



PLATFORM CONSTRUCTION LLC

1829 REISTERSTOWN RD SUITE 350
BALTIMORE, MD 21208
PHONE: 202-262-5068

1001

WORK TICKET

PROJECT NAME: _____ PROJECT # _____
PCO REFERENCE: _____
SUBCONTRACTORS NAME/NUMBER: _____

TYPE OF WORK: CONTRACT ☐ OWNER CHANGE ☐ ADDITIONAL WORK: ☐ BACK CHARGE ☐

TO THE SUBCONTRACTOR :

☐ **We Will** incur additional expenses due to the following:

☐ **We Have** incurred additional expenses due to the following:

- ☐ Correcting your defective work
- ☐ Finishing your incomplete work
- ☐ Repairing damage to the work of others

DESCRIPTION AND REASON FOR ADDITIONAL WORK:

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TRADESMAN	REGULAR	PREMIUM HOURS	OT	MATERIALS/ EQUIPMENT
_____	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
_____	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____
_____	<input type="text"/>	<input type="text"/>	<input type="text"/>	_____

SUBCONTRACTOR : _____

DATE: _____

☐ I AUTHORIZE THE EXTRA WORK TO BE PERFORMED AS OUTLINE ABOVE BY THE APPROVED SUBCONTRACTOR/ TRADESMAN. ADDITIONAL WORK OUTSIDE OF THIS AUTHORIZATION REQUIRES ANOTHER FORM TO BE SUBMITTED AND APPROVED.

☐ I DO NOT AUTHORIZE THE ADDITIONAL WORK OUTLINED ABOVE BY THE SUBCONTRACTOR/TRADESMAN.

VERIFIED BY: _____

DATE: _____

Signature of "Verified By" indicates verification of time and materials only. All work is subject to terms of Subcontract.