



WAP CHANGE ORDER # _____

Client's Name: _____

Address: _____

Work Order #: _____

Original Contract Date: _____

Changes in the scope of work:

Item 1: _____

Justification for change: _____

Item 2: _____

Justification for change: _____

Item 3: _____

Justification for change: _____

Item 4: _____

Justification for change: _____

	Original Contractor Price	\$ _____
Adjustment (Add/Deduct):	_____	\$ _____
Adjustment (Add/Deduct):	_____	\$ _____
Adjustment (Add/Deduct):	_____	\$ _____
Adjustment (Add/Deduct):	_____	\$ _____
	New Contract Price	\$ _____

Weatherization Auditor

Site Visit Date

Contractor's Signature

Date

Jason Estes, Director, CAC Housing & Energy Services

Date

Fiscal Officer's (or Authorized Representative's) Signature

Date