|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | | | CHANGE DIRECTIVE NUMBER: | | | Click here to enter text. |
|  | | | DATE: | | | Click here to enter a date. |
|  | | |  | | |  |
| PROJECT NAME: Click here to enter text. | | | UR PROJECT NO.: | | | Click here to enter text. |
| CONSULTANT’S PROJECT NO.: | | | Click here to enter text. |
| Location: Click here to enter text. | | |  | | |  |
|  | | |  | | |  |
| FROM: | | |  | | |  |
| Contractor: Click here to enter text. | | | CONTRACT FOR: | | | Click here to enter text. |
|  | | |  | | |  |
| Address: | | |  | | |  |
| Click here to enter text. | | |  | | |  |
| Click here to enter text. | | |  | | |  |
| Click here to enter text. | | |  | | |  |
| Click here to enter text. | | |  | | |  |
|  | | |  | | |  |
| You are hereby directed to make the following change(s) in this Contract. | | | | | | |
| (Description of proposed changes and/or list of attached information) | | | | | | |
| Click here to enter text. | | | | | | |
|  | | | | | | |
| Proposed Adjustments: | | | | | |  |
| 1. The proposed basis of adjustment to the Contract sum is: | | | | | | |
| Cost of labor & material, not to exceed $Click here to enter text. | | | | | | |
| |  | | --- | | Unit Price of $Click here to enter text. per Click here to enter text. | | | | | | | |
| As further described below | | | | | |  |
| Click here to enter text. | | | | | |  |
|  | | | | | | |
| 1. The Contract Time is: | | |  | | |  |
| Proposed to remain unchanged. | | |  | | |  |
| Proposed to add/deduct Click here to enter text. days to Contract Time | | | | | | |
|  | | |  | | |  |
| When signed by the Owner and Consultant and received by the contractor, this document becomes effective IMMEDIATELY as a Construction Change Directive, and the contractor shall proceed with the change(s) described above. | | | | | | |
| **Owner Signature:** |  | | **Consultant Signature:** |  | | |
| **Print Name:** | Click here to enter text. | | **Print Name:** | Click here to enter text. | | |
| **Date:** | Click here to enter a date. | | **Date:** | Click here to enter a date. | | |
|  | | |  |  | | |
| Contractor signature indicates agreement with the proposed adjustments in Contract Sum and contract Time as set forth in this Directive. | | | | | | |
| **Contractor Signature:** | |  | | |  | |
| **Print Name:** | |  | | | **Date:** Click here to enter a date. | |
|  | |  | | |  | |
| **NOTE**: Change directives to be converted to Change Orders subject to the general conditions contractual requirements. The Contractor shall provide accurate cost and pricing data as outline in Article 7 of the General Conditions within three (3) days or as otherwise directed by the University Project Manager. | | | | | | |