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:	UK Research and Innovation ("Contracting Authority")	on (UKRI) ("the Authority"
	And	
	iO Associates (a trading division of Precision Resource Group	
	Limited) ("the Supplier")	
Contract name:	THE SUPPLY OF NON CLINICAL TEMPORARY AND FIXED TERM STAFF RM6160 FRAMEWORK CALL OFF ("the Contract")	
Contract reference number:	CS21539	
Details of Proposed Variation		
Variation initiated by:	Contracting Authority	
Variation number:	001	
Date variation is raised:		
Proposed variation	To extend the original contract end date.	
Reason for the variation:	To extend the temporary worker's original contract from to	
An Impact Assessment shall be provided within:	N/A	
Impact of Variation		
Likely impact of the proposed variation:	Low	
Outcome of Variation		
Contract variation:	This Contract detailed above is v	aried as follows:
	(PMO Analyst):	
	The contract duration will now cover	
	Start Date: 12th October 2021	
	Contract end date shall be exten	ded to 31st March 2023
The contract will cover an additional working days @ £ ex VAT. Total Contract Value = £151,340.00 ex. VAT.		nal working days @ £ 2151,340.00 ex. VAT.
Financial variation:	Original Contract Value:	£47,705.00 ex VAT.
	Additional cost due to variation:	£103,635.00 ex VAT.
	New Contract value:	£151,340.00 ex VAT.

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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.
- 2. 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 authorised signatory for and on behalf of the Contracting Authority

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