Delegated Decision Notification

This form is used both to give notice of an officer's intention to make a Key decision and to record any delegated decision which has been taken. The decision set out on this form therefore reflects the decision that it is intended will be made, or that has been made. Although set out in the past tense a decision for which notice is being given may be subject to amendment or withdrawal.

LEAD DIRECTOR ⁱ :	Director of Resurces & Housing		
SUBJECT":	Supply of Gas and Electricity to Leeds City Council		
DECISION	The Director of Resources and Housing approved:		
DETAILSiii:	the extension of the Supply of Gas including a brokerage contract (YORE-9DMKPC) for 2 years (1st November 2018 – 31st October 2020) to Engie Gas Limited.		
	 the extension of the Supply of Electricity including brokerage contract (9KLF-NAHFOE) for 2 years (1st April 2019 – 31st March 2021) to Engie Power Limited. 		
TYPE OF	☐ Key Decision (Executive)		
DECISION:	Is the decision eligible for call-in?i▽ ☐ Yes ☒ No		
	Is the decision exempt from call-in? ^v ⊠ Yes □ No		
	Significant Operational Decision (Council or Executive ^{vi} – not subject to call-		
	in)		
	☐ Administrative Decision (Council or Executive ^{vii} – not subject to publication		
	or call-in)		
NOTICEviii / CALL-	Date the decision was published in the List of Forthcoming Key Decisions:		
IN (KEY			
DECISIONS	If not on the List of Forthcoming Key Decisions for at least 28 clear days, the		
ONLY):	reason why it would be impracticable to delay the decision:- If exempt from call-in, the reason why call-in would prejudice the interests of the Council or the public:-		
AFFECTED			
WARDS:			
DETAILS OF	Executive Member Date consulted: Interest disclosed?ix		
CONSULTATION	☐ Yes (Date of dispensation:)		
UNDERTAKEN:	□ No		

	Ward Councillor Date consulted:	Interest disclosed?
		Yes (Date of dispensation:)
		☐ No
	Others ^x (please Date consulted:	Interest disclosed?
	specify:)	Yes (Date of dispensation:)
		☐ No
CAPITAL		
INJECTION	Injection approval required?	
APPROVAL	(If yes, you must complete the Approval box below)	
REQUIRED:		
CAPITAL		Capital Scheme Number:
INJECTION		XXXXX / XXX / XXX
APPROVAL	(Name:)	
	(Title:)	Date:
CONTRACT	Contract Reference Number	Contract Title
DETAILS		
(PROCUREMENT		
DECISIONS ONLY)		
		Supplier
IMPLEMENTATION	Officer accountable for implementation	
(KEY DECISIONS		
ONLY)	Timescales for implementation ^{xi}	
CONTACT	Steve Blighton	Telephone numberxii: 0113 3785880
PERSON:		
DECISION MAKER		Date: 02/10/18
/ AUTHORISED		
SIGNATORYXIII:	R.N. Evans	
	101/2003	
	(Name: Neil Evans)	
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