





# PHENOMENAL PRODUCTIONS

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## AMENDMENT/REVISION REQUEST FORM (*TEMPLATE*)

Ref No.: PP-AMR-240702-0007

### PROJECT INFORMATION:

Project Title: \_\_\_\_\_

Client Name: \_\_\_\_\_

Original Start Date: \_\_\_\_\_

Project Reference (if known): \_\_\_\_\_

### REQUESTED BY:

Requested By: [Client's Name or Representative]

Date of Request: [Insert Date]

Contact Email: [email@example.com]

Phone: [Client Phone Number]

### DESCRIPTION OF AMENDMENT/REVISION:

Describe the exact nature of the change requested. Include what section of the service it affects, and any specific goals or instructions.

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**REASON FOR REQUEST:**

State the reason(s) for requesting this change:

**IMPACT SUMMARY (To be completed by Phenomenal Productions):**

Item	Affected?	Explanation / Adjustment
Cost	<input type="checkbox"/> Yes <input type="checkbox"/> No	[e.g., + <del>N</del> 10,000 for extra screen]
Delivery Timeline	<input type="checkbox"/> Yes <input type="checkbox"/> No	[e.g., Add 4 extra working days]
Scope or Features	<input type="checkbox"/> Yes <input type="checkbox"/> No	[e.g., Replace blog with video player]

**AUTHORISATION AND APPROVAL:**

<b>CLIENT ACKNOWLEDGEMENT</b>	<b>PHENOMENAL PRODUCTIONS APPROVAL</b>
Name: _____	Name: Abiodun Ojo
Signature: _____	Signature: _____
Date: _____	Date: _____

**NOTES:**

All approved changes will be reflected in the updated project timeline and cost breakdown. This form becomes part of the official project agreement once signed.