**SE-695 MODIFICATION NO.:**

**CONSTRUCTION SERVICES TASK ORDER MODIFICATION**

**AGENCY:**

**TASK ORDER PROJECT NAME:**

**TASK ORDER PROJECT NUMBER:**

**TASK ORDER CONTRACT PROJECT NUMBER:**

**CONTRACTOR:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **TASK ORDER CONTRACT**  **COST INFORMATION:** | | | | |
| **1**. | Maximum Total Potential Amount of this TOC: |  | $ 4,000,000.00 |
| **2**. | Maximum Total Amount Allowed for Task Order: | $ 350,000.00 |  |
| **3**. | Current Amount of this Task Order: | $ |  |
| **4**. | Amount of this Modification: | $ |  |
| **5**. | Adjusted Amount of this Task Order | $ 0.00 |  |
| **6**. | TOC Total Prior to this Modification (Sum of all Task Orders, including this one): |  | $ |
| **7**. | TOC Total Including this Modification (Sum of all Task Orders): |  | $ 0.00 |
| **8**. | Balance Remaining for this TOC: |  | $ 4,000,000.00 |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SCHEDULE:** | | | | |
| **1**. | Date of Commencement: |  |  |
| **2.** | Previous Days Allowed To Complete the Task Order: |  |  |
| **3.** | Additional Days Added with this Modification: |  |  |
| **4.** | Revised Date of Substantial Completion: |  |  |

**DESCRIPTION OF TASK ORDER SCOPE MODIFICATION:** *(attach Contractor’s Proposal)*

**LIST OF TASK ORDER MODIFICATION DOCUMENTS:** *(refer to attachments as necessary)*

The Agency and the Contractor hereby agree, as indicated by the signatures below, to the revised scope of work identified in the Modification Documents listed above, the Contractor’s Quote dated the      day of      , 20    , and this Task Order Modification, which shall be assigned to the Task Order Contract identified above.

**TASK ORDER, INCLUDING MODIFICATION, IS WITHIN AGENCY CONSTRUCTION CONTRACT CERTIFICATION:**

***(Agency MUST check one)* Yes  No**

**IF “NO”, OSE APPROVAL OF TASK ORDER DOCUMENTS:**

*(Signature of OSE Project Manager) Date*

|  |  |
| --- | --- |
| **AGENCY:** | **CONTRACTOR** |
| **BY:**  *(Signature of Representative)* | **BY:**  *(Signature of Representative)* |
| **PRINT NAME:** | **PRINT NAME:** |
| **PRINT TITLE:** | **PRINT TITLE:** |
| **DATE:** | **DATE:** |