

Joint Schedule 2 (Change Forms)

GIGABIT INFRASTRUCTURE SUBSIDY

OFFICIAL - SENSITIVE

COMMERCIALLY SENSITIVE - NOT FOR WIDER DISTRIBUTION

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These Change Forms are to be used in order to change a Contract in accordance with Clause 48 (Changing the Contract Procedure). Words and expressions in these Change Forms shall have the meanings given to them in the Contract.

Part 1 - Change Request

CHANGE REQUEST	
CONTRACT NO:	[Please state]
CHANGE NO:	[Please state]
DATE RAISED:	[Please state]
CHANGE INITIATED BY:	[Please state Authority or Supplier]

DESCRIPTION OF THE PROPOSED CHANGE:

[Please state]

[Where the change relates to a permitted de-scope under Clause 4.1(b), the description should include (but not be limited to) the following details:

Technical – detailed explanation of why the premises are to be de-scoped, including sufficient detail to support understanding of whether these premises require an alternative technology or whether the de-scope relates to an operational/commercial/finance issue.

Operational – detailed explanation of why the premises cannot be delivered, with comprehensive detail of the issue, impact analysis and maps to explain barriers and any potential operational options/opportunities.

Financial – cost impact analysis for the structures concerned with details of commercial viability issues, funding implications, potential funding risk mitigations, unders/overs between call-offs, incremental funding options etc.]

FAST TRACK	[Yes/No]
CHANGE	
PROCEDURE	
PROPOSED IN	

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RELATION TO CHANGE?	
CHANGE IMPACT ASSESSMENT ESTIMATE TO BE PROVIDED WITHIN:	[Authority to state period within ten (10) Working Days of the date of the Change Request / Not applicable]* * Change Impact Assessment Estimate is only required to be provided by the Supplier where the Authority issues the Change Request
CHANGE IMPACT ASSESSMENT TO BE PROVIDED WITHIN:	[Authority to state period]
PROPOSED DATE FOR CHANGE:	[Please state]
SUBMITTED TO:	[Please state]
REQUESTING PARTY:	[Please state]
SIGNED:	
NAME:	
DATE:	[Please state]
	[Please state]

Part 2 – Change Impact Assessment

CHANGE IMPACT ASSESSMENT		
CONTRACT NO:	[Please state]	
CHANGE NO:	[Please state]	
SUPPLIER'S CHANGE IMPACT ASSESSMENT:		
Descriptive summary:	[Please state]	
Proposed drafting Changes:	[Please state]	
Proposed change to the Average Connection Life (if	[Please state]	
applicable): Details of the impacts of proposed Changes:	[Please state]	
Details of impact on risk, reward and liability:	[Please state]	
Compliance with applicable Change in Law:	[Please state]	
Reasonable level justification and evidence:		
SUBMITTED TO:	[Please state]	
SUPPLIER:	[Please state]	

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	[Please state]
NAME:	[Please state]
DATE:	

Part 3 – Change Authorisation Note

CHANGE AUTHORISATION	
CONTRACT NO:	[Please state]
CHANGE NO:	[Please state]
FINANCIAL VARIATION	
ON BEHALF OF THE SUPPLIER SIGNED:	
NAME:	[Please state]
DATE:	[Please state]
ON BEHALF OF THE AUTHORITY SIGNED:	
NAME:	[Please state]
DATE:	[Please state]

The Contract, including any previous Changes, shall remain effective and unaltered except as amended by this Change.