

APPENDIX B

# CHANGE NOTICE FORM

CONSULTING SERVICES CONTRACT # 4400007410

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Commonwealth of PA **Insert Agency Name**

&

**Insert Contracts Name**

Purchase Order: **Insert purchase order number**

## A. Introduction

This Change Notice to Purchase Order # Insert Purchase Order is made this Insert the day day of Insert the Month, 20Insert the Year ("Effective Date"), by and between the Commonwealth of PA– Insert Agency Name ("Commonwealth") and Insert Vendor Name ("Contractor").

The Commonwealth and Contractor are responsible for promptly obtaining all required consents necessary to authorize the Contractor to perform the Services set forth in this Change Notice.

## B. Project Overview and Tasks

Contractor will perform the following tasks (the "Project"):

Contractor to insert exact description of work to be performed

Commonwealth Requirements:

Any requirements for the agency must be inserted here

## C. Time Estimates/Delivery Schedule

The Delivery Schedule for the Project will be as follows:

Ensure dates are provided

## D. Change Notice Cost

Change Notice Cost: \$ Insert Cost

(Ensure an exact costing breakdown is provided)

## E. SOW Acceptance

This Change Notice is acceptable to the Commonwealth and the Contractor. Intending to be legally bound, the Commonwealth and Contractor agree to modify the Statement of Work attached to the Purchase Order as outlined in this Change Notice.

**Approved:** Insert Approved Date (entered by the Commonwealth)

**Contractor**

**Commonwealth of PA "Agency"**

\_\_\_\_\_  
Authorized Contractor Signature

\_\_\_\_\_  
Authorized Agency Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

## F. Project Completed and Accepted

The project was completed in accordance with this Change Notice. The parties hereby accept as completed all work indicated in this Change Notice.

**Approved:** Date – entered by the Commonwealth

### Contractor

\_\_\_\_\_  
Authorized Contractor Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title Date

### Commonwealth of PA “Agency”

\_\_\_\_\_  
Authorized Agency Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Title Date

PLEASE ATTACH HARD COPY OF PURCHASE ORDER REFERENCING THIS CHANGE NOTICE