



State Assistance in Watershed Dam Construction / Rehabilitation
Change Order

SITE NO.: _____
DISTRICT: _____

TO (CONTRACTOR): _____
ADDRESS: _____

YOU ARE HEREBY REQUESTED TO COMPLY WITH THE FOLLOWING:

| Item No. | Applicable General Provision | Change | Increase in Contract Cost | Decrease in Contract Cost |
|----------|------------------------------|--------|---------------------------|---------------------------|
| | | | \$ | \$ |
| TOTAL | | | \$ | \$ |

Net: (INCREASE) (DECREASE) In Contract Cost \$

The Completion Date of the Contract is: (not changed) (extended) (reduced) by _____ calendar days.
Revised Completion Date: _____
List of Attachments: (If none, so state) _____
Original Contract Price: \$ _____ Revised Contract Price: \$ _____

THIS MODIFICATION IS HEREBY MADE A PART OF THE CONTRACT:

SIGNED: _____ ACCEPTED: _____
CONTRACTING OFFICER CONTRACTOR
DATE: _____ DATE: _____

Some changes may require revised plans and prior approval by DWR.