

[Your Company Name]

[Address] · [Phone] · [Email] · [License #]

CHANGE ORDER

Project		Change order #	
Client		Date	
Job site address		Original estimate #	

DESCRIPTION OF CHANGE

What is being added, removed, or changed - specific enough that someone who wasn't there could picture it.

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LINE ITEMS (ENTER CREDITS AS NEGATIVE AMOUNTS)

Description of work	Labor / Mat.	Qty	Price	Amount

Change order admin fee (if any)	
Total for this change order (+/-)	
Previous contract total	
New contract total	

SCHEDULE IMPACT

[] No change to the schedule [] Adds ____ working days [] Other: _____

AGREEMENT

By signing, the client approves the change described above, its price, and its effect on the schedule. This change order becomes part of the original contract. All other terms of the contract remain the same. Work on this change begins after it is signed.

Client signature	Printed name	Date
Contractor signature	Printed name	Date