

APPENDIX B

DWM-042A
7/2024

New Jersey Department of Environmental Protection (NJDEP)
Contaminated Site Remediation & Redevelopment

Let's protect our earth



CONTRACT MODIFICATION PROPOSAL AND ACCEPTANCE FORM
GENERAL CONTRACTS

PI NUMBER:	ACTIVITY NUMBER: JOB CODE:	PO #: _____ C-Number: _____
PI/PROJECT NAME AND LOCATION	FUNDING AUTHORIZATION NO and/or COOP. AGREEMENT NO.	
	CONTRACT NO.	
	ENGAGEMENT AND MODIFICATION NOS.	

- I. **PROPOSAL**
- A. **DESCRIPTION OF MODIFICATION** ☐ (Check if continued on additional sheets)

- B. **COST BREAKDOWN FOR MODIFICATION** ☐ (Check if continued on additional sheets)

<u>Item</u>	<u>Quantity</u>	<u>Unit Price</u>	<u>Cost (+)</u>
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SUBTOTAL (from this page)	_____
SUBTOTAL (from any attached pages)	_____
TOTAL COST OF MODIFICATION	_____

C. **CERTIFICATION AND EXECUTION BY CONTRACTOR**

I certify that this proposal is accurate. I understand that no work is authorized under this proposal until the proposal is accepted by the NJDEP and executed by the Commissioner or their designee. I hereby waive any claim for compensation for costs incurred under this modification but not contained in the cost breakdown.

_____	_____	_____
Name and Title (Typed or Printed)	Signature	Date
Name of Company _____		
Address _____		

II. **NJDEP APPROVAL AND EXECUTION**

Staff: As per individual Job Specifications; Section Chief - \$50,000 or less; Bureau Chief: >\$50,000 up to and including \$100,000; Assistant Director: >\$100,000 up to and including \$250,000; Director: >\$250,000 up to and including \$500,000; Assistant Commissioner: Over \$500,000. Assistant Director Financial Services Element: All Contract Modifications regardless of amount.

SECTION/BUREAU CHIEF	_____	_____	_____
	Name (Typed or Printed)	Signature	Date
ASST DIRECTOR, DRM	_____	_____	_____
	Name (Typed or Printed)	Signature	Date
DIRECTOR, DRM	_____	_____	_____
	Name (Typed or Printed)	Signature	Date
ASST. DIRECTOR, FSE	_____	_____	_____
	Name (Typed or Printed)	Signature	Date
ASST. COMMISSIONER, CSRR	_____	_____	_____
	Name (Typed or Printed)	Signature	Date

III. **EXECUTION BY DIRECTOR, DIVISION OF ENFORCEMENT & FINANCIAL OPERATIONS**

_____	_____	_____
Name (Typed or Printed)	Signature	Date