

CHPRC - CHANGE FORM

CHANGE IDENTIFICATION			
Change Order No.:	Contractor:	Date:	
Contract No.:	Contract Title:		
<input type="checkbox"/> Contractor requested proposed change.	<input type="checkbox"/> CHPRC requested/directed proposed change.		
Requestor Name:	Phone:		
Change (General description):			
Reason for Change / Benefits (Attach additional sheets if necessary. Also, attach a redline markup of the Statement of Work [SOW] to show where the proposed change fits <u>within</u> the scope of the current SOW.):			
BASELINE CHANGE			
Impact to Price (Cost) / Schedule:			
Price (Cost) Change \$	Schedule Change: days		
_____ OR _____			
Contractor Project Manager		CHPRC Buyer's Technical Representative (BTR)	
APPROVALS			
<input type="checkbox"/> Approved <input type="checkbox"/> Accepted	<input type="checkbox"/> Rejected	<input type="checkbox"/> Need More Information	_____ CHPRC BTR or Contractor (BTR signature confirms funding availability)
<input type="checkbox"/> Approved	<input type="checkbox"/> Rejected	<input type="checkbox"/> Need More Information	_____ CHPRC Contract Specialist
Change Order/Modification No.: /	Notice to Proceed Date:	Not-to-Exceed Value: \$	

- Note:**
1. Attach current SOW (with redline mark up of changes, including markups to SOW Sections 7.0 and 8.0 showing cost and/or schedule impacts, if applicable).
 2. Fee to be negotiated/established by Contractor.