

**CHANGE REQUEST #  
Request for Proposal**

ISSUE DATE: MM/DD/YY

ISSUED TO: Contractor  
Contractor Address  
Contractor City, State, Zip

PROJECT: ISU Project Title

Please submit an itemized quotation for changes in the contract sum for proposed modifications to the contract documents described herein and attach to this form. Time extensions, if any, must be stated in your quotation. Such extensions of time shall be calculated in calendar days. Time extensions not addressed in quotation will not be considered once approval of CR is given.

Add or Deduct of \$ \_\_\_\_\_

A time extension of \_\_\_\_\_ calendar days is requested for the proposed changes.

**DESCRIPTION:** Detailed description of work to be performed.

**ATTACHMENTS:** Attachments to the Change Request will be listed here.

**DOCUMENT REFERENCE (Drawing Numbers/Spec Sections):** Document References will be listed here.

***RESPONSE MUST BE RETURNED WITHIN TWO (2) WEEKS OF THE ISSUE DATE ABOVE***

**RETURN TO:** Construction Services, Iowa State University, 2<sup>nd</sup> Floor General Services Building, Ames, IA 50011-4021

When Request for Proposal is signed by both Owner and Contractor and a copy is returned to Contractor, approval of change(s) is effective IMMEDIATELY and Contractor shall proceed with the change(s) described above. Approved changes will be included in a future contract change order.

Submitted by **CONTRACTOR:**

Accepted by **IOWA STATE UNIVERSITY:**

\_\_\_\_\_  
Contractor's Representative

\_\_\_\_\_  
Owner's Representative

**DATE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Capital Project No: CP000123  
Work Order No: WO12345  
PO #: IX-12345-22

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