

WORK ORDER FORM  
PURSUANT TO AN AGREEMENT BETWEEN  
THE CITY OF CEDAR RAPIDS  
AND **CONTRACTOR**

Date: \_\_\_\_\_

Work Order Number \_\_\_\_\_ Purchase Order Number, if applicable \_\_\_\_\_

Project Title and Address \_\_\_\_\_

Commencement Date \_\_\_\_\_ Completion Date \_\_\_\_\_

Project Description: \_\_\_\_\_

\_\_\_\_\_

Scope of Services: \_\_\_\_\_

\_\_\_\_\_

**NOT TO EXCEED COST ESTIMATE: \*\* \$** \_\_\_\_\_

**\*\* Contractor shall attach an itemized cost summary, to include estimated labor hours and materials**

Bill to: \_\_\_\_\_

Contractor agrees to perform the services above and on the attached forms (if applicable) in accordance with the terms and conditions contained and incorporated in the Contract. In the event of a conflict between ambiguity in the terms of the Contract and this work order, the Contract shall control.

Contractor, Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

The purchase order will be the document that authorizes this work to begin

City of Cedar Rapids Contact Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_