

## OFFICE OF REAL ESTATE & FACILITIES

Mississippi Board of Trustees of State Institutions of Higher learning

## **CHANGE ORDER SUMMARY**



Attachment to Request for Project-Related STAFF Approvals (Form A.)

	To Associate Commissions of Book Folds & Fortility							
To: Associate Commissioner of Real Estate & Facilities								
Institution Name:						Submission Date:		
Project Number:					Change Order Number:			
Project Name:						Change Order Amount:		
r roject Name.						Contract Days (+/-):		
Previous Date of Contract Completion:						New date of Contract Completion: (if applicable)		
Previous Contract Amount:						New Contract Amount:		
I. Type of Change Order: (List Type for each item in Sec III below)								
٧								
	Type I. Changes in requirements or recommendation by governmental agencies: i.e., revisions in building codes, safety or health regulations, controls on materials specified, etc.							
П	Type II.		id omissions in plans and spe	IHL Staff Use Only				
	Type III. Latent job site conditions					1		
	Type IV. Weather					1		
	Type V.		ner Requested Modification	1				
II.			•					
٧		Check all that apply						
Ħ	Design Professional			<b>√</b>	Institution			
	Contractor			П	Board of Trustees			
☐ Bureau of Buildings					Other (Please explain below)	1		
Ш	III. Description of Change Order: (attach additional sheets if needed)							
	IV. Justification:							
	V. Required Attachments to this Document:							
٧	V Attached Items Checked							
	Copy of Bureau of Buildings, Grounds & Real Property Management Change Order Form or University Equivalent							
Ш	Back-up information							
Detailed cost-breakdown								
VI. Signatures:								
Preparer's Signature:								
	Preparer's Name and Title:							
						Date of Signature:		