



# Texas General Land Office Disaster Recovery

## Construction Contract Change Order Request Form

<b>Engineer:</b>  (Name & Address)   <b>Phone No.:</b>	<b>Owner (Contractor Locality):</b>  (Name & Address)   <b>Phone No.:</b>	<b>Contractor:</b>  (Name & Address)   <b>Agreement Date:</b> <b>Phone No.:</b>	
<b>Date:</b> <b>Project Code No.:</b>  <b>Bid Package No.:</b>	<b>Contract For (Project Description):</b>	<b>GLO Contract No.:</b>  <b>Change Order No.:</b>	
You are hereby requested to comply with the following changes from the contract plans and specifications:			
Item No.	Description of Changes: Quantities, Units, Unit Prices, Change in Completion Scheduled, Etc.	Decrease in Contract Price	Increase in Contract Price
<u>Change in Contract Price</u>		<u>Change in Contract Time (Calendar Days)</u>	
Original Contract Price:           \$		Original Contract Time:           days	
Previous Change Order(s): No. 1    to No.           \$		Net Change From Previous Change Orders:           days	
Contract Price Prior to this Change Order:           \$		Contract Time Prior to this Change Order:           days	
Net Increase/Decrease of this Change Order:           \$		Net Increase/Decrease of this Change Order:           days	
Contract Price With all Approved Change Orders:    \$		Contract Time With all Change Orders:           days	
Cumulative Percent Change in Contract Price (+/-): %		Grantee Contract End Date: (mm/dd/yy)           /    /	
Construction Contract Start Date: (mm/dd/yy)           /    /		Construction Contract End Date: (mm/dd/yy)           /    /	

Reimbursements of costs included in this change order are subject to review by the GLO-DR program.

**\* This document may be executed prior to submission for GLO-DR program review, but all parties involved will be held responsible if the change order or the amendment warranted as a result of this change order is not in compliance with CDBG or HUD requirements.**

**RECOMMENDED:**

By: \_\_\_\_\_  
ENGINEER

Date: \_\_\_\_\_

**APPROVED:**

By: \_\_\_\_\_  
OWNER

Date: \_\_\_\_\_

**ACCEPTED:**

By: \_\_\_\_\_  
CONTRACTOR

Date: \_\_\_\_\_

**JUSTIFICATION FOR CHANGE**

1. Will this Change Order increase or decrease the number of beneficiaries?	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> No Change
If there is a change, how many beneficiaries will be affected? Total _____ L/M _____			
2. Effect of this change on scope of work:	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> No Change
3. Effect on operation and maintenance costs:	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> No Change
4. Are all prices in the change order dependent upon unit prices found in the original bid?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If "No", explain:			
5. Has this change created new circumstances or environmental conditions which may affect the project's impact, such as concealed or unexpected conditions discovered during actual construction?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
If "Yes", is an Environmental Re-assessment required?			
6. Is the Texas Commission on Environmental Quality (TCEQ) clearance still valid? (if applicable)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
7. Is the TCEQ permit approval still valid? (sewer projects only)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
8. Are the handicapped access requirements/approval still valid? (if applicable)		<input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Are other Disaster Recovery contractual special condition clearance still valid?		<input type="checkbox"/> Yes <input type="checkbox"/> No	
(If no, specify):			

**NOTE:**

- \* Generally, a cumulative change in the contract price in excess of 25% cannot be reviewed (18% **decrease** for counties).