

Procurement Proforma – Welsh Purchasing Card

NEW CARD APPLICATIONS – PLEASE COMPLETE PAGES 1 & 2 EXISTING CARD AMENDMENTS – PLEASE COMPLETE PAGES 3 & 4 ONLY Please complete all yellow fields

New Card Application:-

Date:

Type of card required (delete as appropriate):-

- > Tier 1 Travel, Subsistence and Basic Expenses
- ➤ Tier 2 -Department Level (including Travel, Subsistence and Expenses)

 N.B. The University typically operates a strict one card per department policy with individual tier 2 cards provided on an exceptional basis due to business needs.
- > Tier 3 Dedicated 'lodged' purchase cards.

 Cards 'lodged' with a specific supplier covering multiple transactions

Reasons for approval of card applications are generally limited to:-

- At tier 1, for individuals who travel in the UK or overseas on regular basis, typically at least once a month. N.B. It is the University's policy that all expenditure is through framework agreements where they exist (including business travel) and non-compliance is only acceptable in exceptional circumstances where there is a clear benefit to the University and where no adverse legal implications arise.
- > At Tier 2, where no department level card already exists, or due to exceptional requirements due to business needs (please provide details below, if applicable).
- ➤ At tier 3, for a multitude of regular low value, high volume transactions with the same supplier, provided that supplier accepts Visa payments and also provided the supply arrangement is in accordance with Financial Regulations & Procedures.

Please provide details in the box below of the	reasons why a card is required and what it is	
proposed to be used for	,	
		_
Requested maximum monthly credit limit on the	<mark>he card</mark> £	
Requested maximum individual transaction lin	nit £	
PLEASE ENSURE ALL SIGNATURE APPROVA	ALS ARE COMPLETED PRIOR TO FORM	
SUBMISSION		
1. Applicant (proposed cardholder)		
Name: F	Position:	

Signed:....

• Name: Date: Authorised Signatory – Director of Fire	
• Name: Date: Authorised Signatory – Director of Fire	Signed: nance
• Name: Date: Authorised Signatory – Director of Fir	Signed:
• Name: Date:	Signed:
• Name:	
•	Position: PROCUREMENT
•	
SATISFACTION FROM PROCUREME MITIGATION (as applicable)	NT/COMPLIANCE PERSPECTIVE
NEED •	
Comments on application, for Directo	r of Finance
	IAGEMENT (completed by Procurement Manager)
	•
Name:	Position:
(Procurement Manager also reserves	
4. Research, Business & Innovation a	
Date:	Signed:
Name:	Position:
3. Institute Director (or nominee) or Ho	ead of Department (Service departments)
Jale	Signed
Name:	Position:

2. Card Supervisor (person responsible for checking and authorising cardholder transactions)

PLEASE RETURN THIS COMPLETED FORM TO THE PREOCUREMENT MANAGER. BY SUBMITTING THIS FORM, ALL SIGNATORIES ACCEPT AND AGREE TO ABIDE BY AND COMPLY WITH UNIVERSITY FINANCIAL REGULATIONS AND PROCEDURES WHEN USING THE CARD, IF APPROVED.