WFLHD 30 – SF30 Request Form

Basic Project Information

Project Number: _____

Project Name: _____

Contract Number: _____ Task Order Number: _____

FCD (as of this CM): _____

Specific Contract Modification Information

PR number: _____ CM dollar amount: _____

Reason for CM? Select One

FAR Clause? Select One

Who is signing this CM? Select One

Contractor required to sign this CM? No, contractor not required to sign

Is this a bilateral or a unilateral CM? Select One

CM Description:

ADDITIONAL PAGES (CHECK IF APPLICABLE AND SPECIFY NUMBER OF PAGES FOR EACH):

☐ SF30a: _____ ☐ WFLHD10: _____ ☐ Other (Drawings, Plan Changes, etc.): _____

Release Language

☐	This change order directs the contractor to perform work as described on the following pages. The contractor is to track and segregate costs associated with this work. A successor contract modification will definitize the work, prices, and any time impacts.
☐	In consideration of the modification agreed to herein as complete equitable adjustments for the changes detailed herein, the contractor hereby releases the government from any and all liability under this contract attributable to the facts or circumstances giving rise to, arising, from, or relating to, this modification.
☐	This change increases the project obligation for anticipated funding needs.
☐	This change decreases the project obligation for anticipated funding needs that did not occur.
☐	Other (specify below).

Other release language and/or special instructions for this request