

# Field Work Order



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To \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Field Work Order No. \_\_\_\_\_  
Contract No. \_\_\_\_\_  
Local No. \_\_\_\_\_

### Basis of Field Work Order

- |  |   |
|--|---|
| <input type="checkbox"/> Error / Omission  | <input type="checkbox"/> Differing Site Condition |
| <input type="checkbox"/> Owner Request     | <input type="checkbox"/> Field Resolution         |
| <input type="checkbox"/> Value Engineering | <input type="checkbox"/> _____                    |

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

### Contract Price (indicate if zero cost)

Add: \$ \_\_\_\_\_ Deduct: \$ \_\_\_\_\_

### Contract Time

No Change    \_\_\_ Days Added    \_\_\_ Days Deducted

### Cost Basis (check all that apply)

- |  |                                      |
|--|--------------------------------------|
| <input type="checkbox"/> Time & Material Not to Exceed | <input type="checkbox"/> Fixed Price |
| <input type="checkbox"/> Allowance (described below)   | <input type="checkbox"/> Unit Price  |

**Your company is authorized and directed to proceed with the following (attach additional sheets if needed):**

### Justification

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Special Notice: This Field Work Order identifies satisfaction of all compensation and time adjustments related to this change to the Work.

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### Construction Manager Recommendation

Name \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

### Contractor Concurrence

Name \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

### Associate Recommendation

Name \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

### Owner Acceptance and Funding Acknowledgement

Name \_\_\_\_\_

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_