

**PROJECT REFERENCE**

See attached Annex 1

**1. PROJECT**

**Programme**

East of Scotland Objective 2 Programme 2000-2006

**Priority**

2 Strategic Locations and Sectors

**Measure**

2.1 Strategic Locations and Sectors (Revenue)

**Project Title**

See attached Annex 1

**2. ORGANISATION**

**Project Applicant**

See attached Annex 1

**Contact Name**

Lynn Hamilton

**e-mail**

[REDACTED]

**3. PART ONE (DATA CAPTURE) – SECTIONS TO BE CHANGED**

Please mark the sections of the application that require to be changed.

<b>1. PROJECT</b>	<input type="checkbox"/>
<b>2. ORGANISATION</b>	<input checked="" type="checkbox"/>
<b>3. LOCATION</b>	<input type="checkbox"/>
<b>4. TIMESCALE</b>	<input type="checkbox"/>
<b>5. SUMMARY</b>	<input type="checkbox"/>
<b>6. FINANCIAL SUMMARY</b>	<input type="checkbox"/>
<b>7. ELIGIBLE COSTS</b>	<input type="checkbox"/>
<b>8. NON-ELIGIBLE COSTS</b>	<input type="checkbox"/>
<b>9. FUNDING PACKAGE</b>	<input checked="" type="checkbox"/>
<b>10. BANK ACCOUNTS</b>	<input checked="" type="checkbox"/>
<b>11. OUTPUTS</b>	<input type="checkbox"/>
<b>12. RESULTS</b>	<input type="checkbox"/>
<b>13. CLAIM FORM</b>	<input checked="" type="checkbox"/>

**4. TIMESCALE** (Please confirm all four key dates below)

**Date of Main Contract to be let**

See attached  
Annex 1

**Start Date**

See attached  
Annex 1

**Date of completion**

See attached  
Annex 1

**Date of financial completion**

See attached  
Annex 1

**5a. DETAILS OF CHANGE REQUESTED**

(Please attach supporting documentation where appropriate)

**REVISED INFORMATION**

**ORGANISATION :**

**ORGANISATION NAME:** THE SCOTTISH NETWORK 2 TOURIST BOARD

**ADDRESS:** OCEAN POINT ONE  
94 OCEAN DRIVE

**POSTCODE:** EDINBURGH  
EH6 6JH

**FUNDING PACKAGE**

**LEAD PARTNER:** THE SCOTTISH NETWORK 2 TOURIST BOARD

**PROJECT PARTNER:** VISITSCOTLAND

**PUBLIC SECTOR FUNDERS:** THE SCOTTISH NETWORK 1 TOURIST BOARD

**BANK ACCOUNTS**

**PROJECT PARTNERS NAME:** VISITSCOTLAND  
**BANK NAME:** BANK OF SCOTLAND  
**BANK ADDRESS:** 1 THE MOUND  
EDINBURGH  
EH1 1YZ

**ACCOUNT NAME:** SCOTTISH TOURIST BOARD  
**ACCOUNT NUMBER:** [REDACTED]  
**BANK SORT CODE:** [REDACTED]

**5b. JUSTIFICATION FOR CHANGE**

(Please attach supporting documentation where appropriate)

On the 1<sup>st</sup> of April 2005, the tourism agencies in Scotland will undertake a 2 stage process to facilitate the merger of the 14 Area Tourist Boards with the National Tourism Agency, VisitScotland.

The first stage will reduce the number of Tourist Boards to 2, Network Tourist Board 1 and Network Tourist Board 2. (A list of the areas to be covered by each NTB is attached)

The Network Tourist Boards will be funded and managed by VisitScotland until legislation is in place to abolish the Network Tourist Boards by 2008.

The Network Tourist Boards will be assuming all outstanding project funding commitments and liabilities made by the Area Tourist Boards on the 1<sup>st</sup> of April 2005.

**6. IMPACT OF CHANGES ON EXPENDITURE FORECAST**

Please complete this section to show how any changes to the approved project will impact on the expenditure forecast. This is essential information for managing N+2.

This section **must** be completed if the project:

- is declaring an underspend
- is requesting additional ERDF Grant
- is showing a reprofile of expenditure between calendar years

**6a. APPROVED EXPENDITURE PROFILE**

The Approved Expenditure profile is either the profile as detailed in your original application form or any subsequent amendment made to the profile and formally approved by the Programme Executive, e.g. submission of a previous Notification of Change Form.

