



FORM FHWA-1365 [REV. 12-2016]		Federal Highway Administration For use by FHWA and State DOTs					
RECORD OF AUTHORIZATION TO PROCEED WITH CONTRACT REVISION							
FEDERAL PROJECT NUMBER (FAP#):	PROJECT TITLE:	STATE: DISTRICT OF COLUMBIA					
TYPE OF REVISION:							
<input type="checkbox"/> CHANGE ORDER <input type="checkbox"/> SUPPLEMENTAL AGREEMENT <input type="checkbox"/> TIME EXTENSION <input type="checkbox"/> TASK ORDER <input type="checkbox"/> SPECIFICATION CHANGE <input type="checkbox"/> OTHER							
REQUESTED BY:		DATE:					
RECOMMENDED BY DDOT: RESOURCE MANAGEMENT (<i>signature required</i>)		DATE:					
NATURE AND REASON FOR PROPOSED REVISION (IF ADDITIONAL SPACE IS REQUIRED, USE REVERSE SIDE). Please include ALL sources of proposed budget changes (e.g. federal, local capital, third party).							
IMPACT ON PROJECT BUDGET							
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 5px; width: 20%; text-align: center;">\$ _____ INCREASE</td> <td style="border: 1px solid black; padding: 5px; width: 20%; text-align: center;">\$ _____ DECREASE</td> <td style="border: 1px solid black; padding: 5px; width: 15%; text-align: center;"><input type="checkbox"/> NOT CHANGE</td> <td style="padding: 5px;">AS A RESULT OF THIS REVISION</td> </tr> </table>				\$ _____ INCREASE	\$ _____ DECREASE	<input type="checkbox"/> NOT CHANGE	AS A RESULT OF THIS REVISION
\$ _____ INCREASE	\$ _____ DECREASE	<input type="checkbox"/> NOT CHANGE	AS A RESULT OF THIS REVISION				
METHOD OF PAYMENT:							
<input type="checkbox"/> FORCE ACCOUNT <input type="checkbox"/> NEGOTIATED PRICE <input type="checkbox"/> LUMP SUM <input type="checkbox"/> UNIT BID PRICE <input type="checkbox"/> OTHER							
--- FOR APPROVER USE ONLY ---							
THE WORK COVERED BY THE PROPOSED REVISION AS DESCRIBED ABOVE IS HEREBY AUTHORIZED SUBJECT TO THE CONDITIONS MARKED BELOW:							
<input type="checkbox"/> EVALUATION OF COST DATA <input type="checkbox"/> SUPPLEMENTAL AGREEMENT <input type="checkbox"/> LIMITATIONS TO EXTEND OF FEDERAL PARTICIPATION <input type="checkbox"/> NONE <input type="checkbox"/> DETERMINATION OF SATISFACTORY ADJUSTMENT IN TIME <input type="checkbox"/> OTHER (<i>explain</i>) <input type="checkbox"/> ADEQUATE SUBMITTAL OF WRITTEN SUPPORTING DATA							
FHWA DIVISION OFFICE APPROVAL							
TITLE:	SIGNATURE:	DATE:					

USE REVERSE SIDE FOR COMMENTS, IF REQUIRED)