SafiSan PCI Payment Voucher (CP4)

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|  | **PAYMENT VOUCHER ID:** |  |
|  |  | Linked to **CONSTRUCTION APPRAISAL ID:** |  |
| **1.** | **Information on the applicant** |
| 1.1 Date: | Day: |  | Month: |  | Year:  |  | 1.2 WSP office: |  |
| 1.3 Family name: |  | 1.4 First name: |  |
| 1.5 ID no.: |  | 1.6 Tel. no.: |  |
| **2.** | **Information on subsidies** |
| 2.1No. | 2.2 Toilet ID | 2.3 Toilet Type | 2.4 Appraisal | 2.5 Technically approved? | 2.6 Eligible for Subsidy | 2.7 Amount | 2.8 Remarks |
| New | Rehabilitated | 1st | 2nd | YES | NO | YES | NO |
| 1. |  |  |  |  |  |  |  |  |  | KSh |  |
| 2. |  |  |  |  |  |  |  |  |  | KSh |  |
| 3. |  |  |  |  |  |  |  |  |  | KSh |  |
| 4. |  |  |  |  |  |  |  |  |  | KSh |  |
| 5. |  |  |  |  |  |  |  |  |  | KSh |  |
| **2.9 Total subsidies to be paid?** |  | **KSh** |
| 2.10 Amount payable in words: |  |
|  |
| 2.11 Cheque No. |  | Date: |  |
| 2.12 Approval | Name: | Position | Signature | Date |
| Voucher Prepared by: |  |  |  |  |
| Voucher Examined by: |  |  |  |  |
| Voucher Authorized by: |  |  |  |  |
| Executive Authority by: |  |  |  |  |

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| --- | --- | --- |
| Debit Account Name | Account No. | Amount |
|  |  |  |
|  |  |
|  |  |
|  |  |
| Posted by |  | Date |  |
| Project |  | By |  |