

INFORMAL CHANGE ORDER AUTHORIZATION FORM

 Construction Management [ ]  INFORMAL

 1180 Military Tribute Place, Henderson, NV 89074

 Telephone Number (702) 799-8710 / Fax Number (702) 799-0772 [ ]  PHONE QUOTE

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| PROJECT INFORMATION |

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| COA#:       | DATE:       |
|  FACILITY NAME:       | CCSD PROJECT #:       |
| PROJECT TITLE:       | SF#:       |

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| CONTRACTOR INFORMATION |
| CONTRACTOR:       | CONTACT PERSON:       |
| PHONE NUMBER:       | EMAIL ADDRESS:       |
| SF INFORMATION |
| ORIGINAL SF AMOUNT:       | PRIOR COA AMOUNTS > | COA #1:       | COA #2:       |
| RECOMMENDED COA AMOUNT:       | COA #3:       | COA #4:       |
| NEW TOTAL SF AMOUNT: $0.00 |

# A/E [ ]  CCSD [ ]

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| CONTRACTOR’S PROPOSED COST:       | COST REVIEW:  |
| ADJUSTED AMOUNT:       |
| REASON(S) for DENIAL or ADJUSTMENT:       |
| CONTRACTOR’S PROPOSED TIME:       | TIME REVIEW:  |
| ADJUSTED TIME:       |
| REASON(S) for DENIAL or ADJUSTMENTS:       |

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| CCSD USE |

**CATEGORY** – Please check one of the following

 [ ]  UNFORESEEN CONDITIONS [ ]  DESIGN DEFICIENCIES – VA [ ]  DESIGN DEFICIENCIES – NVA [ ]  GOVERNMENT LEVIED [ ]  CREDIT

[ ]  CCSD REQUESTED       IF CCSD REQUESTED – DEPT/OTHER:

EXPLANATION FOR CHANGE:

PROJECT MANAGER DATE COORDINATOR DATE

DIRECTOR IV DATE

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| [ ]  APPROVED [ ]  DENIED |
| REASON(S) for DENIAL or ADJUSTMENTS:       |

APPROVED BY: **CHIEF OF FACILITIES** DATE