

# Environmental Co-operation Action Fund claim form



Please complete in **BLACK CAPITAL LETTERS**. Please read the instructions on completing this form at page 5.

## Part 1 – Your details

Case reference number

Business Reference Number (BRN)

Business name

Business address

Postcode  Phone number

Email

Are you VAT registered? Yes  No

## Part 2 – Your claim details

I wish to apply for financial assistance towards the cost of carrying out the following relating to my approved business plan:

Item Description	Amount Claimed (£)	Official Use Only
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Total</b>	<input type="text"/>	<input type="text"/>

**Part 3 – Progress against facilitation plan quarterly report**

Claim Year

Claim Year Quarter

1. Please tell us what activity has taken place this quarter, including details of your costs (no more than 200 words)

2. What achievements have been made this quarter and how does this conform to the outcomes specified in your Facilitation Plan? (no more than 200 words)

## Part 4 – Declaration (to be completed by facilitator)

I will comply with EU Regulation 1305/2013 on support for rural development, EU Commission Regulation 807/2014 which supplements EU Regulation 1305/2013, EU Commission Regulation 808/2014 which lays down the rules for the application of EU Regulation 1305/2013, EU Regulation 1306/2013 on the financing and monitoring of the common agricultural policy, EU Commission Regulation 640/2014 which supplements EU Regulation 1306/2013.

I declare that I have read and understood the rules, conditions and requirements of the Environmental Co-operation Action Fund Scheme as detailed on the Rural Payments and Services website.

I declare that, to the best of my knowledge and belief, the information given on this claim form is correct.

I understand that the information given may be used for monitoring and evaluation purposes.

I understand that any false or misleading statement I make may result in the withholding or recovery of all or part of any payments.

Signed

Name

Date

### IMPORTANT INFORMATION

This form with the correct supporting documentation should be returned to:  
ECAAF Payments Team  
Q1 Spur  
Saughton House  
Broomhouse Drive  
Edinburgh  
EH11 3XD.

**For official use only:**

**I confirm that the claim is fit for purpose and is certified for payment**

<b>Signed</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>
<b>Name</b>	<input type="text"/>	<b>User ID</b>	<input type="text"/>

**A payment of £  has been authorised**

<b>Signed</b>	<input type="text"/>	<b>Date</b>	<input type="text"/>
<b>Name</b>	<input type="text"/>	<b>User ID</b>	<input type="text"/>

## Instructions for Completion of Claim Form

### Part 1 – Your Details

Case Reference Number – please enter your case reference number as shown on your contract.

Business Reference Number – enter your six digit BRN.

Business Details – enter your business name and contact details as shown on your application.

VAT Registration – enter YES or NO. If you are VAT registered you may only claim assistance for any costs net of VAT. If you are not VAT registered, you can claim the total costs inclusive of VAT. If you submit a claim with VAT costs included you must submit proof of your VAT registration from HMRC.

### Part 2 – Your Claim Details

You must complete this section outlining the items that you are claiming for this quarter and the amount.

For example: Public meeting hall hire	£300.00
Publicity material	£120.00
2 Days administration on project	£500.00

With all claims you must supply verification of all costs claimed as per the scheme guidance. If you fail to provide verification, the item in question will not be paid. If you are claiming for the daily rate of assistance, you must also complete a timesheet and submit with this claim.

### Part 3 – Progress Report

Claim Year and Quarter – enter the claim year as outlined in your contract and the scheme year quarter. Quarter 1 is January-March, quarter 2 is April-June, quarter 3 is July-September, quarter 4 is October-December.

You are required to provide details of your quarterly progress with each claim.

1. all activities and costs (not including daily rates) must align with the details in your contract and activity evaluation form.
2. provide narrative about your achievements in this quarter including: what landowners are doing differently, what co-operation is taking place, how is the group working together, what engagement has taken place, outcomes from public meetings.
3. if you are undertaking group activities with your group or attendees at a public event you must submit a Fund Activity Evaluation form along with this claim.

### Part 4 – Declaration

Please read the declaration and sign and date.