

DEPARTMENT OF COOPERATIVE COVERNANCE, HUMAN SETTLEMENTS & TRADITIONAL AFFAIRS

Logged By:

Masipa M.A

Card Number:

ICT INFRASTRUCTURE

015-284-5591

		INTRASTRO	CIUIL	
THE PARTY OF THE P		REQUEST FOR C	HANGE	
Data ha a and a p		Requestor De	etails	
Full Na	me Masipa M.A		Persal No:	84132540
Business U	Init: Systems Deve	elopment		
Telepho	one: 015 294 2138		Building:	28 Market
Cell Numb	per: 079 652 4113		Floor:	2 nd
To	wn: Polokwane		Office No:	2-62
		Details of the Chang	ge Request	
Da	ate 25/10/2018	website updates- Ar	nnual Report	
Outline your motivation for this in terms of impacts, risks and benefits.				
Additional information:				7
		Signatures		
DECLARATION BY E	EMPLOYEE: By signir	ng this form I confirm that t	the change is required for operation	onal business purpose.
	sition	Name	Signature	Date
Requester Inte	ern	Masipa M.A	Mass	25/10/2018
Approved by: Assistant Director		Mabuza M.T	Molec	The state of the s
Implemented by:			· · · · · · · · · · · · · · · · · · ·	
Verified by:	Director			