

**Integrated National Electrification Programme Grant (INEG)
Monthly Report as per the Division of Revenue Act**

The onus is on the municipality to confirm that the return has been received by NT

Municipality	NC073 Emthanjeni	Financial Year	2017/18
		Month End	M02 Aug

Financial Accounting for Grant Funds Received and Expended

	Rand
Received Prior Periods (Since Inception) - See Last Months Form	2 000 000
Received This Month	0
Total INEG Funds Received	2 000 000
Spent Prior Periods (Since Inception) - See Last Months Form	0
Spent This Month	749 000
Total INEG Funds Spent	749 000
Total INEG funds Received and Not Spent	1 251 000
Percentage of Funds Spent	37.45%
Funds Currently Committed but Not Spent	
Scheduled Transfers Withheld	

Conditions:

- Municipalities must contractually undertake to:
 - Account for the allocated funds on a monthly basis by the 10th of every month
 - Pass all benefits to end-customers
 - Not utilize the fund for any purpose other than electrification
 - Ring-fence funds transferred. Adhere to the approved electrification programme and agreed cash flow budgets
 - Ring-fence electricity function
 - Reflect all assets created under the Integrated national Electrification Program (INEP) on the municipal asset register; this is to assist the process for the formation of the REDS
 - Safety operate and maintain the infrastructure
 - Adhere to the labour intensive construction methods in terms of the Expanded Public Works Programme (EPWP) guidelines for activities such as trenching, planting of poles, etc.
- Register the master Plans for bulk infrastructure in terms of the INEP framework and to abide by the directives of the Department regarding the central planning and co-ordination for such bulk infrastructure. This is to maximize the economies of scale in the creation of bulk infrastructure affecting more than one municipality
- Use INEP funds for the refurbishment of critical infrastructure, only upon submission of a project plan which must be approved under a framework to be regulated by the Department.

(Print Name Below)

I, _____, The Accounting Officer or Delegate certify that the above information is correct and that this report has been submitted electronically as required.

Signed

Dated _____

To Save File press the following keys at the same time with Caps Lock off: Ctrl Shift S

Save file as: Muncde_INEG_ccyy_Mnn.XLS (e.g. GT411_INEG_2009_M01.xls)

Muncde = Municipality Code , ccyy = Financial Year End , Mnn = M01... M12