

CITY OF NEW HAVEN CONTRACT CHANGE ORDER (CO)

| | | | | | | | | | | |
|----|--|--|----------------|--|----------------|--------------|----------------|--|--------------------|--|
| 1 | Please provide an overview of this CO (please pay particular attention to sections 17,18,19) | | | | | | | | | |
| 2 | CONTRACT TITLE: | | | | | | | | | |
| 3 | CONTRACT #.: | | CO# | | CO DATE: | | | | | |
| 4 | CONTRACTOR: | | | | | VENDOR CODE: | | | | |
| 5 | Contractor EMAIL: | | | | | PROJECT No.: | | | | |
| 6 | CONTRACT START DATE: | | DATE UNCHANGED | | DATE INCREASED | | DATE DECREASED | | CONTRACT END DATE: | |
| 7 | FUNDING SOURCE OF CONTRACT: | | | | | C A P O #: | | | | |
| 8 | FUNDING SOURCE CO: | | | | | C A P O #: | | | | |
| :9 | ORIGINAL AWARDED AMOUNT: | | | | | | | | | |
| 10 | CONTRACT AMOUNT PRIOR TO THIS CO: | | | | | | | | | |
| 11 | AMOUNT OF THIS CO: | | | | | | ACTUAL | | ESTIMATE | |
| | | | | | | | INCREASE | | DECREASE | |
| 12 | NEW CONTRACT AMOUNT: | | | | | | | | | |

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|----|---|-----|----|-----|
| 13 | What is the total percentage increase/decrease over the original contract, including the current CO? | | | % |
| | <i>Please place an X in one box on each line</i> | YES | NO | N/A |
| 14 | Is this Change Order a final close-out of the Contract? | | | |
| 15 | Has the cost of this contract been increased from the original amount? | | | |
| 16 | Is this a Time and Material change order because of increase/decrease funding? | | | |
| 17 | Is any part of this Change Order outside of the scope of the original bid documents? IF YES you MUST elaborate in memo section above | | | |
| 18 | Has any of the work described in this Change Order been ordered to be done? IF YES you MUST elaborate in memo section above | | | |
| 19 | Are there any unit prices or lump-sum amounts in this Change Order that were not taken from the Contractor's original bid for the project? If the answer is yes, approved quotes and prices, with back-up, must be appended hereto along with certification by the person who approved the reasonableness of the prices, and elaborate in memo section above | | | |
| 20 | COMPANY HOLDING PERFORMANCE BOND: (If Applicable) | | | |

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|------------------------------------|--------------------------------|--|------------------------|--------------------------|
| 21 | CHANGE ORDER HISTORY | | CONTRACT # | |
| 22 CO # | PREVIOUS CHANGE ORDERS: | | AMOUNT INCREASE | AMOUNT (DECREASE) |
| | Date | DESCRIPTION in lieu of CO memo If you need more line attach a separate page | | |
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| SUB TOTALS | | | | |
| NET INCREASE / (DECREASE) | | | | |

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| 23 ITEM | THIS CHANGE ORDER | AMOUNT INCREASE | AMOUNT (DECREASE) |
| | Brief description (attach quotes etc.) | | |
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| SUB TOTALS | | | - |
| NET INCREASE / (DECREASE) | | | |

Signature Page to follow

| | | | |
|----|-------------------------|-------------|--------------|
| 24 | | | |
| | Contract Number: | CO # | DATE: |

| | | |
|---|--------|-------|
| ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT REMAIN IN FULL FORCE AND EFFECT. | | |
| | | |
| DULY AUTHORIZED CONTRACTOR'S SIGNATURE: | TITLE: | DATE: |

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|---|------|
| BY SIGNING BELOW, WE CERTIFY THAT THIS CHANGE ORDER HAS BEEN REVIEWED BY THE APPROPRIATE PARTIES AND FOUND TO BE IN COMPLIANCE WITH THE RULES, REGULATIONS AND POLICIES OF OUR INDIVIDUAL DEPARTMENTAL REQUIREMENTS. | |
| | |
| REQUESTING AGENCY DEPARTMENT HEAD SIGNATURE: | DATE |
| | |
| SMALL CONTRACTOR DEVELOPMENT SIGNATURE: | DATE |
| | |
| COMMISSION ON EQUAL (CEO) SIGNATURE: | DATE |
| | |
| CAPO REVISED AND APPROVED SIGNATURE: | DATE |
| | |
| PURCHASING AGENT SIGNATURE: | DATE |
| | |
| OFFICE OF CORPORATION COUNSEL: - APPROVED TO FORM & CORRECTNESS. | DATE |
| | |
| CONTROLLER: - CERTIFIED AS TO SUFFICIENCY OF APPROPRIATION OR AVAILABILITY OF FUNDS | DATE |

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|---|---------------------|---------------|
| <i>This section is utilized when and as needed:</i> | | |
| | | |
| 24 | ENGINEER/ARCHITECT: | COMPANY/FIRM: |
| | | DATE: |