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| Shared Prosperity Fund: North WalesProject Change Request (from 1 September 2024) |
| Mae’r ffurflen hon hefyd ar gael yn Gymraeg. |

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| **GUIDANCE:**All material changes to a project funded Shared Prosperity Fund: North Wales (SPFNW) must be authorised via approval of a ’Project Change Request’ (this form). Examples of material changes include (the list is not exhaustive):* Any change to the value of SPF funding requested (overall project value and/or the capital / revenue distribution).
* Any change to the project end date or a delay of more than 4 months against the milestones stated in Annex B of the approved application appended to the signed Grant Funding Agreement.
* Any change to the source or amount of match funding.
* Any change in ownership of the grant recipient organisation or the removal or addition of delivery partners.
* A change to the project objectives, activities or strategic fit which are likely to mean that you are unable to continue with the project.
* A change to the financial profile within Annex B of the approved application appended to the signed Grant Funding Agreement, e.g. a virement between expenditure headings, which exceeds (including cumulatively) 20% of the budget line or £50,000 (£100,000 for projects delivering across more than one Local Authority area), whichever is smallest)
* A reduction or increase of 20% or more in outputs and/or outcomes.
* Changes to the outputs/outcomes specified within Annex B of the approved application appended to the signed Grant Funding Agreement.

Minor administrative changes (not listed above and those which have no effect on the Grant Funding Agreement) can be requested and approved via email. Contact the Local SPF team in the first instance. |
| Note, that all Project Change Requests are not automatically approved. You must discuss any proposed changes in advance with the relevant SPF team BEFORE submitting a request. Local Authorities are not obliged to permit any changes. Local Authorities will assess your request before submitting it to SPFNW for consideration and processing. Every request will be reviewed thoroughly before a decision is made. All decisions are final. |
| Provide complete and accurate information to describe each change proposed. Incomplete information will cause delays in processing your request.Claims for funding may be put on hold while a Change Request is being considered. You will be formally notified of the outcome of any significant change request within 30 calendar days of its submission to the SPF Regional Team. Authorised Change Requests will be by means of a letter of variation to the signed Grant Funding Agreement. This may include revised Grant claim submission deadlines.   |

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| Shared Prosperity Fund: North WalesProject Change Request  |
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| Project Name: |  |
| Project Ref: |  |
| Grant Recipient: |  |
| Local Authority Area(s): |  |

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| **SECTION 1 - CHANGE DESCRIPTION** Please list **ALL** the changes you propose to make to the project and explain how it differs from the approved application appended to the signed Grant Funding Agreement. (The description must be consistent with your response to Section 4.)  |
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| **SECTION 2 - REASON FOR CHANGE**Explain why each change is necessary. Refer to any current or anticipated challenges and their effects on the project. If you propose to extend the project’s end date, explain why granting more time will mitigate a risk of underperformance (in terms of spend and/or results) or enable additional outputs/outcomes to be achieved.  |
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| **SECTION 3 - CHANGE TO PROJECT END DATE**If applicable, specify your proposed revised project end date. Explain what arrangements are in place to enable project activities to continue to this date. Consider all project risks. **Any request must be for the shortest time necessary and not beyond 31 March 2025. Requests will be considered on a case-by-case basis and only granted by exception and in the context of SPFNW as a whole.**  |
| Proposed project end date =  |
| **SECTION 4 - IMPACT OF CHANGE ON ANNEX B OF APPROVED APPLICATION**Your proposed change may require an adjustment to the Annex B of the approved application appended to the signed Grant Funding Agreement. **If you answer Yes to any of the questions below, you must submit an updated Annex B with your Change Request.**  |
| 1. **Does your proposed change impact the project end date, delivery plan, or project milestones?**

If Yes, please update the ‘Delivery Plan and Milestones’ tab on your Annex B. | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change impact the project’s Investment Priorities and or Intervention descriptions?**

If Yes, please update the ‘SPF Interventions’ and ‘SPF Financial Breakdown’ tabs on your Annex B. | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change impact the choice of Outputs selected or the Outputs target values for the project?**

If Yes, please update the ‘SPF Outputs’ tab on your Annex B. | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change impact the choice of Outcomes selected or the Outcomes target values for the project?**

If Yes, please update the ‘SPF Outcomes’ tab on your Annex B. | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change impact the value of UKSPF grant requested or the value and source of match funding?**

If Yes, please update the ‘Funding Profile’ tab on your Annex B. | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change impact the project expenditure profile, i.e. the total value per intervention and choice of cost headings?**

