**Agreement for the Supply of
Multifunction Device and Printer Services**

**Purchase Order Form**

**Part One - Required Information**

[*Note: The information in this Part One must be completed.*]

**Purchaser details:**

|  |  |
| --- | --- |
| **Name** |  |
| **ABN (if applicable)** |  |
| **Address** |  |
| **Notice Details****Address** |  |
| **Email** |  |
| **Attention** |  |

**Supplier details:**

|  |  |
| --- | --- |
| **Name** |  |
| **ABN** |  |
| **Address** |  |

|  |  |
| --- | --- |
| **Purchase Order number** | [*insert PO number*] |
| **Start Date** |  |
| **Completion Date** |  |
| **Extension Options** |  |

**GOODS AND SERVICES**

The Supplier must provide the Goods and Services detailed in the Specifications, including the Solution Design developed by the Supplier, in accordance with the specific requirements in this Purchase Order.

**Options**

The Purchaser wishes to obtain the following Goods and Services from the Supplier. [Note: the Purchaser **must** select either Option 1, 2, 3 or 4 and can select the Optional Services if required].

|  |
| --- |
|[ ]  **Option 1**Purchase of Printers and/or MFDPs and Minimum Managed Print Services |
|[ ]  **Option 2**Minimum Managed Print Services and Supplier-owned Equipment |
|[ ]  **Option 3**Purchase of Printers and/or MFDPs and Standard Managed Print Services |
|[ ]  **Option 4**Standard Managed Print Services and Supplier-owned Equipment |
|[ ]  **Optional Services** |

**Equipment**

***Goods***

| **Description of Required Goods** | **Quantity of Goods** | **Extended Warranty Period** |
| --- | --- | --- |
| [*List each item of the required Goods to be purchased by the Purchaser by reference to the Catalogue and/or any additional requirements specified in the CSA, if applicable*] | [*Insert required quantity of each item of Goods*] | [*Specify if the Purchaser would like to extend the Warranty Period by one or two years*] |
|  |  |  |
|  |  |  |

|  |  |
| --- | --- |
| **Warranty Services** | *Insert details of the Warranty Services to be provided by the Supplier in addition to those in the Specifications.* |

***Equipment requirements***

|  |  |
| --- | --- |
| **Maximum volume of printing required** | [*Insert the maximum volume of printing required, as measured by click rate.*] |
| **Will equipment authorisation be required?** | Yes/No[*If ‘Yes’, please specify the type of equipment authorisation required:*] ‘Pull printing’: Yes/NoSecure Scanning: Yes/NoOther: [*Provide details of the equipment authorisation required.*] |
| **Security environment obligations** | As set out in Schedule 1 to this Purchase Order.[*If Schedule 1 is left blank, no additional standards, policies and procedures will apply in relation to the Purchaser’s security environment beyond those set out in the Agreement section X of the Specifications.*] |
| **Socialisation testing requirements** | [*Insert any requirements for Socialisation testing of Equipment beyond those set out in the Specifications.*] |

***Equipment delivery requirements***

|  |  |
| --- | --- |
| T**ime for Delivery** | [*Specify required Time for Delivery of the Equipment*] |

***Equipment Installation* *requirements***

|  |  |
| --- | --- |
| **Time for Installation** | [*Specify required Time for Installation.*] |
| **Installation Point** | [*Specify location/s at which the Equipment is to be Installed.*] |

***Liquidated Damages***

|  |  |
| --- | --- |
| **Liquidated damages**  | *Specify the amount (rate) of liquidated damages that will be payable by the Supplier for every day after the Time for Delivery (or any revised Time for Delivery) by which the delivery of the Equipment remains outstanding.* |

***Existing MFDPs (clause 15.4)***

[*Purchasers should select one of the options below regarding existing fleet equipment.*]

|  |  |
| --- | --- |
| **Is the Supplier required to purchase your existing MFDP Fleets?** | Yes/No[*If, 'No, please complete the section below.* *If ‘Yes’, please complete the following:*] Description of fleet to be purchased:[*Specify the existing fleet of MFDPs, software and infrastructure to be purchased. If required, a separate document can be annexed to this Purchase Order.*]Price[*Specify the price at which the existing fleet is to be purchased. If left blank, the price will be the net book value for such MFDPs, software and infrastructure, as determined by the Purchaser.*] |
| **Is the Supplier required to take operational, legal, financial and management responsibility for your existing MFDP Fleets?**  | Yes/NoDescription of fleet to be managed:[*Specify the existing fleet of MFDPs, software and infrastructure to be managed by the Supplier and describe any specific responsibilities. If required, a separate document can be annexed to this Purchase Order.*]Contracts to be novated or assigned:[*Specify any lease or other arrangements to be novated or* *assigned to the Supplier.*] |

