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|  (Official Use Only) |
| Date of Receipt: |  |  |
| Application No.: | ISP- |  |

# The Recycling Fund (Industry Support Programme)Final Report of Approved Project

## Part A：Project Details

1. **Background Information**

|  |  |
| --- | --- |
| Application No. |  |
| Name of Grantee |  |
| Project Title |  |
| Project Duration | As stated in the funding agreement: / / to / / （day/month/year）Total no. of months: Months # Revised / Actual (if applicable): XX/XX/XXX – XX/XX/XXXX (day/month/year) Total no. of months: XX Months |
| Reporting Period\* (from Project Commencement to the End Date of this Final Report) |  / / to / / （day/month/year） |

***# Only applicable if the revised project duration has been approved by the Advisory Committee on Recycling Fund (RFAC) or the Secretariat.***

***\* Reporting Period is defined as the period from project commencement to project completion date or the expiry or termination date of the funding agreement.***

## Part B：Project Results

1. **Measures and Progress**

| **Please fill in according to the “Project Deliverables and Implementation Plan”in the application form for the project.** | **Please report the progress of the key measures planned to be undertaken during the reporting period as set out in the “Project Deliverables and Implementation Plan” in the application form for the project.** |
| --- | --- |
| **Expected commencement date / completion date****(in chronological order)** | **Committed key measures / milestones / deliverables** | **Actual commencement date / completion date** | **Please check “**[x] **” in the appropriate box.****（Please elaborate the implementation details about the specific measures.)** |
| ***Example:*** *May 2017 – Oct 2018* | ***Example:****36 Trainings (720 recyclers) on occupational health and safety of recycling operation* | ***Example:****Jun 2017 – Oct 2018* |

| [ ]  | **Fully Completed** |
| --- | --- |
| [ ]  | **Partially Completed** |
| [ ]  | **Cancelled**  |

**Reason(s) for Partial Completion or Cancellation and remedial actions taken**:   |
|  |  |  |

| [ ]  | **Fully Completed** |
| --- | --- |
| [ ]  | **Partially Completed** |
| [ ]  | **Cancelled**  |

**Reason(s) for Partial Completion or Cancellation and remedial actions taken**:     |
|  |  |  |

| [ ]  | **Fully Completed** |
| --- | --- |
| [ ]  | **Partially Completed** |
| [ ]  | **Cancelled**  |

**Reason(s) for Partial Completion or Cancellation and remedial actions taken**:      |

**Please provide the detailed description on number of beneficiaries of the activities. Please provide explanations if there are any differences between the actual and the expected measures/ milestones/ deliverables from the funding agreement. Please expand the table above if necessary.**

1. **Please elaborate the continuity of the benefits derived from the project after the project period (e.g. transfer of equipment under the project to the grantee to continue the project, publish of guideline in website, etc).**

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## Part C：Financial Position

**a) Approved Budget of the Project**

| Approved Total Project Cost (HK$): | Maximum Approved Funding Amount (HK$): |
| --- | --- |
| Amount of Cash Contribution or Sponsorship from the Grantee or Other Sources **committed in the agreement** **(if applicable)** (HK$): | **Actua**l **cumulative** amount of Cash Contribution or Sponsorship from the Grantee or Other Sources **(if applicable)** (HK$): |
| In-kind contribution **committed in the agreement** **(if applicable)**[[1]](#footnote-1) (HK$): | **Actual** **cumulative** in-kind contribution **(if applicable)**1 (HK$): |
| Cumulative fund disbursement received from the Secretariat (from project commencement to the end date of the final report) (HK$): | Other incomes including bank interest generated from the project, **if applicable** (please indicate the amount, its source and the proposed / actual handling)[[2]](#footnote-2) (HK$): |

**b) Project Expenditure**

| **Approved budget according to the application form for the project** | **Total actual expenditure accumulated in the reporting period (HK$)** | **Comply with the approved budget eventually?****If “No”, please provide full justification to explain for the deviation from the approved budget. #** |
| --- | --- | --- |
| **Items\*** | **Total approved budget for each item(HK$)** |
| (A) Additional Staff Cost |  |  | [ ]  **Yes**[ ]  **No**  |
| (a) |  |  |
| (b) |  |  |
| (c) |  |  |
| **Sub-total (A)** |  |  |
| (B) Procuring/ Leasing Additional Machinery/ Equipment Cost |  |  | [ ]  **Yes**[ ]  **No**  |
| (a) |  |  |
| (b) |  |  |
| (c) |  |  |
| **Sub-total (B)** |  |  |
| (C) Other Direct Cost |  |  | [ ]  **Yes**[ ]  **No**  |
| (a) |  |  |
| (b) |  |  |
| (c) |  |  |
| **Sub-total (C)** |  |  |
| **Total (A+B+C)** |  |  |  |

