

Contract Modification Checklist

Contract Number _____ Consultant Name _____
 Contract Description _____
 Project Name _____ Modification Amount _____
 ADOT Project No. _____ Task Order _____ Rev Number _____
 ADOT Project/Task Manager _____ ADOT Contract Manager (Not ECS Staff) _____
 Consultant Contact Name _____ Consultant Email _____
 Consultant Signatory Name _____

This checklist is to be completed and submitted by the Prime Consultant along with each Contract Modification submittal. Please check the appropriate boxes designating documentation included in each submittal for the Prime Consultant, Subconsultant and Tier-Subconsultant.

Prime Subs Tier-Subs Contract Modification Required Documents

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Transmittal Letter on Consultant Letterhead, signed and dated
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Scope of Work Narrative
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Cost Proposal Cost Derivation Sheet, Signed and Dated
			<i>All costs must be consistent with the contract</i>
			Cost Proposal Cost Derivation Sheet must contain the following:
			<ul style="list-style-type: none"> • Approved Labor Classifications • Approved Rates, Hours, Overhead Rates • List of Other Direct Costs • List of Subconsultant and Vendor Costs
			Are New Labor Classifications proposed? <input type="checkbox"/> No <input type="checkbox"/> Yes: Submit Certified Payroll
			Are New Subconsultants proposed? <input type="checkbox"/> No <input type="checkbox"/> Yes: Submit Add or Remove Subconsultant Request Form & Certified Payroll
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Direct Expense Cost Derivation
			<ul style="list-style-type: none"> • Detailed list of Approved Direct Expenses with unit, rate and total • Vendor quotes required for all externally generated Direct Expenses
			<i>Lump sum quotes for Direct Expenses are not acceptable</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Are New Direct Expense items/rates proposed? <input type="checkbox"/> No <input type="checkbox"/> Yes – Submit Vendor Quote
			Post Design Services (PDS) Scope of Work
			<input type="checkbox"/> Using previously established PDS Rates?
			<input type="checkbox"/> Proposing new or establishing PDS Rates (Initial PDS only)? – Submit Certified Payroll
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Does the Contract have a DBE Goal? <input type="checkbox"/> No <input type="checkbox"/> Yes: Submit appropriate documents listed below:
			<input type="checkbox"/> Intended Participation Affidavit – Consultant*, signed and dated
			<input type="checkbox"/> Intended Participation Affidavit – Subconsultant, signed and dated
			<input type="checkbox"/> Certification of Good Faith Efforts *, signed and dated
			<i>* If the affidavit does not meet the DBE Goal, a GFE is also required.</i>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Other (describe): _____

ADOT Project Manager Contract Modification Submittal Checklist

ADOT Project Manager and Contract Manager have reviewed and recommend the attached Contract Modification Package and certify that the scope of work is consistent with the contract and authorize ECS to execute the Modification.

Consultant Initiation Date (1st contact for this work) _____ Calendar Days required to complete this Project/Task Order work: _____

ADOT Project Manager Review and Concurrence Date: _____ PM/TM Initials: _____ CM Initials: _____

Check boxes are to be marked to designate documentation included in PM submittal along with the above noted items from the consultant.

Include Project Manager Scope of Work, Schedule, Hour and Contract Estimate, Negotiation Docs **(REQUIRED)**

Funding Source Approval – Check Appropriate Box(es) for type and attach documents **(REQUIRED)**

FHWA: Include Signed FARA form or FHWA email (include current available budget documentation)

JPA: Executed JPA (include current available budget documentation)

State: Signed RARF or Non-Federal form (Include current available budget documentation)

Other: Funding Approval Documentation (include current available budget documentation)

Funding Available? No Yes **(AFIS/PIRT SCREENSHOT REQUIRED)**

If no, anticipated authorization/funding availability date: _____

If Post Design Services, attach:

Resident Engineer’s Email & FAST 125 Financial Card or Recap Sheet

If Task Order Waiver is required; attach the completed and signed document (If needed, ECS will obtain FHWA signature)

If an ANTP/LNTP was executed, attach a copy of the completed and signed documentation