

ADDITIONAL WORK AUTHORIZATION

The complete flooring source.

82 Modular Avenue, Commack, NY 11725
Phone: 631-993-3000 • Fax: 631-993-3060

9/11/18

OWNER'S NAME STREET	JOB NAME STREET	PHONE	DATE
CITY EXISTING CONTRACT NUMBER	STATE		9/11/18
	DATE OF EXISTING CONTRACT	CITY	JOB NUMBER

You are authorized to perform the following specifically described additional work:

Trep Subfloor 6TH floor

- Apt # 6A: 4 bags
 # 6B: 3 bags
 # 6C: 3 bags
 # 6D: 2 bags
 # 6E: 4 bags
 # 6F: 2 bags
 # 6G: 2 bags
 # 6H: 1 bag
 # 6I: 1 bag
 # 6K: 1 bags
 # 6L: 1 bag
 # 6M: 1 bag
 # 6N: 1 bag
 # 6O: 1 bag
- 9/19/18 Verifed materials used.*

ADDITIONAL CHARGE FOR ABOVE WORK IS: \$ _____

Payment will be made as follows:

Above additional work to be performed under same conditions as specified in original contract unless otherwise stipulated.

Date _____ Authorizing Signature _____

We hereby agree to furnish labor and materials - complete in accordance with the above specifications, at above stated price.
 Authorized Signature *Sir* (CONTRACTOR SIGNS HERE)

Date 9/19/18 (OWNER SIGNS HERE)
THIS IS CHANGE ORDER NO. _____
 NOTE: This Revision becomes part of, and in conformance with, the existing contract.

