  

**Change Request Form**

*(Version GXF/4 – updated 28th June 2023)*

**GAL XLOKK FOUNDATION (GXF)**

269, Main Street,

Qormi(Malta)

Telephone: (+356) 2099 8008

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**Scope**

Beneficiaries of M19.2 under the Rural Development Programme (excluding AECM and ANC) are requested to use this form to submit a request for changes to their Grant Agreement. In line with article 60 (2) of Regulation (EU) No 1305/2013, expenditure can only be considered eligible if it has been completed after an application has been submitted to the GAL XLOKK Foundation. Any such expenditure incurred by the beneficiary without the formal approval will not be reimbursed. No Change Request will be accepted if such request is submitted after the project expires.

**a change request and hence a pre-notification to the GXF is required** when:

1. There is a change altering the scope1 (e.g change in square metres of a surface, cubic metres in the capacity of a reservoir, surface area, type of materials to be used, change in professional fees, change in number or power output (KWs) of PVs, change in machinery, etc.) (This applies in all circumstances and measures), and/or;
2. There is a change in quantity of works in the most representative works item2 which exceeds 15%, occurring for a particular IACS line item.

In the case of works **a change request is not required** when:

1. The scope of the project (e.g change in square metres, cubic metres, surface area, type of materials to be used, change in professional fees, change in number or power output (KWs) of PVs, change in machinery, etc.) is not altered from what was agreed upon in the Grant Agreement, and/or;
2. The change in quantity of works in the most representative works item3 occurring for a particular IACS line item does not exceed 15%.

All other cases not outlined in the above scenarios (requesting additional funds, requesting an extension to the project, shift of funds between line items within the same grant, use of savings, requests for amendments in project scope etc.) remain subject to a change request submission.

No such change request may be submitted and hence possibly approved if the request is received after the change has been incurred.

**Instructions**

Beneficiaries should ensure that they fill in the latest version of the Change Request Form available for download from our website. The GAL XLOKK Foundation will only accept the latest version available at the time of submission.

**Please fill in this document in electronic format, before printing it.**  The completed form along with any supporting documentation should be e sent via email on: info@galxlokk.com. In cases where a scanned copy cannot be sent via e-mail, the beneficiary is invited to either submit the documentation by post at 269, Main Street, Qormi or hand in the documentation at the same address.

For further information regarding the Xlokk Local Development Strategy for the LEADER Programme 2014-2020, visit the website of the GAL XLOKK Foundation at www.galxlokk.com

**Section 1: Change Request Form**

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| 1. **Project Title**

*Please provide the title as submitted in the original Application Form* |
|   Please write here    |

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| 1. **Grant Agreement number**
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|   Please write here  |

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| 1. **Is this your first change request? If *no,* please indicate the date(s) of your previous change requests.**
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|  Please write here  |

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| 1. **Please provide the reason (s) for this requested change**
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|  Please write here     |

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| 1. **Briefly describe the requested change**
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|  Please write here  |

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| **Has the Beneficiary considered any other alternatives to address the factors leading to this change request?** |
| **Mark with an ‘X’ where applicable** |
| YES | [ ]  |
| NO | [ ]  |
| **If yes, please describe briefly below:** |
|   Max 50 words    |

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| **What are the risks, if any, associated with the requested change?** *Please describe also how these risks will be mitigated* |
|    Max 50 words   |

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| **Please give an estimate of the resources and costs needed to implement the requested change (if applicable, refer to the Measure’s guidelines)** *If the values of the line items of the project costs will change, Annex 1 has to be completed.* |
|   Max 50 words    |

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| 1. **Please describe how the changes would impact the project’s outcome (if any)**
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|     Max 50 words  |

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| **In case of infrastructural investments as well as planting of trees, a site plan[[1]](#footnote-0) clearly indicating the exact location/point of the intervention is to be submitted (if applicable)***(Please refer to the particular ‘’Measure’s guidance notes’’* |
|  Max 50 words  |

