

VARIATION REQUEST

Request to vary approved grant

Return completed form and supporting documentation to QFES Grants by **30 April 2021**

- Refer to your copy of the original application when completing this form.
- Complete this document if seeking a variation to your agreement.
- Include copies of any relevant documentation when submitting (not mandatory).

ID Number

Local Government

SES Unit/Group

Subsidy Amount

Project Title

Variation

Accommodation

Vehicle

Project Scope

Describe:

Completion Date

Original:

Revised:

Other

Describe:

Reason for Variation (Please provide a detailed description)

DECLARATION

- I declare that the information provided in this form is true and correct.
- I declare that I have the duly delegated authority to submit this variation on behalf of the Chief Executive Officer and Nominated Officer.

Declaration Officer

By checking this box I hereby agree to the above declaration

Title

First Name

Last Name

Date

Position

Ph

Mobile

Email

QFES USE ONLY

Accepted and Approved

Yes

No

Title

First Name

Last Name

Date

Position