\*\* Email completed forms to <a href="mailto:State.Architect@tn.gov">State.Architect@tn.gov</a>. Begin subject line with "Delegation Form". \*\*

## <u>Transmittal and Checklist for Delegated Approval Authority – (2.04.C.1)</u>

Approva	al of Consultant Contract	Amendments		
	This amendment extends the term and the original contract specifically allows for extensions of term OR this amendment does not affect the term			
	This amendment includes an increase in the maximum liability of the contract and the increase in funding is proportionate to the original funding amount and from a funding source identical to or substantially similar to the original funding source OR this amendment does not affect the maximum liability			
	·	•		-1s, other relevant back-up on or executive summaries)
Project N	ame:			
Project SI	BC#:			
Submittin	ng SPA:			
SPA Authorized Representative:		(I attest to the above)		Date
Approve	ed:			
	Gauran, State Architect Not approved and rationale:		 Date	
Commiss	nes, Delegate of the lioner of Finance & Administ Not approved and rationale:		 Date	