



Countryside Stewardship Facilitation Fund Change of facilitator request form

Notes

Request a change of facilitator using the Group's agreement change log and this form.

Before completing this form the **proposed facilitator** must:

- register in the [Rural Payments service](#) and/or have the relevant permission from their organisation
- read Annex 1: Eligibility and selection criteria of the 'Guide to Countryside Stewardship: Facilitation Fund' and be able to meet all of the eligibility criteria.

The existing facilitation plan details the training and advice that the existing facilitator planned to deliver. We will assess any amendments to the plan, made by the proposed facilitator, only after we have approved their application. They must remain within the original agreed group budget.

Statutory authority funding: We cannot fund any expenditure incurred before the agreement is signed, and can only fund projects which go beyond existing legal or statutory duties. This funding is only available to fund non-statutory duties - not for work or services that would normally be provided by a statutory authority, such as a local authority.

Both the existing and the proposed facilitator will need to complete this form. It will also need to be counter-signed if the proposed facilitator works for an organisation. All documents need to be signed with a wet signature. We can accept scanned wet signatures so long as the existing facilitator keeps the original and if agreed, passes this to the proposed facilitator. Please check the scanned information can be read clearly before submitting the request.

How to submit your request

Existing facilitator

- Save the form on your computer and fill in section 1 electronically. Do not sign it.
- Email the saved form to the proposed facilitator.

Proposed facilitator

- When you receive the form from the existing facilitator, with section 1 already completed, save it on your computer and fill in section 2 electronically. Save it again.
- Print and sign the form in ink.
- If you don't work as part of an organisation, email a scanned copy, along with any supporting information, to the existing facilitator.
- If you work as part of an organisation, email a scanned copy, along with any supporting information, to the person who is responsible for agreeing your participation as a facilitator. They should print and sign the form in ink (at the end of section 3). They then need to send the scanned copy, with both signatures, along with any supporting information you supplied, to the existing facilitator.

Existing facilitator

- Check that the form has been completed accurately and has been signed by the proposed facilitator and, if necessary, the relevant person in their organisation.
- If you are content, print then sign the form in ink.
- Scan and submit the form, along with any supporting information, to ruralpayments@defra.gov.uk Send it from your registered email address: in the subject line of the email put 'CSFF change of facilitator', your SBI and the group reference number. You must submit this request before you leave.

Remember to attach:

- the Group's agreement change log, requesting the change
- confirmation emails showing that the proposed facilitator has the backing of at least 4 eligible group members
- 2 references (with independent referees' names, email addresses and phone numbers) confirming the proposed facilitator's experience and outcomes achieved.
- confirmation of the proposed facilitator's VAT status, if they do not work for the same organisation as the existing facilitator.

Get help with your request

If you need help you can email ruralpayments@defra.gov.uk or call us on 03000 200 301.

Section 1: Existing facilitators details

1. Details to be completed by the existing facilitator

- a. SBI
- b. Group reference
- c. Full name
- d. Is this your own business or do you work for an organisation (Tick to confirm)
- e. Name:

2. **Has the organisation formally agreed to you leaving the facilitator role?** (leave blank if you do not work for an organisation) Yes No

You will need to have this request counter-signed at section 7.

3. **Do you manage the group in partnership with others?** Yes No

4. **If yes, will anyone else's role change as a result of this request?** Yes No

If yes, give details of the roles of the other partners, including who is the lead partner.

5. **Do you facilitate any other CS Facilitation Fund Groups?** Yes No

If Yes, please provide the group reference number(s). Do you intend to remain as facilitator of these groups? If not please submit a separate change of facilitator request for each.

6. **What will be your last working day as a facilitator?** Date

Please submit any claims and supporting information within 10 working days of this date. We will remove your permissions when we approve the change.

7. **Have you shared the group agreement with the new facilitator?** They will need a copy Yes No

8. **Are you attaching email confirmation from 4 eligible group members, that you receive funding for, that the proposed facilitator has their backing?** Yes No

Section 2: Proposed facilitator details

9. Details to be completed by the proposed facilitator

- a. Full name
- b. SBI

Please confirm if you work for the:

- c. Original organisation Tick if the details remain the same. Go to question 10.

or

a different business

Business name:

please complete d-g if it is a different business

d. Address and
postcode

e. Telephone
number

f. Email
address

g. Website
address
(if you have one)

10. Do you require this form in large print? Yes No

11. Do you facilitate any other CS Facilitation Fund Groups? Yes No

If yes, please
provide the
group reference
number(s)

12. Are you in partnership with others? Yes No

If yes, give details of your partnership and the roles the other partners will play, including who is the lead partner

13. Has your organisation formally agreed to you taking over this group? Yes No

This request needs to be counter-signed at section 7 and you will need full CS submit permissions set up in the Rural Payments service.

