

Date: \_\_\_\_\_  
 Permit No: \_\_\_\_\_  
 Job Address: \_\_\_\_\_

**PERMIT HOLDER INFORMATION**

Contractor / Company Name: \_\_\_\_\_  
 License Holder: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City/State/Zip: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_

**DESCRIPTION OF CHANGE ORDER**

Check all trade work affected by this change order request:

- Building/Structural     Electrical     Gas     Mechanical     Plumbing     Other

Narrative Description (attach additional sheets as necessary):

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Additional Construction Value: \$ \_\_\_\_\_

\_\_\_\_\_  
Contractor / Agent Signature
Printed Name
Date

**FOR OFFICE USE**

REVIEWS	COMMENTS / REMARKS	APPROVAL INITIALS / DATE
Zoning	_____	_____
Engineering	_____	_____
Fire	_____	_____
Building	_____	_____