

**PETROLEUM TANK RELEASE CLEANUP FUND (PETROFUND)**

**Consultant and Contractor Change Order Form**

**Introduction**

**Change Order Requirements**

for the Active Remediation Steps

The Consultant and Contractor Change Order Form for the Active Remediation Steps is used to document the following:

1. the reasonableness of the costs for tasks that are different from or in addition to the tasks that were included in an active remediation step proposal; and/or
2. the reasonableness of the costs that are higher than the amounts proposed for tasks included in an active remediation step proposal.

The Consultant and Contractor Change Order Form should be completed after the associated work has been performed, and must be submitted with the applicant’s reimbursement application.

The Consultant and Contractor Change Order Form must explain how each additional task or higher cost could not have been reasonably anticipated at the time the active remediation step proposal was submitted to Petrofund staff for their review and then accepted by the applicant. Documentation that supports the explanation (e.g. subcontractor invoices, photographs, MPCA correspondence, weather reports, etc.) must be submitted along with the change order form.

**Using the Form**

**Questions**

Each task that needs a change order explanation should be listed on the attached Consultant and Contractor Change Order Form. Please note that missing or incomplete explanations or insufficient supporting documentation will likely result in a delay in the review of your application by Petrofund staff, and possibly the denial of reimbursement for the change ordered costs.

The Signature Page must be signed by the applicant and the consultant or contractor that invoiced the applicant for the task(s) listed on the form.

If you have questions about this form or the active remediation proposal process, additional information can be obtained by contacting the Petrofund staff at the Minnesota Department of Commerce.

* 651-539-1515 or 800-638-0418 (phone)
* petrofund.commerce@state.mn.us (email)
* www.commerce.state.mn.us (web)

7/2019

**Petrofund Consultant and Contractor Change Order Form for the Active Remediation Steps**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Step of Services | Task | Amount | Amount | Change Order | Change Order Explanation and Description of Supporting |
|  | Name | Proposed | Invoiced | Amount | Documentation |
| Step A-Part 1 |  |  |  |  |  |
| Step A-Part 2 |  |  |  |  |  |
| Step B-Part 1 |  |  |  |  |  |
| Step B-Part 2 |  |  |  |  |  |
| Step C-Part 1 |  |  |  |  |  |
| Step C-Part 2 |  |  |  |  |  |
| Step C-Part 3 |  |  |  |  |  |
| Step D-Part 1 |  |  |  |  |  |
| Step D-Part 2 |  |  |  |  |  |
|  |  |  |  |  |  |
| Step A-Part 1 |  |  |  |  |  |
| Step A-Part 2 |  |  |  |  |  |
| Step B-Part 1 |  |  |  |  |  |
| Step B-Part 2 |  |  |  |  |  |
| Step C-Part 1 |  |  |  |  |  |
| Step C-Part 2 |  |  |  |  |  |
| Step C-Part 3 |  |  |  |  |  |
| Step D-Part 1 |  |  |  |  |  |
| Step D-Part 2 |  |  |  |  |  |
|  |  |  |  |  |  |
| Step A-Part 1 |  |  |  |  |  |
| Step A-Part 2 |  |  |  |  |  |
| Step B-Part 1 |  |  |  |  |  |
| Step B-Part 2 |  |  |  |  |  |
| Step C-Part 1 |  |  |  |  |  |
| Step C-Part 2 |  |  |  |  |  |
| Step C-Part 3 |  |  |  |  |  |
| Step D-Part 1 |  |  |  |  |  |
| Step D-Part 2 |  |  |  |  |  |
|  |  |  |  |  |  |

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**Petroleum Tank Release Cleanup Fund (Petrofund)**

**Consultant and Contractor Change Order Form**

**for the Active Remediation Steps**

**Signature Page**

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**Leak #:** **Proposal Amount:**

**Consultant/Contractor Signature**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Consultant/Contractor Signature |  |  |  | Date |
|  |  |  |  |  |
| Consultant/Contractor Name and Title (please print) |  |  |  |  |
|  |  |  |  |  |
| Consulting/Contracting Firm |  |  |  |  |
|  | $ | | | |
| Petrofund Registration Number |  |  |  | Total of Change Order(s) |
| **Applicant Signature** |  |  |  |  |
|  |  |  |  |  |
| Applicant Signature |  |  | Date |
|  |  |  |  |  |
| Applicant Name (please print) |  |  |  |  |
|  |  |  |  |  |
| Title and Name of Corporation/Partnership/Governmental Unit (if |  |  |  |  |
| applicable) |  |  |  |  |

**Questions**

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