CHANGE ORDER

No: _____

To		Job Name/Number	Job Phone
Attn		Job Location	
Address		Existing Contract Number	
City, State, Zip		Existing Contract Date	
Phone	Date	Time Extension	

We hereby agree to make the following change(s):		***Amount +/-***	
	TOTAL PRICE FOR CHANGES		
	REVISED CONTRACT TOTAL		
	REVISED CONTRACT TOTAL		

THIS CHANGE ORDER BECOMES PART OF AND IN CONFORMANCE WITH THE EXISTING CONTRACT.

We hereby agree to make the change(s) specified above at the price indicated per this Change Order.

The prices and specifications of this Change Order are satisfactory and are hereby accepted. All work is to be performed under the established terms and conditions specified in the original contract unless otherwise specified.

Authorized Contractor Signature

Owner Signature

Date of Acceptance

Date of Acceptance

Form 3007, Printed by: