DATE

Mr. David Siskowski

Division Head – Local Programs

Arkansas Department of Transportation

P. O. Box 2261

Little Rock, AR 72203

 Re: ***Job #***

 ***Job Name***

 ***County***

Dear Mr. Siskowski:

The scope and/or budget for the project has/have been revised. I certify that:

1. The length of the project will be \_\_\_\_\_\_ feet and be \_\_\_\_\_ feet wide with a/an \_\_\_\_\_\_\_ surface.
2. Other project changes are as follows: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.
3. Two maps are attached. One is the project location map, and the other is a close up map that shows the project termini.
4. The revised budget is $\_\_\_\_\_\_ Federal-aid and $\_\_\_\_\_\_\_ Sponsor funds for a total project budget of $\_\_\_\_\_\_\_.

Any substantial changes to the above information will be submitted in writing to ArDOT.

 Sincerely,

 ***NAME & OFFICE***

 ***(Sponsor’s CEO)***

Attachments