CHANGE ORDER

Change order #: _____
Date: _____
Original estimate #: _____

FROM

Business name, address, phone, license #

CUSTOMER / JOB SITE

Name, job site address, phone, email

JOB DESCRIPTION

DESCRIPTION	QTY	RATE	AMOUNT

Net change (this change order) _____

Original contract total _____

Revised contract total _____

REASON FOR CHANGE / SCHEDULE IMPACT / WHEN IT IS PAID

CUSTOMER APPROVAL

Signature

Date