Change Directive (Field Work Order) State of Ohio Standard Forms and Documents

Contractor Name Contact Address City, State ZIP Basis of Change Directive □ Error / Omission □ Differing Site Condition □ Owner Request □ Field Resolution □ Value Engineering □	Change Directive No. Contract No. Project Name Project Location Adjustment to Contract Sum (indicate if zero cost) Add: \$ Deduct: \$
Adjustment to Contract Time	Cost Basis (check all that apply)
☐ No Change Days Added Days Deducted	☐ Time & Material Not to Exceed ☐ Fixed Price ☐ Allowance (described below) ☐ Unit Price
Justification	
Special Notice: This Change Directive identifies satisfaction of all comp	pensation and time adjustments related to this change in the Work.
Construction Manager Recommendation (if applicable) Name	Owner Acceptance Name
Signature Date	Signature Date
Architect/Engineer Recommendation Name	Project Manager Recommendation Name
Signature Date	Signature Date
Contractor Concurrence Name	Contracting Authority Approval Name
Signature Date	Signature Date

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