If Yes, please update the ‘Expenditure Profile’ tab on your Annex B.  | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change impact the project financial breakdown, i.e. the value of capital and revenue per intervention?**

If Yes, please update the ‘SPF Financial Breakdown’ tab on your Annex B. | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change impact the project procurement plan and the procurement activities to be undertaken?**

If Yes, please update the ‘Procurement Plan’ tab on your Annex B. | Yes[ ]  | No[ ]  |
| 1. **Does your proposed change create new project risks or help mitigate existing project risks?**

If Yes, please update the ‘Risk Register’ tab on your Annex B. | Yes[ ]  | No[ ]  |
| Please ensure that the change description you provide in Section 1 is consistent with the answers provided above.  |

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| **SECTION 5 - IMPACT OF CHANGE ON MONTHLY EXPENDITURE PROFILE** Show the impact of the proposed change on the project’s planned expenditure per month for the remainder of the project. If you propose to extend the project end date, complete the rows for January, February and March 2025 as applicable.  |
| **Month**  | **Match** **Funding** | **UKSPF Capital Grant** | **UKSPF Revenue Grant** | **Monthly** **Total** |
| July 2024 | £ | £ | £ | £ |
| August 2024 | £ | £ | £ | £ |
| September 2024 | £ | £ | £ | £ |
| October 2024 | £ | £ | £ | £ |
| November 2024 | £ | £ | £ | £ |
| December 2024 | £ | £ | £ | £ |
| January 2025 | £ | £ | £ | £ |
| February 2025 | £ | £ | £ | £ |
| March 2025 | £ | £ | £ | £ |
| **SECTION 6 – IMPACT OF CHANGE ON ANNEX 5 - SPECIAL CONDITIONS** Your proposed change may impact the special conditions set by the local authority in Annex 5 – Special Conditions, of the signed Grant Funding Agreement. The local authority will discuss any new special conditions with you during their assessment of your change request.**The Grant Recipient shall comply with the conditions set by the local authority.** |
| Has the local authority informed you that new special condition(s) will be added to Annex 5 of your grant funding agreement?  | Yes[ ]  | No[ ]  |
| If Yes, specify the new special condition(s) set by the local authority:   |

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| **SECTION 7 – DECLARATION**  |
| By signing this document:* I confirm that I have discussed this change request with the relevant SPF team (local authority or SPFNW for projects supported by more than one authority), and I have the authority to submit a change request on behalf of the Grant Recipient.
* I understand that a new Grant Claim Instalment Period may be prescribed for the remainder of the project and the Grant Recipient will receive such notification in writing.
* I understand that the Authority (Cyngor Gwynedd on behalf of SPFNW) reserves the right not to pay any Grant Claim which is not submitted within the period specified in the Instalment Period and reserves the right not to pay any Grant Claim (or to only pay part of any Grant Claim), which is incomplete, incorrect or submitted without the full supporting documentation.
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| **Signed** |  | **Name** |  |
| **Position** |  | **Date** |  |

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| **For Completion by the LOCAL SPF TEAM** |
| 1. Are you satisfied that Section 1 accurately describes all the proposed changes?
 | Yes[ ]  | No[ ]  |  |
| 1. Are you satisfied with the reasons for change provided in Section 2?
 | Yes[ ]  | No[ ]  |  |
| 1. Are you satisfied that the new proposed project end date is essential and for the shortest time necessary?
 | Yes[ ]  | No[ ]  | N/A[ ]  |
| 1. Have you discussed the new proposed project end date with the SPFNW team?
 | Yes[ ]  | No[ ]  | N/A[ ]  |
| 1. Are you satisfied that the grant recipient will have the capacity to submit their final claim by the deadline?
 | Yes[ ]  | No[ ]  | N/A[ ]  |
| 1. Are you satisfied that the updated Annex B accurately reflects **ALL** the proposed changes?
 | Yes[ ]  | No[ ]  |  |
| 1. Are you satisfied that the updated Monthly Expenditure Profile for the remainder of the project is correct and realistic?
 | Yes[ ]  | No[ ]  |  |
| 1. Does Section 6 accurately reflect the position regarding the addition of special condition(s)?
 | Yes[ ]  | No[ ]  |  |
| **Decision** (If rejected provide reason) | **Approve / Reject** |
| **Decision made by** |  |
| **Decision date** |  |
| **Date submitted to SPFNW** |  |

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| **For Completion by the SPF NORTH WALES REGIONAL TEAM**  |
| **Status**  |  |
| **Status recorded by** |  |
| **Date** |  |