

**UNIVERSITY OF ILLINOIS  
CONSTRUCTION CONTRACT CHANGE ORDER for**

- **Contractor (no assignment)**

UI Change Order No. \_\_\_\_\_  
 UI RFP/EWA No. \_\_\_\_\_  
 Change Order Amount \_\_\_\_\_  
 UI Document No. \_\_\_\_\_  
 UI Encumbrance No. \_\_\_\_\_

Project Name \_\_\_\_\_

UI Project No. \_\_\_\_\_

Contractor Name/ Address \_\_\_\_\_

Division of Work \_\_\_\_\_

PSC Project No. \_\_\_\_\_

Contractor Project No. \_\_\_\_\_

The above referenced contract is hereby amended to provide for the following described change(s) upon the terms set forth below:

Contractor shall provide: (SCOPE)

<b>Original Calendar Days to Complete the Work</b>	_____	<b>Original Contract Amount</b>	\$ _____
<b>Increase/(Decrease) in Calendar Days by Previous Change Orders</b>	_____	<b>Total of Previous Change Order(s)</b>	\$ _____
<b>Increase/(Decrease) in Calendar Days by this Change Order</b>	_____	<b>Increase/(Decrease) by this Change Order</b>	\$ _____
<b>Current Calendar Days to Complete the Work</b>	_____	<b>Revised Contract Amount</b>	\$ _____
<b>Revised Substantial Completion Date</b>	____/____/____		

*As changed hereinabove, the above referenced contract shall continue in full force and effect.*

CLASSIFICATION (for UI use only)							BUDGET/SCOPE (for UI use only)	
Client Request	PSC Error	CM Error	Code/Std	Unforeseen Conditions	Liquidated Damages		Does NOT affect project budget and/or scope	
Staff Changes/Scope	PSC Omission	CM Omission	Delivery/Schedule	Closeout	Crisis Response		Affects project budget and/or scope (see attached documentation)	

Chart *	Fund *	Organization *	Account *	Program *	Activity	Location

**THE UNDERSIGNED HEREBY CERTIFY THAT THIS CONTRACT CHANGE ORDER IS GERMANE TO THE ORIGINAL CONTRACT AS SIGNED AND THAT THE CIRCUMSTANCES NECESSITATING THIS CONTRACT CHANGE ORDER WERE NOT REASONABLY FORESEEABLE AT THE TIME THE CONTRACT WAS SIGNED. THIS CONTRACT CHANGE ORDER IS IN THE BEST INTEREST OF THE UNIVERSITY OF ILLINOIS AND IS AUTHORIZED BY LAW.**

**PSC/CM/Contractor Approvals**

**University of Illinois Approvals**

Contractor \_\_\_\_\_ Date \_\_\_\_\_  
 Construction Manager (CM) (if applicable) \_\_\_\_\_ Date \_\_\_\_\_  
 Professional Services Consultant (PSC) \_\_\_\_\_ Date \_\_\_\_\_

Campus \_\_\_\_\_ Date \_\_\_\_\_  
 Board of Trustees of the University of Illinois—Interim Comptroller,  
 Paul N. Ellinger

Document Source: Template No Changes

Contract Type: Capital

Contract Sub Type: Construction