**Schedule 5: Payment Request**

To: Salix Finance Limited 2nd Floor

10 South Colonnade

London

E14 4PU

as agent for the Scottish Ministers (in such capacity, **“Salix”**)

For the attention of: Phase 2 Scotland’s Public Sector Heat Decarbonisation Fund team

Email: [*team email*]

From: [*grant recipient*]

Date:

Submission ID:

Description of project:

Dear Sir or Madam,

Phase 2 Scotland’s Public Sector Heat Decarbonisation Fund Grant Offer Letter dated [*date*] entered into between Salix and the grantee **(the “Grant Offer Letter”)**

1. We refer to the Grant Offer Letter.This is a payment request*.* Words and expressions defined in the Grant Offer Letter have the same meaning in this payment request unless given a different meaning in this payment request.
2. We hereby request part payment of the grant as follows:

Amount: £

Payment date:

1. The bank details into which the grant is to be paid are as follows:

Name of account:

Sort code:

Account number:

1. We confirm that as at the date of this payment request and on each payment date:
	* + 1. (if applicable) each payment of the grant that has been received to date has been used only in accordance with the project programme;

* + - 1. each payment of the grant that has been received to date has been spent on those items of expenditure listed in the grant application and such items have not exceeded the forecasted amounts listed in the grant application (without prior written agreement of Salix);
			2. the remaining grant to be provided is sufficient to meet the remaining costs required for fulfilment of the project in accordance with the project programme;
			3. all information and evidence provided to Salix in support of the application for the grant was complete, true and accurate at the time it was provided; and
			4. we have complied with the Terms and Conditions and, if applicable, the Special Conditions, in each case in all respects.
1. This payment request is irrevocable.

................................. ................................

The Accountable Officer Date

................................. ................................

Print name Job title

For and on behalf of [*Insert grant recipient]*