

SRDP-13 Change Order Request Form

Project Name: _____

Change Order #: _____

Contractor's Name: _____

Original Contract Date: _____

Owner's Name: _____

Property Address(es):

_____	_____
_____	_____
_____	_____
_____	_____

Explanation of Change/Specifications (Describe each change in specific terms. Provide complete specifications for all new work to be completed.)

Original Contract Amount: _____

Completion Time Extended? ___ Yes ___ No

Amount of this Change Order: _____

If "Yes", extended until: _____

Amount of Previous Change Order: _____

Revised Total Contract Amount: _____

Approved change orders will become an amendment to the above referenced contract, but are **not** an approval of additional funds from SC Housing.

Accepted:

Recipient/Owner Signature

Date

Accepted:

Contractor Signature

Date

AUTHORITY USE ONLY

Change order is: Approved Denied

Authority Representative

Date