

## VARIATION TO DIRECT PAYMENT AGREEMENT

| Name of Service User:           |                      |                       |
|---------------------------------|----------------------|-----------------------|
| Liquid logic ID:                |                      |                       |
| Address:                        |                      |                       |
| Variation<br>Reason for Change: | Previous Hrs         |                       |
|                                 | +/- Hrs              |                       |
|                                 | New Hrs              |                       |
|                                 | Delete as applicable | Temporary / Permanent |

| Date Variation effective from:                          |  |      |  |  |
|---|--|------|--|--|
| Signature of Individual or<br>Suitable/Nominated person |  | Date |  |  |
| Signature of DBC representative                         |  | Date |  |  |

Please ensure revised support plan and validation forum summary sheet are attached to confirm funding