

Eastern Kentucky University
Facilities Management

CHANGE ORDER

(Advice of Change)

Date:

Page of

Purchase Order Number
RCF Number

Change Order No:

FOR OFFICE USE ONLY							
FY	CHART	FUND	ORG	PROGRAM	ACCOUNT	ACTIVITY CODE	AMOUNT

VENDOR NAME	EKU Vendor ID
	Location: ☐ Main Campus ☐ Extended Campus ☐ Other: ☐
Complete Mailing Address	

Project Title:

THIS DOCUMENT SHALL BECOME AN AMENDMENT TO THIS CONTRACT AND ALL PROVISIONS OF THIS CONTRACT WILL APPLY THERETO

Item No	Itemized Description of Change(s)* (Attach Additional Documentation if Necessary)	Amount (+)(-) of Change

COMPLETION OF THIS BLOCK NOT REQUIRED WHEN AMENDING A/E CONTRACT		** APPROVED **			
To the best of my knowledge and belief, the cost or pricing data submitted is accurate, complete and current.				Net Increase: \$ -	
Signed: _____ Contractor Date		Project Manager _____ Date		Net Decrease: \$ -	
Signed: _____ Architect/Engineer-Consultant Date		Associate VP - FM & Safety _____ Date			
				Original Purchase Order Price	
Consulting Firm Name					
CONTRACT COMPLETION DATE IS ALTERED BY _____ CALENDAR DAYS				Previous Change Order (Net)	
				\$ -	
REVISED COMPLETION DATE:					
				Revised Purchase Order Price	

*Reason for change(s) must be printed or typed on the front of this form. Do not state reason(s) as: Requested by University.

Rev 01-23

Date	The date of submission of the Change Order form
Page ____ of ____	The page number followed by the total number of pages
Purchase order number	The official ECU document ID for work being completed
RCF number	ECU project number
Change Order number	The current change order request number, in sequential order
Vendor name	Name of your company
Vendor number	Official ECU Vendor ID number (900 number)
Location	Where work is being performed (check appropriate box, fill in "Other" portion if needed)
Project Name	The title of the project
Item Number	List of Vendor's product number(s)
Itemized description of change(s)	Explanation of changes of each Item Number
Amount	Cost increase or decrease per Item Number
Net Increase	Sum total of the net increase
Net Decrease	Sum total of the net decrease
Original Purchase Order Price	Sum total of the original purchase order
Previous change order Net	Net total of any previous change orders
Revised Purchase Order Price	Net increase/decrease of current change order request, plus original purchase order price, plus any previous change orders net
Contractor Signature	Please sign and date request
Architect/Engineer signature	Please sign and date request
Architect/Engineer Firm Name	Name of the consulting firm
Contract Completion date	Request the number of additional calendar days needed to complete the job
Revised Completion Date	The date the project will be completed based on the Change Order