

## WCED

## Application for Cellular phone Allowance

(in terms of the approved WCED Cellular Phone Policy)

## APPLICANT'S DETAILS

PERSAL Number		Name		Surname	
Tel Number		ID Number/ Passport Number		Permanent Employee Y/N	
Email				Office/Directorate/ Chief Directorate/Branch	
Designation				Allowance Amount	R

\* A copy of the Applicant's ID must be submitted with this application.

Applicant's signature		Date	
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## Motivation by Supervisor/Manager to be attached

Supervisor/Manager name	
PERSAL no	
Signature	
Date	

## COST CENTRE MANAGER DETAILS

		Name		Surname	
Tel Number			Office/Directorate/ Chief Directorate/Branch		
Email					

## Approval by Cost Centre Manager

Comments					
APPROVED			NOT APPROVED		
Signature					
Date					

**FOR COMPLETION BY SCM**

<b>MAXIMUM LIMITS FOR CELLULAR PHONE PACKAGES INCLUSIVE OF VAT</b>		<b>Mark with an X</b>	<b>Please mark with an X the amount of the allowance for which the official qualifies:</b>
Head of Department	R1,750.00		
Deputy Director-General	R1,250.00		
Chief Director	R950.00		
Director	R750.00		
Deputy Director or equivalent	R400.00		
Other levels	R200.00		
<b>SCM Official (Name &amp; Surname)</b>			
<b>PERSAL no</b>			
<b>Signature</b>			
<b>Date</b>			