

**Appendix 1**

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|  | **MANAGEMENT PLAN** | ***Research Infrastructure Support Programme*** |
| **2011/12**  **Grant Year** | *NAME OF EQUIPMENT* | Revision: 1.6 |
| Issue date: October 2011 |

1. **Brief Description**

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| *Please describe the equipment briefly, including a list of all major components of the equipment.* |
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1. **Purpose**

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| *Please give a brief overview of what the equipment will be used for.* |
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1. **Required Services and Utilities**

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| *Please outline what services and utilities are required to operate the equipment? (e.g. compressed air, main electricity plus UP).* |
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1. **Required Infrastructure to house equipment**

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| *Please outline what infrastructure is required to properly house the equipment? (e.g. reinforced floor).* |
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1. **Safety and Security**

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| 1. *Briefly describe the steps you will take to ensure operator safety. Refer to the OSH Act of 1993.* 2. *Describe the security systems deemed necessary to protect the equipment for deliberate and accidental damage, etc.* 3. *Name and qualifications of the safety officer.* 4. *Outline the plans for training on safety for managing this instrument.* |
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1. **Responsibility for Operation**

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| 1. *Who will be allowed to operate the equipment?) Either list names or describe types of people, e.g., senior researchers, post grad students.* 2. *Please submit the name and qualifications of the main operator.* 3. *Outline the plans for training to be received in terms of operating the equipment.* |
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1. **Training**

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| *What training will you offer to users at own institution and nationally?* |
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1. **Responsibility for Maintenance**

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| *Who will be responsible for the maintenance of the equipment? Please submit the name, qualifications and training of the person responsible for the maintenance of the equipment. (If this is to be outsourced a person from the host Institution must be made responsible for ensuring that this work is undertaken on time.)* |
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1. **Preventative maintenance schedule**

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| *Provide a detailed maintenance schedule. (This is normally provided by the supplier).* |
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1. **Log Book**

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| *Make provision for an instrument log book. All usage maintenance service and repairs are to be recorded in the log book.* |
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1. **Operating Cost Budget**

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| *Provide a detailed operating budget in a FORMAT similar to the table below.* | | | |
| ***Category*** | ***Item*** | ***Cost per month*** | ***Notes*** |
| **Salaries** | **Operator** | **R x1** |  |
|  | **Mechanic** | **R x2** |  |
| **Sub-total** |  |  |
| **Maintenance/**  **Service Contract** | **Service** | **R y1** |  |
|  | **Seals** | **R y2** |  |
|  | **Oil** | **R y3** |  |
| **Sub-total** |  |  |
| **Running** | **LOX** | **R z1** |  |
|  | **Sample bottles** | **R z2** |  |
| **Sub-total** |  |  |
| **Depreciation** | **Item 1** | **R d1** | **Over 5 years** |
|  | **Item 2** | **R d2** | **Over 3 years** |
| **Sub-total** |  |  |
| **Total** |  | **R lots** |

1. **Charge Out Rates**

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| *Please provide the charge out rates for a) Non-commercial users and b) Commercial users.* |
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1. **Approvals:**

**Proposed by Grantholder**

**Grantholder:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(name)

|  |  |
| --- | --- |
| **Date** | **Signature** |

**Institutional Support (Dean or equivalent)**

**Designated Authority: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(name)

|  |  |
| --- | --- |
| **Date** | **Signature** |

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**NRF ACCEPTANCE & APPROVAL**

**SPP Programme Director: Rakeshnie Ramoutar**

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| --- | --- |
| **Date** | **Signature** |

**Capacity & Strategic Platforms Grants Director: Anthipi Pouris**

|  |  |
| --- | --- |
| **Date** | **Signature** |

**Please note: The above acceptance and approval includes sign-off for Appendices 2 and 3 as well.**