|  |  |  |  |
| --- | --- | --- | --- |
| **CHANGE NOTICE** | | | |
| Originator: | Change Notice Number: | |  |
| Date: | Contract Number: | |  |
| Subcontractor: | | | |
| References: | | | |
| Comments: | | | |
| Attachments:  **ð** Drawings **ð** Specifications **ð** Other | | | |
| **Description of Work:** | | | |
| Instructions:  Please proceed with work immediately. Submit Impact Statement within days.  Please DO NOT proceed with work. Submit Impact Statement within days. | | | |
| Issued for and on behalf of FLINT Corp. | | Received by and on behalf of Subcontractor: | |
| FLINT Corp. Representative: | | Subcontractors’ Representative: | |
| Signature: | | Signature: | |
| Name: | | Name: | |
| Title: | | Title: | |
| Date: | | Date: | |