14. a. Experience of bringing people together to act cooperatively (maximum 1350 characters).

14. b. Qualifications/experience in agriculture, forestry, water management and/or ecology
(maximum 1350 characters with bullet points).

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14. c. Experience of the objectives covered by Countryside Stewardship
(maximum 1350 characters with bullet points).

14. d. Have you provided 2 references (with independent referees' names, email addresses and phone numbers) confirming your experience and outcomes achieved? Yes No
(One of these can be from Natural England if appropriate.)

15. Will you be relying on a sub-contractor to provide training to fulfil any of the knowledge and expertise needs? Yes No
(If you do this you must comply with the requirements as set out in the [Guide to Countryside Stewardship Facilitation Funding Annex 3.](#))

16. Are you able to reclaim VAT costs from HM Revenue and Customs?

No - No costs No

Yes - All costs Yes What is your VAT registration number?

Part costs

Please tell us what VAT can you reclaim and on what items?

Do you work for an organisation that has already confirmed their VAT status with us? Yes No

If not, have you included confirmation of your VAT status with your request. This must be from an impartial chartered accountant that is not a direct employee. Yes N/A

- It is up to you to determine what VAT you are able to reclaim, if any
- We will **not fund** reclaimable VAT
- If you cannot reclaim VAT from HM Revenue and Customs all costs should include VAT

Section 3: Declaration and signatures

I declare that:

- The information given on this change of facilitator form and in any other supporting documents is accurate;
- I have/My organisation has read the guide to the Facilitation Fund and understand/s that the guidance, including the scheme requirements, terms and conditions set out therein, will form part of the agreement with the Rural Payments Agency (RPA);
- I understand that, if I/we make any materially misleading statements (whether deliberate or accidental) at any stage during this process, or if I/we withhold any serious information, RPA could judge that this request is invalid and I/we will be liable to repay any grant money that I/we have received;
- I have/My organisation has the power to accept a grant subject to conditions, and to repay the grant if RPA decides that I/we have not met the grant conditions;
- The original wording and structure of this change of facilitator form as it was originally provided has not been amended in any way;
- I/My organisation will take all reasonable precautions to make sure that grant money I/we have received will not be misused or misappropriated in any way. I understand that RPA will take legal action to recover any misappropriated funds;
- I/ My organisation will comply with all relevant legislation, such as health and safety regulations, and have appropriate public liability and other insurances to undertake this role;
- I confirm/My organisation confirms that I/we will provide information about the group's activities and the difference this is making on the ground to help Defra, RPA and Natural England monitor the success of Countryside Stewardship;
- I/My organisation will comply with applicable law about the processing of personal data and privacy, including the General Data Protection Regulation and the Data Protection Act 2018. Prior to sharing any personal data with Defra, RPA and/or Natural England in connection with this grant, I/my organisation will provide the individuals to whom the personal data relates with the privacy information as published at: <https://www.gov.uk/guidance/rpa-privacy-notice>;
- I/My organisation have not/is not receiving any other funding, other than that declared in the change of facilitator form, to support the project, and if this changes I/we will notify RPA immediately;
- If any information in the change of facilitator form changes, I/my organisation will notify RPA in writing immediately.

Tick this box to confirm that you (the proposed facilitator) are authorised by the group/ partnership to sign the declaration and send this request to us and that you understand our obligations under the Environmental Information Regulations 2004 and Freedom of Information Act 2000.

Section 3 Declaration and signatures continued

Complete the signature panel below. All signatures must be in ink.

Existing facilitator - confirm you wish to cease the role of facilitator of this group by signing below

Title

(for example, Mr. Mrs.)

First name

Surname

Signature

Date

Proposed facilitator - confirm you wish to start the role of facilitator of this group by signing below

Title

(for example, Mr. Mrs.)

First name

Surname

Signature

Date

If you work as part of an organisation, ask the person who is responsible for agreeing your participation as a facilitator to sign below.

Organisation counter-signature - confirm that you agree for the Proposed facilitator named above to facilitate this group on behalf of your organisation and that you will make sure that they have the relevant permissions set up in the Rural Payments service.

Title

(for example, Mr. Mrs.)

First name

Surname

Signature

Date

**Position in
organisation**