City of Miami
Capital Improvements & Transportation

Change Proposal Request

Part C

Contractor _____ **Change Order No.** _____

Project Title _____ **Project No.** _____

Item No.	**Description of Work**			
Labor Costs	(premium hours are to be listed seperately)			
Trade	**Number of Personnel**	**Hourly Rate (including benefits & taxes)**	**Total Hours**	**Total Labor Cost**
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
	0	$0.00	0	$0.00
Totals				$0.00
Equipment Costs	(identify in description if equipment is with or without operator)			
Description	**Time Period**	**Rate**	**Total Time Period**	**Total Cost**
Totals				$0.00
Material Costs				
Description	**Unit**	**Unit Price**	**Quantity**	**Total Cost**
		$0.00	**0**	$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
				$0.00
Totals				$0.00
Combined Total				**$0.00**

Prepared By:

_____	_____	_____	_____
Print Name	Signature	Title	Date

(use additional sheets as necessary)