**STATE OF WISCONSIN**

**DEPARTMENT OF TRANSPORTATION**

**BUREAU OF AERONAUTICS**

**CHANGE ORDER**

CHANGE ORDER NO.: (#) BOA PROJECT #: (project) - ex. BOA1000

AIRPORT: (airport) AIP/SAP/SOP PROJECT #: (project) - ex. SAP-78

CONTRACTOR: (contractor) CONTRACT NUMBER: (contract #)

ORIGINAL CONTRACT AMOUNT: $(amount) REVISED AMOUNT: $(amount)

(Inc. CO #'s) (#)

DESCRIPTION OF WORK INCLUDED IN CONTRACT: (description)

Changes Ordered: (changes)

Reason for Change Order: (reason)

CONTRACT PRICE: CONTRACT TIME:

Not Changed  Not Changed

Increased by $($)  Increased by (days) Days

Decreased by $($)  Decreased by (days) Days

**ENGINEER**

Approval Recommended by: Title: Date:

**CONTRACTOR**

The foregoing change, work affected thereby, is subject to all contract stipulations and covenants.

Accepted by: Title: Date:

**BUREAU OF AERONAUTICS**

FAA coordination required:

No  Yes The foregoing change involves a federal grant and an addition or deletion of work in the basic grant scope or a time extension where liquidated damages may be involved, or a modification of the Standard FAA construction specifications.

Recommend Approval: Title: Date:

Approved by: Title: Director Date:

**CHANGE ORDER**

**COST/PRICE ANALYSIS**

**Change Order No**. (change order #)

**Analysis**: (analysis)

**Need for Change Order Under the Original Scope:**

(describe how the changes fall under the original project description or grant description)

**Is the Change Order Scope Appropriate?**

(describe how the change order's scope is appropriate within the context of the project. How does this change order help complete the original scope of the project?)

**Does This Work Advance AIP Policy and is Consistent with AIP goals/objectives of safety, security, environment, capacity and/or preserving airport infrastructure?**

(describe how the change order enhances safety, security, the environment, capacity, or preserve the functionality or condition of airport infrastructure)

**Verify This Work Utilized Applicable Advisory Circulars**

(describe which advisory circulars or standards govern the work)

**Verify the change in work involves allowable work as established in the AIP-Handbook**

(if the change order is federally-funded or partially federally-funded, please cite the AIP-Handbook reference that makes the cost eligible. If state or sponsor funded, please state which funding source is being used)

**Verify cost reasonableness, such as independent cost estimate, or a statement that you recommend the FAA accept the price as fair and reasonable**

(confirm that an independent engineering analysis was completed prior to analyzing the contractor's quote and the independent estimate used the same change order scoping documents provided to the contractor)

If federally-funded, please include the following: “It is recommended FAA accept this change order price as fair and reasonable.”

**Verify the change order does not adversely affect AIP procurement**

(describe how the final change order price was procured, including dates and negotiation notes from discussions with the contractor)

If federally-funded, please include the following: “This change order does not adversely affect AIP procurement per 2 CFR 200.”

**Buy American Analysis**

(describe any elements of the change order that would be subject to the Buy American requirements)

If federally-funded, please include the following: “No additional waiver request is necessary.” -or- “Attached is a Buy American waiver request for the materials used in this change order.”

**Is the DBE goal still achievable with this change order?**

(describe the contract's initial DBE goal, and whether or not this work will be performed or partially performed by a DBE contractor)

If federally-funded, please include the following: “The DBE achievement was increased/decreased by X%” -or- “The DBE achievement was not affected by this change order.”

**Verify the change order work is able to be classified under existing wage rates/determination**

(confirm that the work is able to be classified under existing wage rates included in the contract (ie no additional rates are needed, such as building wage rates). If not, please contact Shannon Clary at 608-264-7607.)

If federally-funded, please include the following: “The work is covered under the existing federal wage rates. No modifications for any classifications are necessary.” -or- “Modifications to the wage rates are included to cover the work within this change order.”

**If possible to be depicted, show map/drawing of change and specs used to solicit CCO quote**

(include a map (if you can depict the changes) and the specifications sent to the contractor to obtain a change order price. Also verify the changes occur within the limits of airspace approval. If outside airspace limits, submit points for study)

**Engineer's Estimate Prior to Analyzing Contractor’s Quote**:

(estimate - include information about how the engineer's estimate was generated, such as historical bid prices, etc.)

**Contractor's Quote (Analyzed after Engineer’s Independent Estimate)**:

(quote)

I have reviewed the contractor's price for the change order above and find that it is reasonable for the associated work.

Consultant

(initials)

568dev.dot/r.04/10/2018