

Schedule 16 – Task Authorisation Form (TAF) Template for Contract: CSA/5001

TAF PART A – Scope of Proposed TAF (without commitment).

| | | | | | |
|----|--|---|---------------------------------|---|--------------------------|
| 1. | TAF Number: | TAF [insert number] | | Tick if TAF is a Crisis Event : | <input type="checkbox"/> |
| 2. | Title of TAF: | [insert brief titled / descriptor of TAF] | | Tick if TAF is a Mandated Change : | <input type="checkbox"/> |
| 3. | Initiator of TAF: | [insert name] | | | |
| 4. | Requirement: | | | | |
| | [Insert a short description of the requirement] | | | | |
| 5. | Required Start Date for this TAF: | DD/MM/19 | Required End Date for this TAF: | X days/months from TAF Part C signature. | |
| 6. | Any Authority Required Contract Deliverables, Deliverable Documentation, Output or Service Level etc.: | | | | |
| 7. | Signed by the Authority's Project Manager: | | | | |
| | Signed: | [Insert name] | | | |
| | Title: | [Insert tally] | | | |
| | Date: | DD/MM/2019 | | | |
| 8. | Endorsed by the Authority's Strategic Governance & Performance (SG&P) Manager: | | | | |
| | Signed: | | | | |
| | Title: | | | | |
| | Date: | | | | |
| 9. | Approved by the Authority's Commercial Officer: | | | | |
| | Signed for the Authority: | [Insert Name] | | | |
| | Title: | [Insert Tally] | | | |
| | Date: | DD/MM/2019 | | | |

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TAF PART B – Contractor’s Price TAF Proposal Form

| | | | | | | | |
|-----|---|-------|--|--------|-----------------------------------|--------------------------|--|
| 1. | TAF Number: | | Tick if TAF is a Crisis Event: | | <input type="checkbox"/> | | |
| 2. | Title of TAF: | | Tick if TAF is a Mandated Change: | | <input type="checkbox"/> | | |
| 3a. | Price (£): (<i>EX VAT</i>): | | | | | | |
| 3b | Price type: | Firm: | <input type="checkbox"/> | Fixed: | <input type="checkbox"/> | Other (define) | |
| 4. | Full Price cost breakdown: | | | | | | |
| | | | | | | | |
| 5. | Earliest TAF start date and duration: | | TAF completion date: (<i>based on earliest start date</i>) | | Firm Price Payment Plan attached? | <input type="checkbox"/> | |
| 6. | Details of all Contract Deliverables, Deliverable Documentations, Outputs, Services and Service Levels provided by the TAF: | | | | | | |
| | | | | | | | |
| 7. | Details of all assumptions & dependencies, including any Authority dependencies (if any): | | | | | | |
| | | | | | | | |
| 8. | Impact of the TAF upon: Performance Management and Monitoring; other TAFs; the Contract or other Contractor’s Obligations (if any): | | | | | | |
| | | | | | | | |
| 9. | Risk(s) relating to this TAF, across the Contract or the Contractor’s Obligations etc: | | | | | | |
| | | | | | | | |
| 10. | Approved by Ultra Electronics Limited: | | | | | | |
| | Signed for the Contractor: | | | | | | |
| | Title: | | | | | | |
| | Date: | | | | | | |

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TAF PART C – Task Acceptance/Rejection Form

To:

| | | | | |
|----|--|--|--|--------------------------|
| 1. | TAF Number from Contractor's Firm Price TAF Proposal Form: | | Tick if TAF is a Crisis Event: | <input type="checkbox"/> |
| 2. | Title of TAF from Contractor's Firm Price TAF Proposal Form: | | Tick if TAF is a Mandated Change: | <input type="checkbox"/> |

| | Clarification correspondence: | Correspondence Reference: | Dated: |
|----|-------------------------------|---------------------------|--------|
| a. | | | |
| b. | | | |
| c. | | | |
| d. | | | |
| e. | | | |

| | |
|------------------------------|---|
| <i>*delete as applicable</i> | The Authority hereby confirms its acceptance of your Firm Price Proposal Form referenced above, in conjunction with the clarification correspondence detailed above, and this TAF shall form part of the Contract. Unless otherwise specially stipulated herein, all Terms and Conditions of the Contract shall remain unaltered. |
| | The Authority hereby confirms its rejection of your Firm Price Proposal Form referenced above and in conjunction with the clarification correspondence detailed above. |

This correspondence is without prejudice to the Authority's rights under the Contract.

| | | |
|---|-------|---|
| Signed on behalf of the Authority: | | Dated this (day of) (month) (year) |
| Name: (Block Capitals) | | Postal Address: [insert address] |
| Title: | | |

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TAF PART D – Contractor’s acknowledgement of TAF Form.

To: [Insert Address]

We:

| | | | |
|------------------|--|--|--------------------------|
| Contract Number: | | Dated: | |
| TAF Number: | | Tick if TAF is a Crisis Event: | <input type="checkbox"/> |
| Title of TAF: | | Tick if TAF is a Mandated Change: | <input type="checkbox"/> |

All detail above is to be completed by the MOD Contracts Branch prior to issue.

and confirm that we acknowledge receipt of the acceptance/rejection* contained therein.

**delete as applicable.*

| | | |
|---|-------|----------------------------------|
| Signed on behalf of Ultra Electronics Limited: | | Dated this |
| | | (day of) |
| | | (month) |
| | | (year) |
| Name: (Block Capitals) | | Postal Address: [Insert Address] |
| In the capacity of: | | |

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TAF PART E – Task Completion Form.

To: [Insert Address]

| | | | | |
|----|---|--|--|--------------------------|
| 1. | TAF Number: | | Tick if TAF is a Crisis Event: | <input type="checkbox"/> |
| 2. | Title of TAF: | | Tick if TAF is a Mandated Change: | <input type="checkbox"/> |
| 3. | Initiator of TAF: | | | |
| 4. | Details of all Contract Deliverables, Deliverable Documentations, Outputs, Services and Service Levels provided by the Contractor together with references as applicable: | | | |
| | | | | |
| 5. | Task Completion Date: | | at agreed Firm Price of (£): (ex VAT) | |

| Contractor's Declaration of Task Completion. | | | |
|--|-------|-----------------|------------------|
| Signed on behalf of Ultra Electronics Limited: | | Dated this | (day of) |
| | | | (month) |
| | | | (year) |
| Name: (Block Capitals) | | Postal Address: | [Insert Address] |
| In the capacity of: | | | |

| Authority's Project Manager's confirmation of Completion: | |
|---|--|
| Signed: | |
| Name: | |
| Title: | |
| Date: | |