

FACILITY PROFESSIONAL SERVICES (FPS)

**CONTRACT CHANGE ORDER
PROPOSAL (COP)**

| | |
|---------------------|--------------------|
| AGENCY _____ | CONTRACT NO. _____ |
| PROJECT TITLE _____ | COP No. _____ |

PROPOSAL REQUEST

TO: _____ (CONTRACTOR) PROPOSAL REQUEST DATE: _____

You are directed to prepare a cost proposal for the work described below and/or detailed on the attachments referred to:

REASON FOR CHANGE: DESIGN ERRORS DESIGN OMISSIONS AGENCY LATENT CONDITIONS
 CODE REQUIREMENTS VALUE ENGINEERING ALTERNATIVE PUBLIC WORKS CONSTRUCTION PHASE (W)

EXPLANATION: _____

DATE PROPOSAL REQUIRED: _____ CHANGE ORIGINATED BY: _____
 (14 days from Request Date, unless other date agreed to) PROPOSAL REQUESTED BY: _____

CONTRACTOR PROPOSAL

TO: _____ (A/E) TO: _____ PM (FPS)

WE AGREE TO PERFORM ALL CHANGE IN THE WORK DESCRIBED IN THE PROPOSAL REQUEST FOR:

CONTRACT SUM:

NO CHANGE } OF _____ \$ _____
 INCREASE }
 DECREASE } (WASHINGTON STATE SALES TAX NOT INCLUDED)

In accordance with the General Conditions, Cost Estimate Detail Sheet(s) are attached hereto.

CONTRACT TIME:

NO CHANGE } OF _____ CALENDAR DAYS
 INCREASE }
 DECREASE }

The foregoing amount covers everything required in connection with the change. All other provisions of the contract remain in full force and effect.

We understand that this proposal does not constitute authorization to proceed with the specified changes in the work until incorporation of this COP into a Change Order by the Department of Enterprise Services.

_____ BY _____
 CONTRACTOR SIGNATURE DATE

RECOMMENDATION

TO: The Department of Enterprise Services' Authorizing Signator

We have carefully examined this proposal and find the cost to be reasonable. Therefore, we recommend acceptance.

| | | | |
|--------------|------------|-----------------------------|------------|
| _____ | DATE _____ | FPS COST VERIFICATION _____ | DATE _____ |
| AGENCY _____ | DATE _____ | FPS PROJECT MANAGER _____ | DATE _____ |