	2000	2001	2002	2003	2004	2005	2006	2007	2008	TOTAL
<b>Eligible Project Costs</b>										
<b>Grant Award</b>										

**6b. FORECAST EXPENDITURE PROFILE**

When detailing your Forecast Expenditure Profile:

- the total Eligible Project Costs by Year must match the corresponding total by year in Section 7.
- the Eligible Project Cost total must match the total in Section 7.

	2000	2001	2002	2003	2004	2005	2006	2007	2008	TOTAL
<b>Eligible Project Costs</b>										
<b>Grant Award</b>										



**9. FUNDING PACKAGE**

This section **must** be completed if any co-financing arrangements or values for the project have changed.

**9.1 PUBLIC MATCH FUNDING**

Organisation	Eligible Contribution	Non Eligible Contribution	Total Contribution	Finance Confirmed?	Date Confirmed	Date Expected
				Yes / No		
				Yes / No		
				Yes / No		
				Yes / No		
<b>Total</b>						

**9.2 PRIVATE MATCH FUNDING**

Organisation	Eligible Contribution	Non Eligible Contribution	Total Contribution	Finance Confirmed?	Date Confirmed	Date Expected
				Yes / No		
				Yes / No		
<b>Total</b>						

**9.3 OTHER EUROPEAN FUNDERS**

Organisation	Eligible Contribution	Non Eligible Contribution	Total Contribution	Finance Confirmed?	Date Confirmed	Date Expected
				Yes / No		
				Yes / No		
<b>Total</b>						

**9.4 REVENUE**

Organisation	Eligible Contribution	Non Eligible Contribution	Total Contribution	Finance Confirmed?	Date Confirmed	Date Expected
				Yes / No		
<b>Total</b>						

**Totals and grant Required**

<b>Total Co-Finance</b>						
<b>Grant Required</b>						
<b>Total Funding</b>						

**10. BANK ACCOUNTS**

Where bank account details have changed for the project, these must be confirmed in writing. Notification of any changes should be made by the lead applicant to the Programme Executive in the form of a letter and signed by one of the project's designated signatories (as detailed on the Offer of Grant Acceptance).

**11. OUTPUTS**

Show the impact that the changes have made to the **PHYSICAL OUTPUTS** of the project.

Output	2000	2001	2002	2003	2004	2005	2006	2007	2008	TOTAL
<b>Total</b>										

**12. RESULTS**

Show the impact that the changes have made to the **INTERMEDIATE RESULTS** of the project.

Result	2000	2001	2002	2003	2004	2005	2006	2007	2008	TOTAL
<b>Total</b>										

**13. CHANGE TO UPLOADED CLAIM FORM**

Only complete this section when a change is required to a claim form that has its status set to **UPLOADED**. Changes to all other claims should be made through the on-line claims system.

**13a. DETAILS OF CHANGE**

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**13b. DECLARATION OF ELIGIBLE EXPENDITURE**

Approved Eligible Cost Item	Total Previous Claims	Declaration This Claim	Total Spend to Date
<b>TOTAL</b>			

**13c. FUNDING PACKAGE**

	Total Previous Claims	Total This Claim	Total Contribution
<b>Eligible Public Match Funding</b>			
<b>Eligible Private Match Funding</b>			
<b>Eligible Revenue</b>			
Total Finance			
Grant			
<b>TOTALS</b>			

**CERTIFICATION BY LEAD APPLICANT**

I certify that the information contained in this Notification of Change Form is correct, and that the above proposed changes conform to the appropriate European Structural Fund Regulations.

I can confirm that the Programme Management Executive will be informed immediately of any further significant changes to the project.

**Name of Certifying Officer**

**PHILIP RIDDLE**

**Position in Organisation**

**CHIEF EXECUTIVE**

**Signature of Certifying Officer**

**Date**

**27<sup>TH</sup> SEPTEMBER 2005**

**Please note:**

This form must be signed and dated, in **blue ink**, by a designated signatory for the project.

**FOR PME USE ONLY**

**TYPE OF CHANGE**

- Redistribution of Expenditure by Cost Item
- Request for Increase in Grant Request
- Notification of a Decrease in Grant Required
- Complete Project Decommittment
- Other

**PME COMMENTS / RECOMMENDATIONS**

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Approved by Programme Manager  Date

Authorised by Chief Executive  Date

<b>ACTION CHECKLIST</b>	<b>Date</b>	<b>Actioned by</b>
GM2 Updated		
Notification and Paperwork to Scottish Executive		
Revised Offer of Grant issued as appropriate		
Revised Acceptance of Grant received		
Revised Acceptance of Grant Scottish Executive		
Scottish Executive Managing Authority check GM2		