



CHANGE REQUEST FORM (CRF)

City Contract No. _____
 Project Name: _____
 Engineer: _____
 Contractor: _____

Requested By: _____
 Drawing: _____
 Problem Desc: _____

Revised Scope Description/Details

Contractor Acknowledgement: <input type="checkbox"/> No Change in Contract Amount is required. <input type="checkbox"/> A Change in Contract Amount is required: _____ <input type="checkbox"/> No Change in Contract Time is required. <input type="checkbox"/> A Change in Contract Time is required: _____ days	
_____ Architect / Engineer / Inspector / RPR	_____ Contractor
Change in Contract Amount is within the Contingency Amount authorized under Resolution No. _____ <input type="checkbox"/> Yes <input type="checkbox"/> No _____ _____ Engineer / Architect Project Manager	Proceed with Execution <input type="checkbox"/> Yes <input type="checkbox"/> No _____ _____ City Project Manager

Distribution: City Engineer; Central Files