

## Joint Schedule 10 (Rectification Plan)

| Request for [Revised] Rectification Plan                 |   |                  |
|--|---|------------------|
| Details of the Default:                                  | [Guidance: Explain the Default, with clear schedule and clause references as appropriate] |                  |
| Deadline for receiving the [Revised] Rectification Plan: | [add date (minimum 10 days from request)]   |                  |
| Signed by [CCS/Buyer] :                                  |   | Date:            |
| Supplier [Revised] Rectification Plan                    |   |                  |
| Cause of the Default                                     | [add cause]   |                  |
| Anticipated impact assessment:                           | [add impact]  |                  |
| Actual effect of Default:                                | [add effect]  |                  |
| Steps to be taken to rectification:                      | <b>Steps</b>  | <b>Timescale</b> |
|  | 1.  | [date]           |
|  | 2.  | [date]           |
|  | 3.  | [date]           |
|  | 4.  | [date]           |
|  | [...]   | [date]           |
| Timescale for complete Rectification of Default          | [X] Working Days  |                  |
| Steps taken to prevent recurrence of Default             | <b>Steps</b>  | <b>Timescale</b> |
|  | 1.  | [date]           |
|  | 2.  | [date]           |
|  | 3.  | [date]           |
|  | 4.  | [date]           |
|  | [...]   | [date]           |

**Joint Schedule 10 (Rectification Plan)**  
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|  |  |       |  |
|--|--|-------|--|
| Signed by the Supplier:                  |  | Date: |  |
| Review of Rectification Plan [CCS/Buyer] |  |       |  |
| Outcome of review                        | [Plan Accepted] [Plan Rejected] [Revised Plan Requested] |       |  |
| Reasons for Rejection (if applicable)    | [add reasons]  |       |  |
| Signed by [CCS/Buyer]                    |  | Date: |  |