**Services**

***Minimum Managed Print Services***

| **Catalogue Reference** | **Description of Services** |
| --- | --- |
|  | *[Insert details of the Minimum Managed Print Services required, unless already agreed in Customer Service Agreement in which case leave blank]* |
|  |  |

***Standard Managed Print Services***

| **Catalogue Reference** | **Description of Services** |
| --- | --- |
|  | *[Insert details of the Standard Managed Print Services required, unless already agreed in Customer Service Agreement in which case leave blank]* |
|  |  |

***Training***

|  |
| --- |
| [*Detail any specific requirements for the training to be provided by the Supplier pursuant to section X of the Specifications.*]  |

***Managed Operations***

| **Specifications Reference** | **Description of Services** | **Specified Requirements** |
| --- | --- | --- |
| [Insert] | Support/Help Desk  | [*Specify any special or additional requirements applying to the Supplier’s support and help desk Services. If left blank, the service description in section X of the Specifications will apply.*] |
| Will the Supplier’s direct support free call number be published to end users?  | Yes/No |
| [Insert] | Purchaser access to the Incident Management System (IMS) | Yes/No[*Specify whether the Purchaser is to have secure access to the Supplier's IMS.*] |
| [Insert] | Continuous Improvement | [*Specify any requested continuous improvement activities in relation to the fleet of Equipment. If left blank, the continuous requirements in Schedule 9 will apply.*] |
| [Insert] | Reporting | Frequency: [*Specify the frequency of performance reports.*] |
| Reporting requirements: [*Specify any additional performance reporting requirements. If left blank, the reporting requirements in clause 10.2 of the Agreement and sections X and X of the Specifications will apply.*] |
| [Insert] | Cooperation with Third Party Suppliers | [*Specify any third party suppliers providing services to the Purchaser that the Supplier must cooperate with in providing the Services.*] |

***Other Service Requirements***

| **Specifications Reference** | **Description of Services** | **Specified Requirements** |
| --- | --- | --- |
| [Insert] | Environment Sustainability | As set out in Schedule 1 to this Purchase Order.[*If Schedule 1 is left blank, no additional environment sustainability requirements will apply in relation to the Purchaser’s security beyond those set out in the Agreement section X of the Specifications.*] |
| [Insert] | Police Checks / Security Checks | As set out in Schedule 1 to this Purchase Order.[*If Schedule 1 is left blank, no additional police/security check obligations will apply beyond those set out in clause 22 of the Agreement and section X of the Specifications.*] |

***Optional Services***

| **Catalogue Reference** | **Description of Services** |
| --- | --- |
|  | *[Insert details of the Optional Services required, unless already agreed in Customer Service Agreement in which case leave blank]* |
|  |  |

***Transition In Services*** *(Specifications - section X)*

|  |  |
| --- | --- |
| **Description of Transition In Services (clause 15.2(a)**) | [*Describe any additional requirements for the Transition In Services in relation to:**the Transition In Plan to be provided to the Purchaser for approval;**the provision and integration of all required Equipment, infrastructure and software;* *the optimisation, installation and configuration of Equipment used to provide the Services;**all deliverables required as part of the Transition In Services; and**the Procedures Manual.**If left blank, the Transition In Services to be provided by the Supplier will be those set out in section X of the Specifications.*] |
| **Transition In Commencement Date (clause 15.1(a))** | [*Insert date*] |
| **Procedures Manual Date (clause 15.3(a))** | [*Insert the date for submission of the Procedures Manual to the Purchaser*] |
| **Procedures Manual requirements (clause 15.3(a))** | [*Insert any requirements for the Procedures Manual*] |
| **Transition In Milestones and Milestone Dates (clause 15.1(b))** | [*Insert the milestones and milestone dates for the Transition In Period*] |
| **Transition In Completion Date (clause 15.1(b))** | [*Insert date*] |
| **Liquidated Damages (clause 15.5(d))** | [*Specify the amount (rate) of Liquidated Damages that will be payable by the Supplier for a failure to complete the Transition In by the Transition In Completion Date. If left blank, no Liquidated Damages will apply.*] |

***Purchaser Inputs***

|  |  |
| --- | --- |
| **Details of Purchaser Inputs (clauses 1.1 and 15.6)** | *[Insert details of the Purchaser Inputs required]* |

**Fees**

[*Specify whether any fees apply in addition to the maximum Fees set out in the Price List. If left blank, the Fees in the Price List will be the only amount payable by the Purchaser for the provision of the Goods and Services.*]

**Payment Details**

|  |
| --- |
| Address for invoices:[*Specify the address to which invoices must be sent.*] |
| Method of payment:[*Insert details on the manner in which invoices must be paid, for example: cheque or EFT*] |

