



Contract No: 701547457 (Formerly referred to as  
FsASTC/00138)

For: C17 – Synthetic Training Service

## **SCHEDULE H**

## **TASKING FORMS**

TASK AUTHORISATION FORM – COURSE BOOKING				
TASK DETAILS, COST INFORMATION AND CONTRACTOR APPROVAL SHEET				
Contractor:	Contract No:	701547457	Issue No:	
	Task No:		Date:	
Task Title:				
SECTION 1	DESCRIPTION OF AUTHORITY REQUIREMENT			
	TASK DESCRIPTION		Required Delivery Schedule	
	Signed for and on behalf of the Authority:			
	Name:			
	Position:			
SECTION 2	Date:			
	DESCRIPTION OF CONTRACTOR'S PROPOSAL			
	TASK	Number of hours	Delivery Schedule	

SECTION 3	CONFIRMATION OF CONTRACTOR COSTS (priced in accordance with Schedule P) _:	
	Signed for and on behalf of the Contractor:	
	Name:	
	Position:	
	Date:	

## COURSE BOOKING FORM

SECTION 4	<b>PROJECT AUTHORISATION TO PROCEED – The Contractor is authorised to provide the service detailed above in accordance with the terms and conditions of the Contract. Signed for and on behalf of the Authority:</b>			
	<b>Name</b>	<b>Signature</b>	<b>Position</b>	<b>Date</b>
	<b>COMMERCIAL AUTHORISATION TO PROCEED – The Contractor is authorised to provide the service detailed above in with the terms and conditions of the Contract. Signed for and on behalf of the Authority:</b>			
	<b>Name</b>	<b>Signature</b>	<b>Position</b>	<b>Date</b>

## COURSE BOOKING FORM

DESCRIPTION OF TASK COMPLETION (TO BE COMPLETED BY THE AUTHORITY)			
TASK	Number of hours	DELIVERY SCHEDULE	
SECTION 5	TASK COMPLETION (CONTRACTOR) - This is to certify the above task has been completed in accordance with the Terms and Conditions of the Contract. Signed for and on behalf of the Contractor:		
	Name:	Signature	Position:
SECTION 6	TASK COMPLETION (PROJECT AUTHORITY) - This is to confirm that the above task has been completed in accordance with the Terms and Conditions of the Contract and payment has been authorised and invoicing may now be submitted as part of the Total Monthly Payment. Signed for and on behalf of the Authority:		
	Name:	Signature:	Position:
	TASK COMPLETION (COMMERCIAL AUTHORITY) - This is to confirm that the above task has been completed in accordance with the Terms and Conditions of the Contract and payment has been authorised and invoicing may now be submitted as part of the Total Monthly Payment. Signed for and on behalf of the Authority:		
	Name:	Signature:	Position:

TASK AUTHORISATION FORM - STE BOOKING			
TASK DETAILS, COST INFORMATION AND CONTRACTOR APPROVAL SHEET			
Contractor:	Contract No:	701547457	Issue No:
	Task No:		Date:
Requirement for STE at the ITC			
Task Description:			
SECTION 1	DESCRIPTION OF AUTHORITY REQUIREMENT		
	STE	Number of hours	Required Date
		0	
	Signed for and on behalf of the Authority:		
	Name:		
	Position:		
	Date:		
SECTION 2	DESCRIPTION OF CONTRACTOR'S PROPOSAL		
	STE	Number of hours	Date and time

SECTION 3	CONFIRMATION OF CONTRACTOR COSTS (priced in accordance with Schedule P) _:	
	Signed for and on behalf of the Contractor:	
	Name:	
	Position:	
	Date:	

## STE BOOKING FORM

<b>SECTION 4</b>	<b>PROJECT AUTHORISATION TO PROCEED – The Contractor is authorised to provide the service detailed above in accordance with the terms and conditions of the Contract. Signed for and on behalf of the Authority:</b>			
	Name	Signature	Position	Date
	<b>COMMERCIAL AUTHORISATION TO PROCEED – The Contractor is authorised to provide the service detailed above in with the terms and conditions of the Contract. Signed for and on behalf of the Authority:</b>			
	Name	Signature	Position	Date



## STE BOOKING FORM

DESCRIPTION OF TASK COMPLETION			
STE	Number of hours	Date and time	
SECTION 5	TASK COMPLETION (CONTRACTOR) - This is to certify the above task has been completed in accordance with the Terms and Conditions of the Contract. Signed for and on behalf of the Contractor:		
	Name:	Signature	Position:
SECTION 6	TASK COMPLETION (PROJECT AUTHORITY) - This is to confirm that the above task has been completed in accordance with the Terms and Conditions of the Contract and payment has been authorised and invoicing may now be submitted as part of the Total Monthly Payment. Signed for and on behalf of the Authority:		
	Name:	Signature:	Position:
	TASK COMPLETION (COMMERCIAL AUTHORITY) - This is to confirm that the above task has been completed in accordance with the Terms and Conditions of the Contract and payment has been authorised and invoicing may now be submitted as part of the Total Monthly Payment. Signed for and on behalf of the Authority:		
	Name:	Signature:	Position: