OMB Number: 0610-0096 Expiration Date: 11/30/2021

## ECONOMIC DEVELOPMENT ADMINISTRATION

## CHANGE ORDER FORM

EDITIWARA NUMBER.		]	Date:
Recipient:			
Co-Recipient(s):			
Recipient's Authorized Rep	resentative:		
1		Name & Pho	one Number
Construction Contract No.	Contractor Name		Change Order No.
The Change Order will provide f	For the following:		
Change Order Justification (Incl	ude cost analysis, if not un	it cost in bid proposal o	or schedule of values):
	TOTAL	EDA Funded Amount	* Non-EDA Funded Amoun
Original Contract Amount	\$	\$	\$
Original Contract Amount  Current Contract Amount adjusted by previous Change Orders	\$ \$	\$ \$	\$ \$
Current Contract Amount adjusted by previous Change Orders  This Change Order will		•	
Current Contract Amount adjusted by previous Change Orders  This Change Order will	\$	\$	\$
Current Contract Amount adjusted by previous Change Orders  This Change Order will  (increase) (decrease)  the Contract Amount by:  The original, scheduled date of	\$	\$	\$
Current Contract Amount adjusted by previous Change Orders  This Change Order will  (increase) (decrease)  the Contract Amount by:  The original, scheduled date of completion is/was:  The new Contract Amount including	\$	\$ \$	\$ \$ \$
Current Contract Amount adjusted by previous Change Orders  This Change Order will	\$ \$ \$	\$ \$ \$	\$
Current Contract Amount adjusted by previous Change Orders  This Change Order will	\$ \$ calendar days (Date)	\$ \$ calendar days (Date)	\$ \$ calendar days