

Auto Proceed Project Field Change Order Requires Project's RHA contract and RHA Claim HPwES Incentives



to be updated with Field Change Order changes

	(NJ Home Performance Accredited Contractor	Comment Name	_ (hereinafter called Contractor) and
	(NJ Home Performance Accreattea Contractor		
ustomer First & Last Name - If Program Fina	nced Project, Program Financed Applicant's .	First & Last Name Required) (herei	nafter called Customer), to provide
ditional services beyond those s	specified in the contractor's origi	nal contract.	
•			
e agreed upon changes to scope ease specify efficiency level –	e of work and/or contractor charge.g., AFUE, SEER, R-Value.	ges are as follows:	
		\$	
		 \$	
		 \$	
		\$	
	Total net change in work	scope: \$	
l other terms of the initial contr	act are also incorporated into this	s Change Order	
	nent is ex ecuted, the Contractor	will only be eligible for pays	
rk scope. Payment of any addi		will only be eligible for pays sibility of the Customer.	ment based upon the original appro
rk scope. Payment of any addi WITNESS WHEREOF, the	nent is ex ecuted, the Contractor tional amount will be the responshe parties have executed this of	will only be eligible for payresibility of the Customer. contract as of the date writt	ment based upon the original approen en below.
WITNESS WHEREOF, the Signature of Signature	nent is ex ecuted, the Contractor tional amount will be the respon	will only be eligible for payresibility of the Customer. contract as of the date writte Signature of Author	ment based upon the original appro
WITNESS WHEREOF, the Signature of Signature	nent is ex ecuted, the Contractor tional amount will be the responshe parties have executed this contractor tional amount will be the responshe parties have executed this contractor for the parties have executed the parties have e	will only be eligible for payresibility of the Customer. contract as of the date writte Signature of Author	Orized Contractor Employee ed Contractor Company Approved for Project)
WITNESS WHEREOF, the Signature of the Company of th	nent is ex ecuted, the Contractor tional amount will be the responshe parties have executed this contractor tional amount will be the responshe parties have executed this contractor for the parties have executed the parties have e	will only be eligible for payresibility of the Customer. contract as of the date writte Signature of Author (NJ Home Performance Accredite)	ment based upon the original approen the original approen the below. **Drized Contractor Employee** **Dead Contractor Company Approved for Project)**
WITNESS WHEREOF, the Signature of any additional street of the Signature o	nent is ex ecuted, the Contractor tional amount will be the responshe parties have executed this contractor tional amount will be the responshe parties have executed this contractor for the parties have executed the parties have e	will only be eligible for payresibility of the Customer. contract as of the date writte Signature of Authorized Contractor (Print/Type Authorized Contractor)	ment based upon the original approen the original approen the below. **Drized Contractor Employee** **Dead Contractor Company Approved for Project)**
WITNESS WHEREOF, the Signature of a symmetric and additional and a symmetric a	nent is ex ecuted, the Contractor tional amount will be the responshe parties have executed this conference of Customer Financed Applicant Signature Required)	will only be eligible for payresibility of the Customer. contract as of the date writte Signature of Authority (NJ Home Performance Accredity) (Print/Type Authorized Contractor) (Contractor Company Name)	ment based upon the original approen the original approen the below. **Description** **De
WITNESS WHEREOF, the Signature of (If Program Financed Project, Program (Print/Type Customer First & Last Name (Customer Street Address)	nent is ex ecuted, the Contractor tional amount will be the responshe parties have executed this conference of Customer Financed Applicant Signature Required)	Signature of Authorized Contractor (Contractor Company Name) (Company Street Address)	en below. Drized Contractor Employee 2d Contractor Company Approved for Project) Employee First & Last Name) (State) (Zip Code)
Signature of (If Program Financed Project, Program (Print/Type Customer First & Last Name (Customer Street Address)	nent is ex ecuted, the Contractor tional amount will be the responshe parties have executed this conference of Customer Financed Applicant Signature Required)	will only be eligible for payrisibility of the Customer. contract as of the date writte Signature of Authority (NJ Home Performance Accredity) (Print/Type Authorized Contractor (Contractor Company Name) (Company Street Address)	en below. prized Contractor Employee ad Contractor Company Approved for Project) Employee First & Last Name)

NOTE: Program financed project is required to provide the lender a copy of the FCO signed by the financed applicant and contractor to revise the financed agreement. RHA Claim HPwES Incentive electronic form must have FCO checked off and FCO date provided.