

## AMENDMENT REQUEST FORM

AMENDMENT REQUEST DATE:	Agreement #:	
NAME OF GRANTEE:		STATE(s):
CONTRACT START DATE:	CONTRACT END DA	ATE:
REQUESTED CONTRACT END DATE:		
TYPES OF AMENDMENT REQUEST:		
TIPES OF AMENDMENT REQUEST.		
Change in Authorized Official Only Submit the following documents to SCRC as one PDF:		
<ul><li>Key Contacts Form</li><li>Authorized Official Resolution</li></ul>		
☐ Contract Extension Only (No Bud	lget, Match, or Sc	ope changes)
Submit the following documents to SCRC as or	ne PDF:	
<ul> <li>Completed and Executed Contract Amer</li> <li>Justification of need for contract extens</li> <li>Revised project timeline</li> <li>Description of project progress to date</li> <li>Confirmation budget and scope are not</li> <li>Confirmation committed match remains</li> </ul>	changing	
Project Re-Scope (Changes to scope Submit the following documents to SCRC as on		Budget, and Match Changes)
<ul> <li>Completed and Executed Contract Amer</li> <li>Description of Project re-scope (include of Revised project budget (submit budget of Revised project timeline</li> <li>Revised work plan</li> <li>Revised match commitment form (if approximation)</li> </ul>	what has been comple nodification form)	eted to date, reason for change, etc.)
1. As a result of the project re-scope, is an upon If Yes, attach updated environmental review do 2. Does the project re-scope result in additional impact? If yes, attach documentation of how his be addressed.  Submit one PDF of all required documentation by error Grants@SCRC.gov. For amendment questions pleas	cumentation. historic preservatio storic preservation ir mail with your grant #	n impact?  Yes  No mpact will referenced in the subject line to
Signature of Authorized Official for Grantee	L	Pate