Date ____________________________

To

(Name & address of A/E)

Authorization No. ____________________________

Reference FS- ____________________________

FROM ____________________________

(University Project Manager or other)

Under the terms of Subparagraph/Paragraph No. _________ in the Agreement (must verify in agreement), you are hereby authorized to perform or direct the following Additional Services:

Consultant ____________________________

(name of Architect/Engineer and name of consultant, if any)

Max Authorized Cost $_________ not-to-exceed - OR - Authorized Cost $_________ lump sum

Description of authorization, including required deliverables, associated payments and time schedule for services. Reference all proposals.

INVOICE INSTRUCTIONS

Please invoice in accordance with the following instructions.

Submit a signed original and three (3) copies of the invoice as specified in your Agreement and in the Professional Services Guide. Attach to the three (3) copies:

1) a copy of this authorization
2) for not-to-exceed authorizations based on hourly rates
   a. a sheet displaying computations of hours and salary rates used to arrive at the invoiced amount
   b. copies of time sheets
   c. the consultant’s invoice, where applicable, indicating your firm’s approval and
   d. any other documents necessary to substantiate the invoice.
3) For services to be paid directly to an authorized consultant, indicate separate payment on the invoice in the space provided.

APPROVED BY

Name ____________________________

Title ____________________________

cc: General Accounting (2)

Project Manager