

Change of Sub-Contractor Form

In accordance with MAWSS DBE 16-01

JOB NAME _____ Location _____

Name of General Contractor _____

Name of Original Sub-Contractor _____

Name of New Sub-Contractor _____

Reason for Change

This instrument is for the purpose of advising all persons involved of a change being made on the contract and job-site.

General Contractor

DBE Office

Asst. Director