

OFFICE OF THE COUNTY AUDITOR JACKSON COUNTY. MISSOURI

(816) 881-3302 FAX (816) 881-3340 CRO@JACKSONGOV.ORG WWW.JACKSONGOV.ORG

COMPLIANCE REVIEW OFFICE 415 E 12th Street, 2nd Floor Kansas City, Missouri 64106

Contractor Utilization Plan Modification Request

Any modifications to a Contractor Ut Office. Please complete form and su			ne Compliance Review
Prime Contractor:		Project Number:	
I hereby request the following modif			
1 Substitution of certified fir Name of New Firm	Certification	Scope	Contract Amount
redific of recwiring			
Currently listed Firm	Certification	Scope	Contract Amount
2Addition of certified firm fo	or scope of work not prev	viously listed on	the Contractor Utilization Plan:
Name of New Firm	Certification	Scope	Contract Amount
Bidder/Contractor states that a subs	titution or addition of fire	m is necessary be	ecause:
I certify that all answers and info			
Submitted and prepared submitted	by:		
Signature		Printed Name	
Title		ate	
For Office Use Only		Approved	Not ApprovedInitials