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| 1. **Readiness**

*Does this modification require any additional permits from competent authorities?* |
| **Mark with an ‘X’ where applicable** |
| **YES**  | [ ]  |
| **NO** | [ ]  |
| ***If yes, what steps have been taken thus far by the beneficiary?*** |
|   Max 50 words    |

# Section 2: Signatures

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| The applicant undertakes to inform the GAL XLOKK Foundation of all changes affecting the activities as described in this form.The applicant allows the GAL XLOKK Foundation to make available and use all data provided through this form for the purposes of managing and evaluating the Rural Development Fund. All personal data collected for the purpose of this project shall be processed in accordance with Regulation (EU) No. 2016/679.Data subjects may, on written request, gain access to their personal data. They should address any questions regarding the processing of their personal data to the GAL XLOKK Foundation. Data subjects may lodge a complaint against the processing of their personal data with the European Data Protection Supervisor at any time. |
| **Authorised signatory of the applicant organisation:** |
| Name and surname of Project Leader[[2]](#footnote-1)*IN BLOCK LETTERS* | *Please type here* | Signature:(+ stamp of the applicant if available) |  |
| Designation | *Please type here* |
| CEO / Head of Applicant OrganisationLegal Representative of the Organisation*IN BLOCK LETTERS* | *Please type here* | Signature:(+ stamp of the applicant if available) |  |
| Designation | *Please type here* |
| Name and surname of Permanent Secretary[[3]](#footnote-2)*IN BLOCK LETTERS* |  | Signature:(+ stamp of the applicant if available) |  |
| Designation |  |

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| --- | --- |
| Name of Entity or Organisation (where applicable) |   Please type here    |
| Beneficiary e-mail address |   Please type here    |
| Date of Change Request |   Please type here    |

# Section 3: For office use only

## **Decision**

**[ ]** Approved

[ ]  Rejected

[ ]  Additional information needed

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| **Notes related to decision where applicable:** |
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| Name (for GAL XLOKK Foundation) |  |
| Signature |  |
| Date |  |

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| Reference number |
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| Annex 1 - Project Costs and Implementation |
| The amount of each component is to be included under the year in which the investment is expected to be operational. **Here one needs to insert details of components, which have either:*** **Been removed from original application, OR**
* **Newly introduced, OR**
* **The value or quantity has changed**
 |
| ***Investment line item*** | ***Qty/units*** | ***Quotation/******BOQ ref. No*** | ***Euro (€)*** |
|  | **Nth Year[[4]](#footnote-3)** | ***N + 1*** | ***N + 2*** |
| ***Year*** | ***Year*** | ***Year*** |
| ***Line item number*** |  |  | ***Amount excl. VAT*** | ***VAT amount*** | ***Amount excl. VAT*** | ***VAT amount*** | ***Amount excl. VAT*** | ***VAT amount*** |
| *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* |
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| *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* | *Please type here* |
| ***Total Net Amount*** | *Please type here* |
| ***Total Project Cost including VAT*** | *Please type here* |

1. The most recent orthophoto from the Planning Authority (PA) or similar imagery should be used. Interventions are to be clearly indicated with an adequate legend. [↑](#footnote-ref-0)
2. 3 The **Project Leader** is the person responsible for the implementation of the project and has the authority to take decisions during the course of implementation. The Project Leader must be from the applicant organisation, who may be recruited for the duration of the project including its closure and cannot be an appointed external body. This is required since the Project Leader carries the overall financial and legal responsibility for the implementation of the project and hence, his/her direct association with the Beneficiary organisation is fundamental, especially with a view to ensure that the grant will be used exclusively for the purpose stipulated in the project proposal. There shall be only **ONE** Project Leader responsible for the whole project, even if the project is composed of different components. In such cases, informal arrangements should be made to co-ordinate the different components. [↑](#footnote-ref-1)
3. 4 In case of public sector organisations, including Local Councils, as from 24th October 2019, the signature of the respective Permanent Secretary is required on the form.. [↑](#footnote-ref-2)
4. N represents the starting year of the project [↑](#footnote-ref-3)