

# MFMA IMPLEMENTATION AND MONITORING - s 178(2) PUBLIC-PRIVATE PARTNERSHIP (PPP)

Municipalities must submit to National Treasury by 30 September 2004 a list of public-private partnerships to which the municipality is a party with a value of more than R1 million in total or per annum (MFMA s178(2)(b)). This form must be completed by the municipal manager and endorsed by the mayor. The signed copy must be faxed to the Chief Director: Local Government at 012 315 5230. The electronic form must be emailed to lgdatabase@treasury.gov.za. Instructions for saving of this file appear at the bottom of this spreadsheet.

If Municipality has no PPP's, submit form with Municipality, Financial Year, Quarter and PPP Number = 0 filled in. (all other cells are blank)

<b>Financial Year and Quarter</b>	2007/08	Q1 July-Sept	
<b>Municipality</b>	EC125 Buffalo City		
<b>PPP Number</b>	0		
<i>Number between 1 and 100, start at number 1</i>			
<b>PPP DETAILS</b>			
PPP Name			
Main / Sub Function			
Purpose, Extent and Other Particulars		<i>Information on purpose additional to subfunction. If the purpose does not neatly fit into a subfunction, choose 'Other' and provide detail here.</i>	
Date Established ( <i>ccyy/mm/dd</i> )			
Feasibility Study Done ( <i>Yes/No</i> )			
Compliant with MFMA ( <i>Yes/No</i> )			
Total Value ( <i>Whole Rand</i> )			
Duration ( <i>Number of Whole Years</i> )			
Participating Parties ( <i>specify parties</i> )			
<b>PPP CONTACT DETAILS</b>			
<b>Postal address:</b>			
Post Box/Private Bag			
Box/Bag No			
City / Town			
Postal Code			
<b>Street address</b>			
Building			
Street No. & Name			
City / Town			
Postal Code			
<b>General Contacts</b>	<i>Phone, fax and cell no's: nnn nnn nnnn (example 011 315 2341)</i>		
Telephone number		<i>Specify Position</i>	
Fax number			
E-mail address			
<b>Position 1</b>			
Name			
Telephone number			
Cell number		<i>Specify Position</i>	
Fax number			
E-mail address			
<b>Position 2</b>			
Name			
Telephone number			
Cell number		<i>Specify Position</i>	
Fax number			
E-mail address			
<b>Position 3</b>			
Name			
Telephone number			
Cell number			
Fax number			
E-mail address			

**Prepared by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Signature) **Municipal Manager**

**Endorsed by:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
(Signature) **Mayor**