Change Order

Construction Company Address City, State, ZIP Phone Number

Date:	
Owner:	
Contractor:	
Project name:	
e order number:	

Phone Number	Project	name:	
	Change order nu	umber:	
Original contract date:			
You are directed to	make the following changes in th	nis contract:	
The original contract sum was:		\$	
Net amount of previous change orders:			
Total original contract amount plus or minu	us net change orders:		
Total amount of this change order:			
The new contract amount including this cha	ange order will be:	-	
The contract time will be changed by the following number of days:		() Days	
The date of completion as of the date of thi	s change order is:		
Contractor:	Owner:		
Company name	Name		
Address	Address	Address	
City, State, Zip	City, State, Zip	City, State, Zip	
Date	Date	Date	
Signature	Signature	Signature	