

Project Reference:

SECTION 1: SCHOOL DETAILS

School Name:

Project Title:

Account No.:

SECTION 2: COSTS BREAKDOWN

	Net Cost	VAT	Gross Total
Building Work			
Furniture, Fixtures & Fittings			
Consultancy Fees			
Planning Fees			
Insurance Fees			
Other Fees			
Sub Total			
Site Purchase, etc.			+
Total Project Cost			
Less LA Contribution			-
Less Governors 100% Contribution (<i>not including 10%</i>)			-
Less proceeds from sale of redundant premises			-
Net Cost Available for Grant Aid			
SCA Total (<i>in 100% terms</i>)			
DFC Total (<i>in 100% terms</i>)			
Other			
Total Grant Aided			

SECTION 3: CERTIFICATION

I/we certify that the information in this form is correct. I have personally inspected the building and project and certify that the works have been completed in accordance with that approved and that the work carried out complies with the current level of approval granted by Chester Diocesan Board of Education

The work was completed under my direction on (dd/mm/yyyy):

Signed on behalf of the School Building Consultants

or by a member of the governing body if the consultant has not been involved:

Signature:

Name:

Date:

Name of Firm:

Position: