

## CONTRACTOR'S COST PROPOSAL FOR CHANGE ORDER (2)

*(Use this form for items that do not include overhead & profit, prime contractor's profit, and insurance costs in their cost calculations. **Note:** Within 14 ccds max. from receipt of Part A of the Contract Change Form, Contractor must complete their cost proposal and be fully prepared to attend all scheduled negotiation meetings.)*

PROJECT NAME \_\_\_\_\_ CONTRACT REG. NO \_\_\_\_\_ VENDOR'S NAME \_\_\_\_\_ C.O. NO. \_\_\_\_\_

A. ITEM NO. ☼	B. ITEM DESCRIPTION	C. QTY	D. UNIT	E. UNIT'S MATERIAL COST	F. UNIT'S LABOR COST	G. UNIT'S EQUIPMENT COST	H. UNIT PRICE * (E + F + G)	I. CONTRACTOR'S ESTIMATE (H X C)

**Notes:**

1. ☼ Identify all items to be subcontracted with a star.
2. \* Designate all unit prices that are original bid or contract unit prices with an asterisk.
3. Detailed back-up documentation, as required, must be available at the site for auditing purposes for all costs shown above.
4. Evidence of all insurance increases and subcontracted work must be submitted at time of payment.

<b>SUBTOTALS (THIS SHEET)</b>	\$
ADDITIONAL INSURANCE COST (____%)	\$
SUBTOTAL .....	\$
OVERHEAD & PROFIT @ _____ %	\$
SUBCONTRACTORS' SUBTOTAL: \$ _____ (x) 5%	\$
<b>SHEET TOTAL</b> .....	\$
<b>GRAND TOTAL (LAST SHEET)</b>	\$

**PREPARED BY:**

\_\_\_\_\_  
(Contractor's Name) (Title) (Signature) (Date)