**\* Please fill in the above table according to the cost breakdown in the application form.**

**# In the event of occurrence of any one of the circumstances set out below, the relevant budget item should be regarded as NOT complying with the approved budget. Changes involved in those circumstances need prior written approval by the RFAC or the Secretariat. The grantee should submit change requests separately, together with full justification and any supporting document, to the Secretariat for consideration:**

1. **If the total actual expenditure of any individual budget item exceeds the approved budget, the grantee should seek consent from the RFAC / the Secretariat in writing before the procurement of such item. Please refer to the Guide to Application for details.**
2. **Creation of new budget item which is not included in the approved budget. Please refer to the Guide to Application for details.**

**(c) Deletion of any budget item included in the approved budget. Please refer to the Guide to Application for details.**

1. **Grantees are reminded on the followings:**
2. Grantees should obtain quotations directly from suppliers as far as possible to ensure the authenticity of the quotations;
3. If, under unavoidable circumstances, the grantee obtains quotation through an agent, such agent cannot be one of the suppliers. The applicant should also ensure that the agent has no interest in any supplier that provides the quotation;
4. Regardless of how quotations are obtained, grantees are also responsible for ensuring the authenticity of all quotation documents.

## Part D： Declaration

1. We confirm that we complied with the procedures and guidelines of the “Guide to Application for the Recycling Fund (Industry Support Programme)” in the procurement of equipment, goods or services for the project, **if applicable**.
2. We confirm that we complied with the procedures and guidelines of the “Guide to Application for the Recycling Fund (Industry Support Programme)” in recruiting staff for the project, **if applicable**.
3. We confirm that for the project measures that received funding support from the Recycling Fund (Industry Support Programme), they had not received/would not receive other sources of funding support provided by the Government, or other sources of sponsorships/donations.
4. We confirm that all submitted quotations are still valid during the procurement of project item(s).

**Signature**

**Prepared by:**

Signature of Project Coordinator : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Project Coordinator (in Block Letters):

**Endorsed by:**

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Organisation Chop of the Grantee |  | Authorised Signature of the GranteeName of Signatory (in Block Letters):Post Title: |

 Date:

End

## Appendix – Details and Breakdown of Project Expenditure

### Additional Staff Cost（in chronological order)

| **Description****（Name & position of the additional staff recruited）** | **Actual hourly/****monthly rate (HK$)****(A)** | **Employment period accumulated in the reporting period (dd/mmm/yyyy -dd/mmm/yyyy)** |  **No. of hours/months charged accumulated in the reporting period****(B)** | **Employer’s contribution to MPF or other cost accumulated in the reporting period****(Please specify the nature of the cost)****(C)** |  **Staff cost** |
| --- | --- | --- | --- | --- | --- |
| **Accumulated in the reporting period(HK$)****(A×B)+C** |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Sub-total:** |  |

### Expenses for Additional Equipment（in chronological order）

Please check “🗹” in the appropriate box.

Please provide the relevant procurement documents.

| **Date of receipt** | **Name of equipment** | **Procured (P)/ leased (L)** | **No. of quotations invited** | **Name of the sourcing company** | **Unit cost****(HK$)****(A)** | **Quantity****(B)** | **Total cost****(HK$)****(A) × (B)** |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  | [ ]  P [ ]  L |  |  |  |  |  |
|  |  | [ ]  P [ ]  L |  |  |  |  |  |
|  |  | [ ]  P [ ]  L |  |  |  |  |  |
| **Sub-total:** |  |

### Other Direct Cost and External Audit Fee（in chronological order）

| **Date of receipt** | **Description of expenses** | **No. of quotations invited** | **Name of the sourcing company** | **Cost details and breakdown** | **Total cost****(HK$)** |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| **Sub-total:** |  |

1. The supporting document on provision of the in-kind contribution (preferably with the actual amounts or equivalent market value) and the item breakdown during the reporting period should also be provided. [↑](#footnote-ref-1)
2. Prior written approval from the Government should be obtained for the distribution and use of the income generated from the Project. [↑](#footnote-ref-2)