

# Form C - KCCEF Completion Delay or Change Request

(Must be returned by the last business day in October if project is not finished, or before any changes are initiated.)  
Mail form to: KCCEF, PO Box 11, Sigourney, IA 52591

Organization:

Contact:

Project:

Phone:

What type of request are you filing:

**Completion Delay**

**Project Change**

(Complete Section A & C)

(Complete Section B & C)

## Section A

Please explain the circumstances surrounding the delay of your project's completion:

Percent of project finished to date:

Expected Completion Date:

Do you foresee any possibility that the project may not be completed at this future date?  Yes  No

## Section B

**Project changes are only allowed for unanticipated problems that develop after the award as been made.**

**Please explain those unforeseen conditions, in detail, attaching photos if necessary:**

**What changes are necessary to enable the organization to meet the project goals:**

Do these changes require more funds than originally estimated?  Yes  No If so, name source of the additional funding?

## Section C

I understand that if the project is not completed, all funds received from KCCEF must be returned, that upon completion of the project, the evaluation form (Form E) must be submitted to KCCEF, that no changes must be initiated until approval is granted by KCCEF as demonstrated by signature below, and that any further complications must be reported in writing to KCCEF using another copy of this form.

\_\_\_\_\_  
Signature of Project Director

\_\_\_\_\_  
Date

**Approval is granted for the changes and / or delay requested above.**

\_\_\_\_\_  
Signature of KCCEF Representative

\_\_\_\_\_  
Date

For Office Use Only

Date Action Taken \_\_\_\_\_

Approval Letter Sent \_\_\_

Changes Denied & Fund

Return Request Sent \_\_\_