**Additional Information**

|  |  |
| --- | --- |
| **Clauses 5.4(a)(vi), 21.1(d)(B), 22.1(b) and 22.1(d) – Standards, policies and procedures and Laws (including security requirements)** | As set out in the Schedule 1 to this Purchase Order.[*If Schedule 1 is left blank, no additional standards, policies and procedures will apply beyond those set out in the Agreement and the Specifications.*] |
| **Clause 10.2 - Reporting on Service Level Requirements** | [*Specify requirements for reporting on Service Level Requirements*] |
| **Clause 14.3(c) - Partial Delivery** | [*Specify if partial delivery of the Goods and/or Services is acceptable.*] |
| **Clause 20.1(b)(x)(B) - Fitness for purpose warranty** | *[Specify particular purpose for which Goods will be used for the purpose of the Supplier's warranty. If left blank, the purpose for which the Goods would ordinarily be used will apply.]* |
| **Clause 31.3(c)(ii) - Privacy procedures** | [*Specify any applicable privacy procedures*] |
| **Clause 33.6 - Local Jobs First Policy** | [ ]  The LJF Policy is applicable to this Purchase OrderIf checked, the Supplier is required to comply with the LIDP provided by the Supplier as part of its response to this Purchase Order and the terms of Schedule 5 of the Agreement for the Supply of Multifunction Device and Printer Services.[ ]  The LJF Policy is not applicable to this Purchase Order |
| Contestable Items: [*Insert any contestable items if the LJF Policy applies to this Purchase Order*] |

**Quotation and Design Request**

**Request for Quote:**

|  |
| --- |
| [*Specify whether the Supplier must provide a quotation for provision of:** *the requested Goods or Services specified above (and as set out in the Catalogue) which specifies a volume discount or other form of reduction to the Fees. If such discounts or reductions are not available to all purchasing entities, the Lead Department's prior written consent is required; or*
* *any other printing goods and/or services not listed in the Catalogue.]*
 |

**Audit and Discovery:**

|  |
| --- |
| [*Describe any requirements for the Supplier's audit and discovery assessments]* |

**Solution Design:**

|  |
| --- |
| Solution Design Date: [*Insert the date for submission of the draft Solution Design to the Purchaser*] |
| [*Describe any requirements for the Solution Design other than those set out in the Specifications.]* |

**Schedule 1 to the Purchase Order**

**Applicable Standards, Policies, Procedures and Obligations**

**Part One - Standards**

[*Specify any Australian, New Zealand or other international standards which apply to the Supplier’s provision of the Goods and Services, including:*

* *environment sustainability standards; and/or*
* *applicable IT standards.*]

**Part Two – Policies, Procedures and Obligations**

[*List any applicable government policies and procedures that the Supplier must comply with in providing the Goods and Services. This may include policies, procedures and specific requirements and obligations relating to:*

* *access to the Purchaser's premises (OHS, conduct, etc.);*
* *police and/or security checks;*
* *security environment requirements;*
* *data security obligations; and*
* *applicable IT standards (change management etc).*]

**Schedule 2 to the Purchase Order**

**Acceptance Testing**

**Part A – Acceptance Tests**

[*Insert details of the Acceptance Test procedures that must be conducted by the Supplier.]*

*[Specify date of Acceptance for Goods and/or Services. If left blank, the date of Acceptance will be the Time for Delivery unless Acceptance Testing applies (see below). If Acceptance Testing applies, this section may specify that the date of Acceptance will be the date Acceptance Tests are successfully completed.]*

*[Is a written Acceptance Test report required to be submitted with the Certificate of Completion and Acceptance?]*

**Part B – Certificate of Completion and Acceptance**

*[Where Acceptance Test procedures are specified in Part A above, insert the Certificate of Completion and Acceptance, which must:*

* *state that the Goods and/or Services have been tested in accordance with, and meet, the Services Description or Specifications (as applicable) and any specified criteria for those Goods and/or Services;*
* *indicate the actual date of completion;*
* *unless otherwise specified in this Purchase Order, enclose a written Acceptance Test report specifying a summary of the Acceptance Tests conducted and the results of those Tests; and*
* *be signed by an Authorised Representative of the Purchaser.]*

**Schedule 3 to the Purchase Order**

**Solution Design**

*[Insert final Solution Design if a Quotation and Design Request was submitted]*

**Execution Page – Purchase Order**

|  |  |  |
| --- | --- | --- |
| **Signed, sealed** and **delivered** by a duly authorised representative for and on behalf of *[insert Purchaser name]* |  |  |
| Authorised representative signature |  | Witness signature |
| Name of authorised representative (print) |  | Name of Witness (print) |
| Position of authorised representative (print) |  | Address of Witness (print) |
| Date |  | Date |

|  |  |  |
| --- | --- | --- |
| Signed, sealed and delivered by [insert Supplier details] (ABN [insert]) in accordance with section 127 of the *Corporations Act 2001* (Cth): |  |  |
| Company Secretary/Director signature |  | Director signature |
| Name of Company Secretary/Director (print) |  | Name of Director (print) |
| Date |  | Date |