

## Template for Equipment - Physical Implementation on-the-spot checks

This template should be filled in by the MA / LM when carrying out a physical implementation on-the-spot check

## PHYSICAL ON-THE-SPOT CHECK REPORT

1.0 GENERAL INFORMATION	
Reference No	
Date & time of visit	
Member State	Malta
Programming Period	2014-2020
Operational Programme	I – Fostering a competitive and sustainable economy to meet our challenges
Fund	
Investment Priority	
Priority Axis	
Operation Number	
Title of the Operation	
Beneficiary	
Project Leader / Person representing the Project Leader	
Place of meeting	
Officers present during the spot check	



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2.	2. PHYSICAL IMPLEMENTATION					
			Yes	No		
a)	<ul> <li>a) Is the operation being implemented in accordance with the components agreed in the Grant Agreement?</li> <li>If no, please explain in the space below</li> </ul>					
	Yes No					
b)	Is the implementation of the accordance with the deadlin contract?	nes stipulated in th	ne implementation sche	edule of the		
2.						
Li: the Co	2.1 Indicators         List indicators as listed in the Grant Agreement (GA) / Commission Decision(CD) or any subsequent addenda (where applicable) <sup>1</sup> Information as at GA / CD stage       Progress as at On the Spot Check       Comments       If not yet achieved or partially achieved, explain why and by whe are they planned to be achieved?				nd by when chieved?	

<sup>1</sup> To list only indicators relevant to this check.

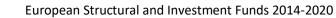
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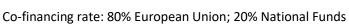


2.2 Inventory – Refer to nventory Template if					
applicable	Section is <u>Applicable</u> to c			Section was/will be checked in another verification	
f Section is Not Applicable to op	eration explain				
nsert Verification Reference if th already checked in a previous ve					
		Yes	No	Comments	
Has the Beneficiary filled in and un nventory template for <b>all</b> the fixe procured under this operation an peing co-financed by the EU?	d assets				
s the inventory in file? <sup>2</sup>					
s the inventory in line with the C	ontract?				
If the inventory is not in line with the Contract, does the expenditure paid through the operation reflect the items on the inventory?				[If the inventory is in line with the Contract, to comment here "N/A']	
f the inventory is not in line with has an addendum been drawn u discrepancy? If not, the MA officer needs to en BN rectifies this situation through addendum.	p to rectify this sure that the			[If the inventory is in line with the Contract, to comment here "N/A'	
n the case of Government Depa Entities: Was the inventory signed by the DCS of the respective LM? n the case of NGOs: Was the inventory signed by the representative?	PL and the				
f works are still in progress <sup>3</sup> , is the list being drafted in line with the l					

 $<sup>^{2}</sup>$  If finalised, a copy of the signed Inventory should be annexed to this report.

<sup>&</sup>lt;sup>3</sup> MA officers to distinguish between an ongoing contract as opposed to an ongoing operation. A finalized inventory should be in place for every closed contract.







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2.3 Consumables log -	Tick as appropriate					
Refer to template if applicable	Section is Applicable to c			Section was/will be checked in another verification		
If Section is Not Applicable to operation explain why						
Insert Verification Reference if already checked in a previous						
		Yes	No	Comments		
Has the Beneficiary filled in and filed the Consumables log template for all the consumables procured under this operation and which is being co-financed by the EU?						
If section cannot yet be addres	If section cannot yet be addressed please explain why:					
	Tick as appropriate					
2.4 Software⁴	Section is Not Applicable to operation			Section was / will be checked in another verification		
	Section A: Be-spoke <sup>5</sup>					
Type of Software	Section B: Off-the-shelf					
Section A: Be-Spoke						
		Yes	No	Comments		
Was a requirements document (or equivalent) <sup>6</sup> prepared and in file?						
prepared and in file?	(					
Are Test Cases showing succe the software in file? <i>Where applicable</i>						
Are Test Cases showing succe the software in file?	ssful testing of					

- dp.



 <sup>&</sup>lt;sup>4</sup> Checks are to be undertaken in line with tender specifications.
 <sup>5</sup> Custom / tailor-made
 <sup>6</sup> For example: Business Plan

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If yes, kindly give the url in the comments section				
Date of launch / completed / installed				
<ul> <li>Was any training given on the use of this software?</li> <li>If yes: <ul> <li>Are attendance sheets or photos showing that training took place in file?</li> <li>[If yes, annex to OTS report]</li> <li>Are the mandatory publicity requirements (EU emblem and co-financing banner) visible?</li> </ul> </li> </ul>				
<ul> <li>Has a demonstration of the working software been presented to the MA?</li> <li>(i) If yes, where any issues / problems identified?</li> <li>(ii) If yes to Q(i), elaborate including any necessary follow-ups that need to take place, stating the person responsible for the follow-ups and deadline by when these are expected to be solved.</li> </ul>				
Give a list of the supporting documentation being annexed to this report				
[e.g. Test Cases, Requirement Documents, Final Reposition Software, etc]	ort, Print Scre	een of the		
Will the Beneficiary gain ownership of the software?				
Section B: Off-the-shelf				
	Yes	No	Comments	
Date of purchase				
Date of expiry				
Is the licence purchased covering the operation lifetime or does it go beyond? [If Yes, this should only be part-financed through the operation]				
State number of users covered by the licence purchased				



