



St Patrick's Day Small Grants Scheme Contract 2016
AGREEMENT ON USE OF THE GRANT

Between:

The North West Regional Drug & Alcohol Task Force

And:

Name of Service:	
Address of Service:	
Project Title:	
Funding Granted:	
Reference No:	For Office Use
Special Conditions include:	

Outline of the Agreement

This agreement begins when both parties sign the agreement and terminates 12 months from this date.

Time Framework of the Agreement

The agreement outlines the terms and conditions in relation to the grant awarded by the **North West Regional Drug & Alcohol Taskforce**. The successful applicant group hereby agrees to manage the grant allocated in accordance with the conditions and allocation of funding rules set out in this agreement and as per the original application.

Terms of Funding Payment

All payments made to the successful group under this agreement will be made in Euro when this agreement has been signed and returned.

The payment will be paid:

- Please ensure cheques are lodged within three working days of receipt
- Receipts/vouchers/invoices are to be provided for all purchases on completion of the project.
- Should the project not be delivered as agreed, the successful group agrees to refund the monies allocated for project activities.
- **The North West Regional Drug Alcohol Task Force** reserves the right to withhold any payment to the successful group to be made on the basis of this agreement, until the Group has provided all documentation required under this agreement.
- In the event of the project winding down, you must inform the **NWRDATF** before you dispose of any items purchased with this grant. This will allow the **NWRDATF** to check if any group may benefit from items purchased.

Eligible Costs:

Only the costs as specified in the Project Proposal and related to this agreement are eligible. Any other costs outside of this will be borne by the Centre.

Evaluation and Progress Reports:

The successful Projects will allow the designated **North West Regional Drug Alcohol Taskforce** Staff access to information on the project and to all documents relating to the technical and financial management of the project if necessary. A progress report will be required 12 months from the date of receipt of contract.

Monitoring will be included throughout the year.

Statements of Accounts:

The successful Centre is responsible for establishing a general system for keeping accounts. The Centre is also responsible for the administration and financial monitoring of monies in relation to this project. The Centre will provide **North West Regional Drugs Alcohol Task Force** with final accounts as part of the final evaluation.

Publicity and Information:

The **North West Regional Drug Alcohol Task Force** requires the successful Centre to acknowledge the financial support they have received through their grant application in any publicity material/Annual Reports etc in connection with this agreement.

Indemnity

The Centre hereby indemnifies the **North West Regional Drug Alcohol Task Force** against any claims arising in respect of this Agreement.

Both parties to the Agreement acknowledge their respective duties of care in respect of Safety, Health and Welfare at Work Act 1989 and any other relevant act pertaining to the nature of the particular project.

Insurance

The funded Centre will at their own expense organise as required Public Liability, Employers Liability etc for the duration of the project.

Amendments

Any amendments to this present agreement shall be made by way of written attachment signed by both the awarding body i.e. **North West Regional Drug Alcohol Taskforce** and the successful applicant Centre.

The **North West Regional Drug Alcohol Task Force** shall have the right to terminate this agreement in any of the following situations:

- If the Centre indicates that it cannot continue to implement the project
- If the Centre does not adhere to the obligations set out in the agreement
- If the Centre knowingly make fraudulent or false declarations of reports to the **North West Regional Drug Alcohol Task Force** or there is evidence of financial irregularities

I confirm that I have read and understand the terms and conditions as outlined in this agreement. Further to this I am authorised to sign this agreement for and on behalf of _____
(name of Project), **based on our Project acting in accordance with the conditions of grant aid.**

Signed: _____ **Date** _____
(On behalf of Project)

Position Held: _____

Signed: _____ **Date** _____
(On behalf of North West Regional Drug Alcohol Task Force)

Position Held: _____

Signed: _____ **Date** _____
(On behalf of North Regional Drug Alcohol Task Force)

Position Held: _____

PROJECT CONTACT DETAILS

Full legal name of the project:	
Short Name of the Centre:	
Official Registration No:	
Legal Status:	
Address of Registered Office:	
Telephone:	
Fax:	
Email:	
Bank Account of Centre:	
Main Contact for Centre:	
Position in Centre:	
Signature:	
Date:	

North West Regional Drug Alcohol Task Force

Certified by: (Block Capitals)	
Signature:	
Date:	

Projects Management Committee Members Names

1	_____
2	_____
3	_____
4	_____
5	_____
6	_____
7	_____
8	_____
9	_____
10	_____
11	_____
12	_____
13	_____
14	_____
15	_____