

Company Name LTD

Variation Order

Project: [Project Name] Contract Number: [Contract Number] Variation Order No.: [Variation Order Number] Date of Issue: [Date]

To: [Employer's Authorized Representative] [Employer's Company Name] [Company Address]

Subject: Submission of Official Variation Order pursuant to Employer's Instruction

Dear [Employer's Authorized Representative],

With reference to the Contract executed between [Employer's Name] ("Employer") and [Contractor's Name] ("Contractor") dated [Contract Date], and following your instruction to amend the scope of works issued on [Date of Employer's/Engineer's Instruction] and to our notice on [date of the issued Variation Order Notice], we hereby submit this Variation Order to formally incorporate the instructed adjustments into the Contract.

1. Details of the Variation:

The following changes are made pursuant to your instruction:

- **Description:** [Clearly describe the instructed changes, including modified scope of work, specifications, materials, or methodologies.]
- **Reference:** [Specify reference details to the employer's instruction or correspondence.]

2. Impact Assessment:

- Cost Implication: [Specify the increase or decrease in contract price with supporting breakdown.]
- Schedule Implication: [Specify the extension or reduction in the project duration (in days/weeks) as confirmed by Schedule Impact Analysis.]

3. Revised Contractual Terms:

- Amended Contract Value: [Updated contract amount]
- Revised Completion Date: [Updated contractual completion date]

4. Supporting Documents Included:

For reference and confirmation, please find attached:

- Updated Bill of Quantities (BOQ)
- Revised Project Schedule highlighting the critical path
- Relevant Drawings and/or Technical Specifications



5. Employer's Confirmation & Acceptance:

Kindly signify your acceptance and confirmation of this Variation Order by signing below and returning an executed copy no later than [Deadline for Return]. Upon acceptance, this Variation Order shall form an integral part of our Contractual Agreement.

Authorized Signatures: Contractor (Authorized Signatory) – Name / Position

_____X

Employer (Authorized Signatory) - Name / Position

_____X

Your prompt review and approval will enable us to effectively implement these instructed changes and maintain project progress.

Respectfully submitted,

[Your Name] [Your Position] [Contractor's Company Name] [Contact Information]