

Request for Increased Delegation of Procurement Authority (IDPA)

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| **A. GENERAL INFORMATION** |
| 1. Requesting Business Unit |       | 2. RR/Head of BU name |       |
| 3. Date of request | Select date | 4. Signature of Head of BU |  |
| 5. Requested IDPA | Choose an item. | 6. Current DPA | Choose an item. | 7. Current IDPA Expiration Date*(if applicable)* | Select date |
| 8. IDPA limitation | [ ]  Entire BU[ ]  Geographical Area \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Specific Project/Programme \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 9. Justification and Need for IDPA | [ ]  Extension of current IDPA[ ]  New Project coming on stream | [ ]  Crisis or Emergency[ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 10. Brief Justification Details*Attach any relevant documents* |  |  |
| 11. Is this request also for the increase of the Micro-puchasing threshold from USD5,000 to USD10,000 | [ ]  Yes [ ]  No If yes, please provide justification below |
|       |
| **B. FINANCIAL AND PROCUREMENT DATA**  |
| 12. Annual Financial Delivery of the Office  |
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| --- | --- | --- |
| Year | Total delivery incl. procurement | Total Procurement Volume |
| Past fiscal year [actual] | USD       | USD       |
| Current fiscal year [target] | USD       | USD       |

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| 13. Number of Purchase Orders/Contracts issued during last 12 months  |
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| --- | --- | --- |
| Value of contract/POs [USD] | Number of Contracts/POs | Use Quantum query UN\_PO\_TRACKING\_DETAILS\_IPSASEnter query run dates:From Select date to Select date |
|  50,000 - 150,000 |        |
| 150,001 - 300,000 |        |
| 300,001 – 500,000 |        |
| 500,001 – 1 million |        |
| Above 1 million |        |

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| 14. Estimated number of submissions and value as per Procurement Plan  |
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| --- | --- | --- | --- | --- | --- |
| Contract Type | $50K – $150K | $150K – $300K | $300K – $500K | $500K – $1M | Above $1M |
| *#* | *Value ($)* | *#* | *Value ($)* | *#* | *Value ($)* | *#* | *Value ($)* | *#* | *Value ($)* |
| IC |   |  |   |  |   |  |  |  |  |  |
| Professional Services |   |  |   |  |   |  |  |  |  |  |
| PO/Contract for Goods |   |  |   |  |   |  |  |  |  |  |
| Contract for Works |   |  |   |  |   |  |  |  |  |  |
| Lease Agreement |   |  |   |  |   |  |  |  |  |  |
| **TOTAL** |  |  |  |  |  |  |  |  |  |  |

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| **C. PROCUREMENT STAFF AND OVERSIGHT RESOURCES**  |
| 15. List of Procurement Officers [buyer role] – *Please list the Head of Procurement first* |
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| Name  | Title | Contract Type and Grade | Highest CIPS Certification Level |
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| 16. Current CAP Composition  |
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| --- | --- | --- | --- |
| Role | Name | Title | Grade |
| CAP Chairperson |   |   |  |
| Alt. CAP Chairperson |   |   |  |
| CAP Secretary |   |   |  |
| Alt. CAP Secretary |   |   |  |
| CAP Member |   |   |  |
| CAP Member |   |   |  |
| CAP Member |   |   |  |
| CAP Member |   |   |  |
| CAP Member |   |   |  |
| CAP Member |   |   |  |
| CAP Member |   |   |  |
| CAP Member |   |   |  |

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| **D. OTHER INFORMATION**  |
| 17. List the existing LTAs set up by BU |
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| --- | --- | --- |
| Description | Duration | Ceiling Value  |
|  | From Select date to Select date | USD       |
|  | From Select date to Select date | USD       |
|  | From Select date to Select date | USD       |
|  | From Select date to Select date | USD       |
|  | From Select date to Select date | USD       |
|  | From Select date to Select date | USD       |
|  | From Select date to Select date | USD       |

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| 18. Use of E-Tendering  |
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| --- | --- |
| Does BU use E-tendering  | [ ] Yes[ ] No |
| Since when E-Tendering is used/will be used (month/year) |  |
| Minimum value threshold for use of E-tendering  | USD       |

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| 19. Details of Contract Management and Monitoring measures implemented by BU |
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| 20. Latest Audit Rating  |
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| --- | --- | --- |
| Type of Audit | Year of Audit | Audit Rating |
| Country Office  |  | Choose an item. |
| Procurement Function  |   | Choose an item. |
| Specific comments related to Procurement function in Audit report and corrective actions implemented by the CO: |
|       |

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Completed and signed Request for Increased Delegation of Procurement Authority form along with the detailed Procurement Plan and other supporting documents as appropriate should be submitted to respective Regional Chief Procurement Officer with a copy to respective Regional ACP Chairperson and Heorhiy Bilyy, ACP Focal Point.