Joint Schedule 2 (Variation Form)

This form is to be used in order to change a contract in accordance with Clause 24 (Changing the Contract)

	Contract Details	
This variation is between:	Star Avenue, Swindon, Wilts. SN "Contracting Authority") And Sanderson Government and Down House, 54A Whiteladies	o UK SBS, Polaris House, North I2 1UH ("the Authority" efence Limited, First Floor Clifton Road, Clifton, Bristol, BS8 2N
	("the Supplier")	
Contract name:	THE SUPPLY OF NON CLINICAL TEMPORARY AND FIXE TERM STAFF RM6160 FRAMEWORK CALL OFF ("the Contract")	
Contract reference number:	CS21548	
	Details of Proposed Variation	
Variation initiated by:	UKRI Extension of Worker/assignment	
Variation number:	001	
Date variation is raised:		
Proposed variation	To extend the end date of the worker/assignment from 28th October 2022 until 23th February 2024	
Reason for the variation:	To extend the worker/assignment.	
An Impact Assessment shall be provided within:	N/A	
	Impact of Variation	
Likely impact of the proposed variation:	None	
	Outcome of Variation	
Contract variation:	This Contract detailed above is v	raried as follows:
Contract variation:	/ PMO Planne Start Date: 31st Octol End Date shall be extended to:	er ber 2021 23rd February 2024
	Day Rate @ £ ex VAT and additional working days = £164,085.75 excluding VAT The total contract variation shall not exceed £164,085.75 excluding VAT.	
Financial variation:	Original Contract Value:	£123,680.25
	Additional cost due to variation -001:	£164,085.75
	New Contract value:	£287,766.00

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- 1. This Variation must be agreed and signed by both Parties to the Contract and shall only be effective from the date it is signed by Contracting Authority.
- Words and expressions in this Variation shall have the meanings given to them in the Contract.
- 3. The Contract, including any previous Variations, shall remain effective and unaltered except as amended by this Variation.

Signed by an authorise	ed signatory for and on behalf of the Contracting Authority
Signature	
Date	
Name (in Capitals)	
Address	
Signed by an authorise	ed signatory to sign for and on behalf of the Supplier
Signature	
Date	
Name (in Capitals)	
Address	