|  |  |
| --- | --- |
| moseal | STATE OF MISSOURIOFFICE OF ADMINISTRATIONDIVISION OF FACILITIES MANAGEMENT, DESIGN AND CONSTRUCTIONCHANGE OF SUBCONTRACTOR REQUEST |
| PROJECT NUMBER |
| PROJECT TITLE      | DATE      |
| PROJECT LOCATION      |
| REQUEST BY GENERAL CONTRACTOR |
| NAME      |
| REPRESENTING      |
| ADDRESS      |
|       |
| PHONE NUMBER   -   -     ext      | FAX NUMBER   -   -     |
| SUBCONTRACTOR/CONTRACTOR TO BE REPLACED |
| NAME      | CATEGORY OF WORK      |
| REPRESENTING      | MBE | [ ]  Yes[ ]  No |
| ADDRESS      | WBE | [ ]  Yes[ ]  No |
|       | SDVE | [ ]  Yes[ ]  No |
| PHONE NUMBER   -   -     ext      | FAX NUMBER   -   -     | SUBCONTRACT AMOUNT$      |
| REASON FOR CHANGE (select one of the following) |
| [ ]  Subcontractor will not perform the work as specified.EXPLANATION:       |  |
|
|
| [ ]  Attached is a letter from the Subcontractor/Contractor requesting release from Work on this project on his letterhead. |
| [ ]  Attached is documentation showing non-performance or non-responsiveness. |

|  |
| --- |
| PROPOSED REPLACEMENT SUBCONTRACTOR |
| NAME      | CATEGORY OF WORK      |
| REPRESENTING      | MBE | [ ]  Yes[ ]  No |
| ADDRESS      | WBE | [ ]  Yes[ ]  No |
|       | SDVE | [ ]  Yes[ ]  No |
| PHONE NUMBER   -   -     ext      | FAX NUMBER   -   -     | SUBCONTRACT AMOUNT$      |
| GENERAL CONTRACTOR SIGNATURE |
| **APPROVAL/DENIAL BY OWNER** |
| **RECOMMENDATION OF CONSTRUCTION REPRESENTATIVE** |
| [ ]  Approval [ ]  DenialREASON:       |
| PRINTED NAME      | SIGNED | DATE      |
| Request for Change from Subcontractor  to Subcontractor  with an MBE %, WBE %, SDVE % is:[ ]  Approved [ ]  DeniedREASON:       |
| PROJECT MANAGEMENT UNIT SECTION LEADER      | SIGNED | DATE      |

*Revised* 06/16 ORIGINAL: FILE/Construction Correspondence

 COPIES: Designer, General Contractor, Affected Subcontractors, Construction Representative