

Project Brief (PM1)

PROJECT Title: Add project title

Project Manager: Add name

Date Created: DD-MM-YYYY

Version Number: Add version reference

Project Brief

For consideration of: (Name of Project Executive)

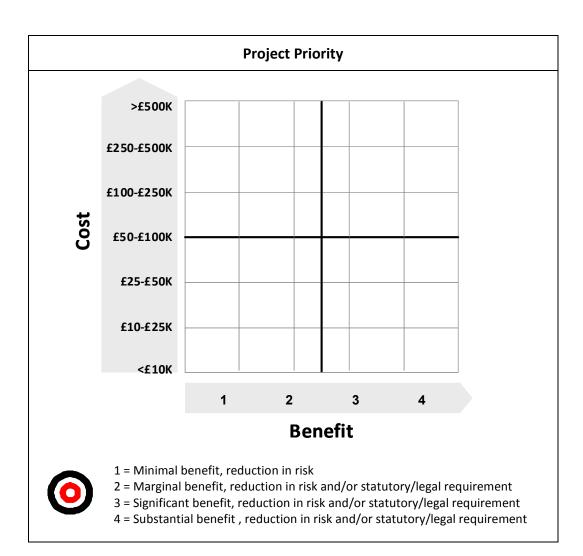
Prepared by: (Name of Project Manager)

What it will involve and the benefits that will be realised from carrying it out				
Project Definition				
Outputs i.e. Products to be delivered				
\rightarrow				
Outcomes i.e. The direct impact the outputs will have				
\rightarrow				
Strategic Contribution i.e. Strong and diverse local economy				
\rightarrow				
Other contribution i.e. Local Development Framework				
\rightarrow				

Background (brief description of the project)

Budget Resource Requirements (outline)							
Breakdown of initial costs such as Officer time, capital costs and support costs							
Initial estimated c	osts are:						
Internal costs:							
Additional budget cost:							
Savings/ payback achievable;							
Time Scale:							
After what period of time from start will it be considered completed?							
Start : (Date)	/	/		Completion: (Date)	/	/	

Project Time Line and Milestones			
Milestones	Due Date		
Add key milestones	X		
Add key milestones	х		
Add key milestones	X		
Add key milestones	X		
Add key milestones	X		
Add key milestones	X		
Add key milestones	X		



Project Risks					
Risk	Impact	Action			
People - Lack of staff support & engagement	Project fails to initiate	New project leader appointed			
Time - Project over runs	Key external dates are missed	Ensure that final deadline is not missed			
Money – Project overspends before completion	Only 8 sessions will be held, not the full 10	Alter spend on other resources to bring project back in to line			

Justification / Consequence of not doing the project (Strategic contribution / Statutory requirement / Other contribution) What is the need for the project and what will be the consequences if it is not carried out?

Project Brief authorisation				
Sponsor Signature:				
Date:				
Executive Signature:				
Date:				
Project Manager Signature:				
Date:				
Member Signature/ Cabinet Approval: (where required)				
Date:				