STATE OF NEW JERSEY
SCHOOLS DEVELOPMENT AUTHORITY

CONTRACT CHANGE REQUEST/AUTHORITY (CCR/A)

NJSDA Form 500

Date: _____ **CCR/A No.:** _____

Contract No.: _____ **RFI No.:** _____

Contractor Name: _____ **School Name:** _____

PMF/CM: _____ **NJSDA Region:** _____

PMF/CM/PM: _____ **District Name:** _____

Design Consultant Firm: _____

Please submit an itemized proposal for changes in the Contract Sum and/or Time incidental to proposed modifications to the Contract Documents described herein.

☐ Lump Sum Proposal (Hrs., Materials, & Equipment) ☐ Lump Sum Proposal (Unit Costs) ☐ Time and Material

THIS IS NOT A CHANGE ORDER NOR A DIRECTION TO PROCEED WITH THE WORK DESCRIBED HEREIN.

Description:

Cause/Reason:

☐ Owner Initiated ☐ Differing Site Conditions ☐ Design Consultant E/O **(Change Orders Only)**

Justification: (Reason for Change)

CCR/A No.: _____

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Attachment: (Include RFI, Bulletin, or any other document supporting this CCR/A)

Requested By:

Signature

Date

Print Name

Firm

CCR/A No.: