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**Notice of Variation**

**South Australian Disaster Resilience Grant**

**Purpose**

The Notice of Variation is used to formally request approval from the Grant Program Manager to vary agreed scope, milestone(s) or objectives of a funded project.

**Completing the Notice of Variation**

The Notice of Variation must detail why the variation is required and the anticipated implications of the variation. Formal approval for the variation ***must*** be given by the Grant Program Manager prior to its implementation. Advice will be provided to you following a decision.

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| **Project Title:** |  |
| **Project Number:** |  |
| **Variation Number:** |  |

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| 1. **Project Background (brief)** *(Information on project background, commencement and work to date.)* | | |
|  | | |
| 1. **Description of Variation**   *(provide a full description of the variation request and the basis/reasons for the change)* | | |
|  | | |
| 1. **Expected Outcomes and implications on proposed timelines** | | |
|  | | |
| 1. **Impact of Variation** | | |
| **Category** | **Proposed Variation** | **Impact of variation** |
| **Scope** |  |  |
| **Time** |  |  |
| **Cost** |  |  |
| **Quality** |  |  |
| **Risk Management** |  |  |
| **Operational Requirements** |  |  |
| **Project Tolerances** |  |  |
| **Current Solution** |  |  |
| **Communications** |  |  |

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| --- | --- | --- |
| 1. **New Proposed Milestone Overview:** | | |
|  | **Deliverables** | **New (proposed) Completion Date** |
| 1 | * 1. *i.e. Letter of Offer signed and received* | May 2019 (completed) |
| 2 | *2.1* |  |
| 3 | *3.1* |  |
| 4 | *4.1* |  |
| 5 | 5.1 i.e. *Final Report including Evaluation, Certificate of Compliance, Statement of Financial Expenditure and Finance report or summary for all costs incurred for the Project* |  |

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| --- | --- |
| 1. **Certification** | |
| We certify the details contained in this request for Variation are correct as at the date of signature. | |
|  |  |
| **Project Manager** | **Authorising Officer** |
| **Title:** | **Title:** |
| **Signature:** | **Signature:** |
| **Date:** | **Date:** |

**Please note:**

* **A request to extend a project beyond the original date of completion/acquittal indicated in the Funding Agreement, is regarded as exceptional and may require approval of the Chief Executive SAFECOM.**
* **Projects approved in 2018/19 cannot be extended beyond 12 months for completion including acquittal.**

**\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\* SAFECOM Office Use only\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\***

**Grant Program Manager Decision on Notice of Delay**

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| 1. **Grant Project Manager’s Recommendation** *(indicate whether you support the variation and if so, subject to what conditions or if you recommend that other options be considered)* |
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| 1. **Decision / Authorisation** *(Grant Program Manager to record decision on variation)* |
| Approved / Not Approved |

**Grant Program Manager**: --------------------------------------

**Date: ----/----/-----**