**Contract Amendment Request**

**Grant Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **Project Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grantee\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**IDENTIFY THE PROPOSED CHANGES TO THE CONTRACT AS APPLICABLE**

**Original Scope of Work**

|  |
| --- |
|  |
|  |
|  |

**Amended Scope of Work**

|  |
| --- |
|  |
|  |
|  |
|  |

**Original Deliverables**

1. **Deliverable/Payment 1**

|  |
| --- |
|  |
|  |
|  |

1. **Deliverable/Payment 2**

|  |
| --- |
|  |
|  |
|  |

1. **Deliverable/Payment 3**

|  |
| --- |
|  |
|  |
|  |

1. **Deliverable/Payment 4**

|  |
| --- |
|  |
|  |
|  |
|  |

**Amended Deliverables**

1. **Deliverable/Payment 1**

|  |
| --- |
|  |
|  |
|  |

1. **Deliverable/Payment 2**

|  |
| --- |
|  |
|  |
|  |

1. **Deliverable/Payment 3**

|  |
| --- |
|  |
|  |
|  |

1. **Deliverable/Payment 4**

|  |
| --- |
|  |
|  |
|  |

**Other Changes**

**Original language**

|  |
| --- |
|  |
|  |
|  |

**Amended language**

|  |
| --- |
|  |
|  |
|  |

**Reason for Changes**

|  |
| --- |
|  |
|  |
|  |
|  |

**Effect on Proposal Goals**

|  |
| --- |
|  |
|  |
|  |
|  |

**Authorization**

**Authorized Official for the Grantee: \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Authorized Official Signature Date**

**Authorized Official for the Division of Historical Resources: \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**DHR Staff Signature Date**

Mail to the address below.

Florida Division of Historical Resources

R.A. Gray Building

500 South Bronough Street

Tallahassee, Florida 32399