input type="checkbox"/> GMC Primary User (Grants GMC officials access to CSD to be able to use GMC) <input type="checkbox"/> GMC Official (OoS official send submission)	<input type="checkbox"/> GMC System Administrator (1 st line support) <input type="checkbox"/> GMC Reports Administrator (Data Analytics/BI) <input type="checkbox"/> Governance Coordinator (Assess submissions) <input type="checkbox"/> GMC Team Lead (Recommend submissions) <input type="checkbox"/> GMC Head (Sign off outcome letter) <input type="checkbox"/> Divisional Head (Sign off outcome letter requiring DDG signature)

Organ of State Information			
Organ of State Type:	<input type="checkbox"/> National <input type="checkbox"/> Provincial <input type="checkbox"/> Local <input type="checkbox"/> SOE	System Account to be:	<input type="checkbox"/> Activated <input type="checkbox"/> Deactivated
		System Account effective from:	YYYY/MM/DD
Organ of State Name:			

1. For eTender please complete, sign and email the document to etenders@treasury.gov.za
2. For CSD please complete, sign and email the document to csdOoS.Support@treasury.gov.za
3. For GMC please complete, sign and email the document to GMC.Solution@treasury.gov.za

User Information	
Title:	
Name (s):	
Surname:	
Rank:	
Division:	
PERSAL No / Employee No:	
Telephone number:	
Cell phone number:	
Email Address:	
ID Number:	
Signature:	
Date:	YYYY/MM/DD

Declaration by CFO

I, the Chief Financial Officer (CFO) of the above-mentioned organisation, hereby certify that the provided information of the technical user is correct and verified.

CFO Information	
Title:	
Name (s):	
Surname:	
Rank:	
Division:	
PERSAL No / Employee No:	Organ of State Stamp (if available)
Telephone number:	
Cell phone number:	
Email Address:	
ID Number:	
Signature:	
Date:	YYYY/MM/DD

National Treasury Office Use Only

Title:		Title:	
Name (s):		Name (s):	
Surname:		Surname:	
Request authorised on:	YYYY/MM/DD	Request authorised on:	YYYY/MM/DD
Signature:		Signature:	