# **Appendix 4 - Contract Extension Form Template**

This template should be completed to demonstrate how the proposal meets business need, is affordable, achievable, has explored the appropriate options and is likely to achieve value for money/improvements in service.

Proposer Name	Service Area					
Proposer Name	Service Area					
Title	Role					
Contract Name and Ref	Service Provider	Value to Date				
Contract Type (Goods, Services or Works)	Procurement Route	Contract Start Date				
Extension Period and Value	Start Date	End Date				
2. Proposal						
Cive a brief description of the proposal						
Give a brief description of the proposal  This section captures, as clearly and succinctly as possible, what it is that's being proposed.						
3.Business Need						

Give a brief description of the business need that gives rise to this proposal

This section captures, as clearly and succinctly as possible, the need/gap/issue that gives rise to this proposal.

## 4. Options

Give a brief description of the options considered, their strengths and weaknesses, and highlight your recommended option (include the option of doing nothing)

Option 1 – Do Nothing

Strengths of option	Weaknesses of option	

Option 2 –

Strengths of option	Weaknesses of option

Option 3 –

Strengths of option	Weaknesses of option

#### 5. Performance

Performance measured	d against Key	Performance	Indicators	(KPI's)	Customer and	Client satisfaction
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This section captures, as clearly and succinctly as possible, the performance that gives rise to this proposal. Refer to any background papers which support this proposal.

### 6. Risks

What key risks are involved in implementing the proposal and how will they be managed?

Risk	How it will be managed

#### 7. Lifetime Costs

What are the costs to implement and run this contract over extension period? Assume 5 years if no clearer duration is available.

Procured Value	Spend To Date	Year 1	Year 2	Year 3	Year 4	Year 5
TOTAL						

Authorising Officer (HOS/Director)		Comments	Date
Name:			
Signature:			
In Support of Extension	Yes/No		
Officer Delegati where applicabl			
Please state relevant paragraph			
and page no. of the Constitution			
or Council / Committee Decision			
or Authorising Office			

Authorising Officer (HOS/Director)		Comments	Date
Name:			
Signature:			
In Support of Extension	Yes/No		