City of Miami

Capital Improvements & Transportation Sheet _____ of _____

CONTRACTOR CHANGE PROPOSAL REQUEST

Part B

A. ITEM NO. *	B. ITEM DESCRIPTION	C. QTY	D. UNIT	E. LABOR		F. MATERIAL (Including Equipemt)		G.UNIT PRICE # (E.1 + F.1)	TOTAL LINE ITEM PRICE (E.2 + F.2)
				1. Unit Cost	2. Total (E.1 X C)	1. Unit Cost	2. Total (F.1 X C)		
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Overhead		%	(self-perform)
Overhead		%	(subcontract perform)
Profit		%	(self-perform)
Profit		%	(subcontract perform)

NOTES:

1. ***** Identify all items to be subcontracted with an *****
2. # Designate all unit prices that are listed in contract
3. Detailed Back-up documentation may be requested to support stated costs

TOTAL (This Sheet)

GRAND TOTAL (Last Sheet)

Prepared By: _____

Title: _____ Signature _____ Date: _____