STATE TRANSPORTATION Page 1 of



Lock Form

**CHANGE ORDER**

DOT CEM-4900 (REV 09/2025) Change Requested By:  Contractor  Engineer

|  |  |  |
| --- | --- | --- |
| TO  , Contractor | | CONTRACT NUMBER |
| COUNTY - ROUTE - Begin Postmile / End Postmile |
| FROM  RESIDENT ENGINEER | |
| PROJECT IDENTIFIER NUMBER |
| CHANGE ORDER NUMBER | SUPPLEMENT NUMBER | FEDERAL NUMBER |

*You are directed to make the following changes from the plans and specifications or do the following described work not included in the plans and specifications for this contract.*

In accordance with Section 4-1.05, "Changes and Extra Work," of the Standard Specifications, as a result of the U.S. Department of Transportation's interim final rule (IFR) effective October 3,2025 modifying the Disadvantaged Business Enterprise (DBE) program (49 CFR 26), the following modifications are made:

Standard Specifications and Special Provisions:

 Section 2-1.12, "Disadvantaged Business Enterprises," is deleted in its entirety.  Section 5-1.13B, "Disadvantaged Business Enterprises," is deleted in its entirety.

Special Provisions:

 The Notice to Bidders is revised to read "There is no DBE goal."

SAMPLE



There will be no additional payment to you or credit to the Department as a result of the work described.

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No time adjustment will be made, since the work described in this change order will not result in a critical delay.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| STATE | TRANSPORTATION | Page | 2 | of |
| **CHANGE ORDER** |  |  |  |  |
| DOT CEM-4900 (REV 09/2025) | Change Requested By: | Contractor | Engineer | |

|  |  |  |
| --- | --- | --- |
| TO  , Contractor | | CONTRACT NUMBER |
| COUNTY - ROUTE - Begin Postmile / End Postmile |
| FROM  RESIDENT ENGINEER | |
| PROJECT IDENTIFIER NUMBER |
| CHANGE ORDER NUMBER | SUPPLEMENT NUMBER | FEDERAL NUMBER |

**CHANGE ORDER SUMMARY**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Estimated Cost: **$** |  | For this order, the time of completion will be adjusted as follows: | | | | | |
|  |  |  | days |  | Increase |  | Decrease |
| Increase Decrease | No Cost |  | No Time Adjustment Time Adjustment Deferred | | | | |

**REQUIRED FOR ALL CHANGE ORDERS**

I agree that by providing my electronic signature for this form, I agree to conduct business transactions by electronic means and that my electronic signature is the legal binding equivalent to my handwritten signature. I hereby agree that my electronic signature represents my execution or authentication of this form, and my intent to be bound by it.

|  |  |  |
| --- | --- | --- |
| **SUBMITTED BY** | | |
| SIGNATURE | PRINT NAME AND TITLE | DATE |
| **RECOMMENDED APPROVAL BY** | | |
| SIGNATURE | PRINT NAME AND TITLE | DATE |
| **CONTRACTOR ACCEPTANCE BY** | | |

We, the undersigned Contractor, have given careful consideration to the change proposed and agree to provide equipment, furnish materials, and perform the work specified above, and will accept as full payment the prices shown above.

SAMPLE

|  |  |  |
| --- | --- | --- |
| SIGNATURE | PRINT NAME AND TITLE | DATE |

**This change order is not effective until approved by the Engineer. If you do not sign this order and you receive an approved change order, you are directed to proceed with the ordered work. You may file a Request for Information within the time specified.**

**CHANGE ORDER APPROVAL**

|  |  |  |
| --- | --- | --- |
| **ENGINEER APPROVAL BY** | | |
| SIGNATURE | PRINT NAME AND TITLE | DATE |