



**University of South Carolina  
Project Change Order Request**

**ROUTING SEQUENCE**

- 1 Client
- 2 Project Manager
- 3 Project Assigned to
- 4 Accounting

Date of Request: \_\_\_\_\_ Requested by: \_\_\_\_\_  
 Project Number \_\_\_\_\_ Description \_\_\_\_\_  
 Project Manager: \_\_\_\_\_ Project Assigned to \_\_\_\_\_  
 BLDG Number: \_\_\_\_\_ BLDG Name: \_\_\_\_\_

**BILLING ACCOUNT INFORMATION**

DEPARTMENT	FUND	CLASS

**REASON FOR CHANGES**

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**DESCRIPTION OF CHANGES REQUESTED**

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**PROJECT MANAGER INFORMATION SECTION**

ORIGINAL PROJECT ESTIMATE:	DOLLARS		DURATION	
REVISED PROJECT ESTIMATE	DOLLARS		DURATION	
NET CHANGE	DOLLARS		DURATION	

**AUTHORIZATIONS**

CLIENT: \_\_\_\_\_ PROJ MGR \_\_\_\_\_  
 PROJ ASSIGNED TO \_\_\_\_\_ DATE \_\_\_\_\_