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Will the software licence be transferred to the Beneficiary implementing the operation following release / installation? If yes, kindly state the licence reference number			
<ul> <li>Was any training given on the use of this software?</li> <li>If yes: <ul> <li>Are attendance sheets or photos showing that training took place in file?</li> <li>[If yes, annex to OTS report]</li> <li>Are the mandatory publicity requirements (EU emblem and co-financing banner) visible?</li> </ul> </li> </ul>			
<ul> <li>Has a demonstration of the working software been presented to the MA?</li> <li>(iii) If yes, where any issues / problems identified?</li> <li>(iv) If yes to Q(i), elaborate including any necessary follow-ups that need to take place, stating the person responsible for the follow-ups and deadline by when these are expected to be solved.</li> </ul>			
Give a list of the supporting documentation being report [e.g. Print Screen of the software, etc]	annexed to	o this	
2.5 Publicity on-the spot			
	Yes	No	Comments
Compliance with the Visual Identity Guidelines Featuring of relevant ERDF/CF/ESF co- financing statement			
Signs / Plaques			
Display stands			
Billboard			
Stickers			
Others: (specify which in comments section)			

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If any compulsory measures<sup>7</sup> are absent or if any of the above items are not in line with the Information and Publicity Requirements, please provide further details on each case:

2.6 Horizontal Priorities <sup>8</sup>				
Tick as appropriate				
		Section was/will be checked in another verification		
Explain h	ow this i	s being addressed		
Tick as appropriate				
Section is Not Applicable to operation		Section was/will be checked in another verification		
Explain how this is being addressed				
Tick as appropriate				
Section is Not Applicable to operation		Section was/will be checked in another verification		
Explain how this is being addressed				
	Section is Not Applicable to operation Explain h Section is Not Applicable to operation Explain h Section is Not Applicable to operation	Section is Not Applicable to operation       □         Image: Section is Not Applicable to operation       □         Section is Not Applicable to operation       □         Image: Section is Not Applicable to operation       □	Section is Not Applicable to operation       Section was/will be checked in another verification         Explain how this is being addressed         Explain how this is being addressed         Section is Not Applicable to operation       Section was/will be checked in another verification         Explain how this is being addressed         Section is Not Applicable to operation       Section was/will be checked in another verification         Explain how this is being addressed         Section is Not Applicable to operation       Section was/will be checked in another verification         Section is Not Applicable to operation       Section was/will be checked in another verification	

<sup>8</sup> In this section to record only **physical** checks tied to Horizontal Priorities covered through this verification. European Structural and Investment Funds 2014-2020



<sup>&</sup>lt;sup>7</sup> In line with (EU) 1303/2013 Annex XII, Article 2.2

3.1 List Attachments to this report         (Obligatory attachments refer to the photos taken during on the spot - for data protection purposes, individuals should be informed and photographed from the back)         3.2 Officer Conducting Check         Besignation         Designation         Date         Name in Block Letters         Signature         Designation         Designation         Designation         Designation	<b>3. CONCLUSION</b> (Concluding comments on findings, proposed follow-up and relevant deadlines. In this section, state clearly whether a problem was detected or not. If there are no remarks to pass, do state so)		
(Obligatory attachments refer to the photographed from the back)         Image: state of the photographed from the back back back back back back back back		le 50/	
(Obligatory attachments refer to the photographed from the back)         Image: state of the photographed from the back back back back back back back back			
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be informed and photographed from the back)	3.1 List Attachments to this report		
Name in Block Letters       Signature         Designation       Date         Project Leader:		- for data protection purposes, individuals should	
Name in Block Letters       Signature         Designation       Date         Project Leader:			
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Name in Block Letters       Signature         Designation       Date         Project Leader:			
Designation     Date       Project Leader:	3.2 Officer Conducting Check		
Designation     Date       Project Leader:			
Designation     Date       Project Leader:			
Designation     Date       Project Leader:			
Project Leader:         Name in Block Letters       Signature	Name in Block Letters	Signature	
Project Leader:         Name in Block Letters       Signature			
Project Leader:         Name in Block Letters       Signature			
Project Leader:         Name in Block Letters       Signature			
Name in Block Letters Signature	Designation	Date	
Name in Block Letters Signature			
	Project Leader:		
	Name in Block Letters	Signature	
Designation Date			
Designation Date			
Designation Date			
	Designation	Date	



