

CLASSIFICATION - *[Instruction: SERVICE LEAD enter Classification]*

**SERVICE ORDER FORM – PART 1**

**TO:** Cloud Native Ltd

**SERVICE ORDER NUMBER:** 001 *[Instruction: new number to be utilised for each new Service, Service lead populates this number through the form at the start]*

**STATEMENT OF WORK:**

**MONTHLY / PROJECT** *[Instruction: Delete, which is not applicable]*

1. The required Service is included in the Statement of Work attached.
  - a) Detailed Deliverables are included in the Statement of Work.
  - b) Timescales are to be agreed with Service Lead.
  - c) Service Request Completion Date: XX/XX/XXXX *[Instruction: Date of the last Deliverables]:*

**AUTHORITY'S SIGNATURE:**

**AUTHORITY'S NAME:**

**AUTHORITY'S APPOINTMENT:** Service Lead

**AUTHORITY'S TELEPHONE NO:**

**DATE:**

**SERVICE ORDER FORM – PART 2**

TO: ADS SERVICE LEAD

**SERVICE ORDER NUMBER:** 001 [*Instruction: new number to be utilised for each new Service, Service Lead populates this number through the form at the start!*]

1. Please provide the pricing details in the table below.
2. Pricing shall be in accordance with the Call-Off Contract Order Form and Terms and Conditions.
3. Completed PART2 shall be returned to the Authority's Service Lead named in PART1.

**DELIVERABLES/PRICING** [*Instruction: Delete Table, which is not applicable*]**ADS MONTHLY**

Deliverables	Title/Description	Maximum LoL £385,000 (Ex VAT)	Due Date
1.			
2.			
3.	Example: weekly meeting and reporting etc- add lines as required		
<b>TOTAL</b>	Excluding VAT		
	VAT		
	Including VAT		
<b>T&amp;S</b>			
add lines as required, if applicable (No VAT applies)			
<b>TOTAL</b>			

**PROJECT**

Deliverables	Title/Description	Max LoL £	Due Date
1.			
2.			
3.	Example: weekly meeting and reporting etc- add lines as required		
<b>TOTAL</b>	Excluding VAT		
	VAT		
	Including VAT		
<b>T&amp;S</b>			
add lines as required, if applicable (No VAT applies)			
<b>TOTAL</b>			

SUPPLIER'S SIGNATURE:

SUPPLIER'S NAME:

SUPPLIER'S APPOINTMENT:

SUPPLIER'S TELEPHONE NO:

DATE:

**SERVICE ORDER FORM – PART 3**

**ORDER NUMBER:** 001 [*Instruction: new number to be utilised for each new Service, Service lead populates this number through the form at the start*]

**TO:** Cloud Native Ltd

**AUTHORITY TO PROCEED**

You are hereby authorised to proceed with the required services.

**PLEASE NOTE: No work shall be performed without the Authority's prior written permission, and any work undertaken without such written authorisation will not be recognised. Furthermore, payment of any invoice will not be permitted without the Authority's explicit written authorisation.**

1. All invoices must strictly align with the Deliverables and Pricing Table outlined in Part 1 of this document.
2. The Purchase Order number must be clearly referenced on all invoices submitted for this requirement.
3. PO Number: [*Service Lead Insert PO Number accordingly*].

MONTHLY PO:

PROJECT PO:

AUTHORITY'S SIGNATURE:

AUTHORITY'S NAME:

AUTHORITY'S APPOINTMENT: Service Lead

AUTHORITY'S TELEPHONE NO:

DATE:

**SERVICE ORDER FORM – PART 4**

**ORDER NUMBER:** 001 [*Instruction: new number to be utilised for each new Service, Service lead populates this number through the form at the start*]

**TO:** Cloud Native Ltd (cc DInfo Comrcl)

**ACCEPTANCE OF DELIVERABLES AND INVOICE AUTHORISATION**

I confirm that the Deliverables have been reviewed and accepted as meeting the agreed requirements. You are authorised to submit an invoice for payment in accordance with the contract terms.

**AUTHORITY'S SIGNATURE:**

**AUTHORITY'S NAME:**

**AUTHORITY'S APPOINTMENT:** Service Lead

**AUTHORITY'S TELEPHONE NO:**

**DATE:**