

**Policy:** **Personal Computer Purchase Policy**

**Date Originally Approved:** **March 24, 2005**

**Motion:** *That Council approves Policy number 2005 – 20 “Personal Computer Purchase Program” as presented; and*

*Further that this Policy be effective immediately*

**Date Amended:** **April 27, 2006**

**Amendment:** *In the event the employee / Councillor pass away and have outstanding balances owing under this program, the outstanding balance will be written off.*

**Motion:** *That Council approves Policy number 2005 – 20 “Personal Computer Purchase Program” as amended.*

**Policy Number: 2005 – 20**

**Policy Subject: Personal Computer Purchase Program**

## **Policy Objective**

The objective of this policy is to facilitate the purchase of personal computers and related equipment for full time employees and elected officials. This policy is intended to promote the growth of computer literacy and computer skills throughout the organization thus enhancing the entire operation of the town.

## **Policy**

### **1. Terms**

- The Program will be in the form of an interest free loan.
- At no time shall the term of the loan exceed twenty four (24) months
- Payments shall be made bi-weekly in the case of employees and monthly for Councillors
- The maximum amount available for an individual purchase will be \$2,500.00

### **2. Application Process.**

- Employees / Councillors select a vendor and get quote
- A written request outlining the purchase is submitted to the CAO for approval. Once approval is granted, the employee / Councillor will be required to sign an “**Agreement for Purchase**” promissory note before the cheque requisition payable to the supplier is prepared.

### **3. Others**

- The employee / Councillor is responsible for all costs above \$2,500.00
- Only one loan will be authorized at any given time
- All manufacture’s warranty requirements are the responsibility of the employee.
- All service inquires concerning computer hardware and software are to be directly to the vendor and not to the Town staff.
- Employees who cease to be employed by the Town and have outstanding balances owing under this Program will be required to pay the remaining balance immediately. Failure to pay the outstanding balance may result in the Town taking legal action to recover the balance.

- In the event the employee / Councillor pass away and have outstanding balances owing under this program, the outstanding balance will be written off.

**Annotation for Official Policy Book**

Date of Notice to Council Members of

Intent to consider: April 13, 2006

Date of Passage of Current Policy: April 27, 2006

I certify that this was adopted by Council as indicated above.

\_\_\_\_\_  
CAO / Clerk

April 27, 2006  
Date

P.O. Box 8  
Stewiacke, NS  
B0N 2J0



Tel: (902) 639 – 2231  
Fax: (902) 639 - 2221

Email: town@stewiacke.net

---

## Councillor / Employee Computer Purchase Program 2005

(Please complete and return to Sheldon Dorey)

NAME: \_\_\_\_\_

POSITION / TITLE: \_\_\_\_\_

I wish to apply to take part in the Computer Purchase Program. The items I would like to purchase, as well as an estimate of their costs are listed below:

Items to be purchased (Example: Computer System, Printer)	Cost Estimate
_____	-\$
_____	-\$
_____	-\$
_____	-\$
_____	-\$
_____	-\$
<b>Total cost of products</b>	-\$

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Applicants Signature: \_\_\_\_\_

Signature of CAO: \_\_\_\_\_

Date: \_\_\_\_\_

P.O. Box 8  
Stewiacke, NS  
B0N 2J0



Tel: (902) 639 – 2231  
Fax: (902) 639 - 2221

Email: town@stewiacke.net

---

## AGREEMENT FOR PURCHASE

NAME: \_\_\_\_\_

POSITION / TITLE: \_\_\_\_\_

I hereby acknowledge receipt from the Town of Stewiacke an advance under the computer purchase program equal to the total purchase price of \$\_\_\_\_\_ (*including H.S.T.*) for computer equipment purchased on my behalf from \_\_\_\_\_ (*the company from whom I have chosen to purchase*).

I agree to repay the Town of Stewiacke through payroll deductions to commence no later than \_\_\_\_\_, in equal instalments of \$\_\_\_\_\_, over a period of \_\_\_\_\_ months, sufficient monies to pay off the debt no later than \_\_\_\_\_.

**(All employees reserve the right to repay the debt in full before the term is up without penalty.)**

If I should terminate my employment/term of office with the Town of Stewiacke prior to full repayment of this debt, I agree to repay the remaining indebtedness immediately upon termination.

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature of CAO: \_\_\_\_\_