**SUB-CONSULTANT**

**WORK ORDER PROPOSAL SUPPLEMENT #**

|  |  |  |
| --- | --- | --- |
|  | Agreement Number: |  |

|  |  |
| --- | --- |
| Sub-Consultant Name: |  |
| Address: |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Contact Person Technical: | | | |  | | | | | | | | Phone: | |  | | | | | |
| Contact Person Accounting: | | | |  | | | | | | | | Phone: | |  | | | | | |
| DCNR Project Title & Location: | | | |  | | | | | | | | | | | | | | | |
| DCNR Project Number: | | | |  | | | | | | | | | | | | | | | |
| DCNR Project Coordinator: | | | |  | | | | | | | | | | | | | | | |
| DCNR Work Order Number: | | | |  | | | | | | | | | | | | | | | |
| **Task #** |  | **Task Description** | | | |  | **Original**  **Cost** | | | **+** | **Additional**  **Cost** | | | | **=** | **New Cost** | |  | **% of Total** |
| Task 1 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 2 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 3 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 4 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 5 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 6 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 7 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 8 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 9 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
| Task 10 |  |  | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  |  |
|  |  | **Sub Total:** | | | |  | $ 0.00 | | |  | $ 0.00 | | | |  | $ 0.00 | |  | 100% |
|  | | | | | | | | | | | | | | | | | | | |
|  | | | **Reimbursable Expenses Not to Exceed** | | | | | | | | | | | | | | | | |
|  | | |  | | **Original** | | | **+** | **Additional** | | | | **=** | | | **New Cost** |  | | |
|  | | | For Sub Consultant | | $ 0.00 | | | + | $ 0.00 | | | | = | | | $ 0.00 |  | | |
| **ORIGINAL SUB-CONSULTANT TOTAL:** | | | | | | | | | | | | | | | | $ 0.00 |  | | |
| **SUPPLEMENT:** | | | | | | | | | | | | | | | | $ 0.00 |  | | |
| **NEW SUB-CONSULTANT TOTAL:** | | | | | | | | | | | | | | | | $ 0.00 |  | | |