

## REQUEST FOR CHANGE ORDER #\_\_\_\_

| Purchase Order/ Contract #:   |   | Change Order Request Date:                                     |  |
|---|---|--|--|
| Company Name:   |   |  |  |
| Contract Title:   |   |  |  |
| NOTE: The above referenced contract is for a fixed not to exceed amount and scope of services. For any change to the contract   |   |  |  |
| amount or scope of services this form must be completed and signed by the contractor and approved and authorized by the   |   |  |  |
|   |   | yond the dollar amount or scope of the original, or previously |  |
|   | led contract/purchase order.                          |  |  |
| Item  | <b>Description</b>                                    | Amount   |  |
| <u>A</u>  | Original contract value (without contingency)         |  |  |
| B   | Total amount of previous change orders for contract ( | not contingency)   |  |
| C   | Total current contract amount (A + B)                 |  |  |
| D   | Amount of this change order for contract (+ or -)     |  |  |
| E   | Revised contract amount (C + D)                       | (D/C)  |  |
| F   | Percent of current contract amount this change order  | epresents (D/C)  |  |
| G   | Cumulative percent of all change orders (B + D)/A     |  |  |
| <u>H</u>  | Original contract completion date                     |  |  |
| I   | Revised contract completion date                      |  |  |
| J   | Total amount of contingency                           |  |  |
| K   | Amount of this contingency funds request              |  |  |
| L   | Amount of previous contingency funds approved         |  |  |
| M   | Contingency funds remaining                           |  |  |
| Reason for requested change: (if requesting approval for contingency funds, date extension by a total of 30 days or more, identify % and amount on contract)  |   |  |  |
| For Village Use Only: IN ACCORDANCE WITH 720 ILCS 5/33E-9 this section shall only apply to a change order or a series of change orders which authorize or necessitate an increase or decrease in either the cost of a public contract by a total of \$25,000 or more or the time of completion by a total of 30 days or more (up to 180 days).  As the authorized designee of the Village of Orland Park to approve a change order to this public contract, I hereby make the following written determination regarding this change order and authorize and approve the same: |   |  |  |
| The circumstances said to necessitate the change in performance were not reasonably foreseeable at the time the contract was signed   |   |  |  |
| The change is germane to the original contract as signed  |   |  |  |
| The change order is in the best interest of the Village of Orland Park and authorized by law  |   |  |  |
| This written determination and this written change order resulting from that determination shall be preserved in the contract's file which shall be open to the public for inspection.  |   |  |  |
| Company Name:   |   | Village of Orland Park   |  |
| Signature:  |   | Signature:   |  |
| Printed Name:   |   | Printed Name:  |  |
| Title:  |   | Title:   |  |
| Date:   | Date· Date·   |  |  |