
THE HEALTHCARE OTAGO CHARITABLE TRUST
Application For Capital Expenditure Funds
(For Items Exceeding \$5,000)
Central Otago Health Services Applicants only

1. Item requested:

Applicant's Name:

Department/Ward:

General Manager Name (please print):

General Manager Signature:

Date:

2. Chief Executive Endorsement:

CEO Name (please print):

CEO Signature:

Date:

COHSL Ref Number: / /

Capital Expenditure Details

1. Asset Name and Description:

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2. Reason Item Required (including a statement of benefits):

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3. Please let us know what areas and communities of Otago will benefit from this application

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4. Alternatives Considered (if any):

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5. Consequences of Not Funding:

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6. Total Cost including GST and installation costs (if any): \$.....

6.1 Other Sources of Funding Considered / Approved:

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7. Which one of the following Capex Prioritisation Criteria applies to this application? (please circle)

- Risk to patient and/or staff with potential to cause serious harm
- Compliance and/or statutory requirement
- Strategic initiative
- Disruption to service – unable to find alternative
- Disruption to service – able to find alternative
- Enhanced quality

8. Has this been considered by the Capital Approval Group?

Yes/No

Reason for being declined:.....
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9. Internal Endorsements (if required):
(Please Initial)

Product Evaluation (for all clinical equipment)

Biomedical (for all clinical equipment)

Information Systems (Computer & IT equipment and any type of software)

Facilities Management (Building works & repairs and any new construction)

Infection Control (Clinical equipment items requiring sterilisation, single-use items being re-used, food services equipment – ovens etc)

Occupational Health (only if OSH issues)

Email completed applications and supporting documentation to:



secretary@hcocharitabletrust.co.nz

OR



Secretary
The Healthcare Otago Charitable Trust
PO Box 5848
Dunedin 9058

Please note: Unless otherwise informed on this application, The HCOCT can include any grant information on their website.
<https://hcocharitabletrust.co.nz>

FOR OFFICE USE ONLY

Confirmed:

Date:

Amount approved: \$

SDHB code

Trust Fund:

Region applied to:

Dunedin	Alexandra	Balclutha	Cromwell	Kurow	Lawrence	Milton
Oamaru	Palmerston	Ranfurly	Roxburgh	Tapanui	Wanaka	Other
