

# AIA<sup>®</sup> Document G714<sup>™</sup> – 2001

## Construction Change Directive

<input checked="" type="checkbox"/>	OWNER
<input checked="" type="checkbox"/>	ARCHITECT
<input checked="" type="checkbox"/>	CONSULTANT
<input type="checkbox"/>	CONTRACTOR
<input type="checkbox"/>	FIELD
<input type="checkbox"/>	OTHER

**PROJECT:** *(Name and address)*

Alpha Delta Phi  
5747 South University Avenue, Chicago, IL 60637

**DIRECTIVE NUMBER:** 001

**DATE:** July 07, 2004

**CONTRACT FOR:** General Construction

**TO CONTRACTOR:** *(Name and address)*

H. B. Barnard  
53 West Jackson Boulevard Suite 235  
Chicago, Illinois 60604

**CONTRACT DATED:** March 15, 2004

**ARCHITECT'S PROJECT NUMBER:** 2001013

You are hereby directed to make the following change(s) in this Contract:  
*(Describe briefly any proposed changes or list any attached information in the alternative)*

Do not paint kitchen ceiling

### PROPOSED ADJUSTMENTS

1. The proposed basis of adjustment to the Contract Sum or Guaranteed Maximum Price is:

- Lump Sum decreased of \$ 1,000.00
- Unit Price of \$ per
- As provided in Section 7.3.3 of AIA Document A201-1997
- As follows:

2. The Contract Time is proposed to (remain unchanged). The proposed adjustment, if any, is 0 days.

When signed by the Owner and Architect and received by the Contractor, this document becomes effective IMMEDIATELY as a Construction Change Directive (CCD), and the Contractor shall proceed with the change(s) described above.

Contractor signature indicates agreement with the proposed adjustments in Contract Sum and Contract Time set forth in this CCD.

Heitzman Architects

**ARCHITECT** (*Firm name*)

111 North Marion Street  
Oak Park, IL 60301

**ADDRESS**

**BY** (*Signature*)

Frank Heitzman, AIA  
(*Typed name*)

**DATE**

The Chicago Society of Alpha Delta Phi

**OWNER** (*Firm name*)

5747 South University Avenue  
Chicago, IL 60637

**ADDRESS**

**BY** (*Signature*)

Roger Deschner  
(*Typed name*)

**DATE**

H. B. Barnard

**CONTRACTOR** (*Firm name*)

53 West Jackson Boulevard Suite 235  
Chicago, Illinois 60604

**ADDRESS**

**BY** (*Signature*)

Jim Barnard  
(*Typed name*)

**DATE**

