



Republic of the Philippines
DEPARTMENT OF PUBLIC WORKS AND HIGHWAYS
OFFICE OF THE SECRETARY
Manila



0917.13 DPWH

01-03-2025

DEC 20 2024

DEPARTMENT ORDER)

NO. 246)

Series of 2024)

DN 11/3/2025

SUBJECT: Standard Templates for Variation Order and Time Variance-Related Requests

To further strengthen the Department's commitment to an effective and efficient implementation of infrastructure projects, and to ensure the Regional and District Engineering Offices' compliance with the appropriate supporting documents for Variation Order and Time Variance-related requests, the following **Standard Templates** are prescribed for preparing supporting documents to align with department policies and existing laws, rules and regulations.

The issuance of these templates aims to provide technical personnel in the Implementing Offices of a standardized outline to facilitate an efficient and objective evaluation process. Moreover, the consistency in the evaluation process will not only enhance the accuracy and fairness of decision-making but will also reduce the likelihood of subjective interpretations. This issuance is anticipated to enhance the Department's project management processes contributing to more streamlined operations and reinforcing commitment to delivering high-quality infrastructure projects in a timely and cost-effective manner.

The following templates are listed hereunder:

A. For Variation Order:

- | | |
|---|-------------|
| a. Executive Summary | – Annex A-1 |
| b. Project Engineer's Report | – Annex A-2 |
| c. Straight Line Diagram showing the proposed works for road/
/bridge/flood control projects | – Annex A-3 |

B. For Time Variance:

- | | |
|---|--------------|
| a. Executive Summary (DEO Implemented Projects) | – Annex B-1a |
| b. Executive Summary (DEO to RO Implemented Projects) | – Annex B-1b |
| c. Executive Summary (RO Implemented Projects) | – Annex B-1c |
| d. Project Engineer's Report for Work Suspension Order | – Annex B-2a |
| e. Project Engineer's Report for Work Resumption Order | – Annex B-2b |
| f. Project Engineer's Report for Contract Time Extension | – Annex B-2c |
| g. Chronology of Events | – Annex B-3 |
| h. Certification | – Annex B-4 |
| i. Straight Line Diagram showing the vital dates (WSO) | – Annex B-5a |
| j. Straight Line Diagram showing the vital dates (WRO) | – Annex B-5b |
| k. Straight Line Diagram showing the vital dates (CTE) | – Annex B-5c |
| l. Straight Line Diagram showing the critical activities affected | – Annex B-5d |



C. For Variation Order and Time Variance:

- a. Contractual Data – Annex C-1
- b. Geotagged Pictures – Annex C-2

These standard templates can be downloaded from the DPWH Intranet (<http:dpwhnet>) under Construction Forms and shall be utilized effective immediately.


MANUEL M. BONOAN
Secretary

Department of Public Works and Highways
Office of the Secretary


WIN4W02319

6.1.2 TCA/MIP/ASB

<Date Prepared>

Annex A-1

EXECUTIVE SUMMARY

(Proposed <Type of Request>)

FOR : Head of Implementing Office <FULL NAME>
This Office

THRU : Assistant Head of Implementing Office <FULL NAME>
This Office

SUBJECT : Proposed <Type of Request> for the Project: <Contract Name and Location>, Contract ID No. <ID No.>

1. Action Recommended : (For Approval or For Consideration)
2. Implementing Unit (IU) :
3. Contractor :
4. Reason for this request :

This proposed <choose one - Variation Order (V.O.) No. ____ /Final Variation Order (F.V.O.)> which was requested by the <choose one - Contractor/DPWH Project Engineer, **<Contractor/Name of Project Engineer>**, per letter dated <Date of letter/memorandum> (**Annex ""**) covers changes based on the Approved <Corresponding plans for the proposed changes (*i.e., As-staked Plan, Revised Plan, Supplemental Plan, As-Built Plan*)> (**Annex ""**) duly signed by <State the name of the approving official>.

If Variation Order (VO)

The proposed V.O. No. ____ involves <increase/decrease (*choose both or whichever is applicable*)> in quantities and <deletion (*delete if not applicable*)> of some original items of work and <introduction of new items of work (*delete if not applicable*)> necessary for the completion and protection of the project.

If Final Variation Order FVO

The proposed F.V.O. involves <increase/decrease (*choose both or whichever is applicable*)> in quantities and <deletion (*delete if not applicable*)> of some original items of work necessary for the completion and protection of the project.

<State a brief background of the project from the date of effectivity up to the circumstance leading to this request>

The report of the Inspectorate Team/Appropriate Technical Staff on the conducted inspection/validation is attached as **Annex ""**

Please refer to the Project Engineer's Report (**Annex ""**), Detailed Technical Justification for the proposed changes (**Annex ""**) and Itemized Cost of Revision (**Annex ""**) for the changes made in this V.O. No. ____/F.V.O.

5. Contractual Data :

CONTRACTUAL DATA	AMOUNT	CONTRACT DURATION	REMARKS
5.1 Original Contract	<Amount>	<Duration in c.d.>	<Contract Effectivity> <Original Expiry Date>
5.2 <Previously Approved VO>			
5.2.1 VO No. 1	<Amount>	<Additional Contract Duration due to VO in c.d.>	<Percent increase/decrease from the original contract amount>
5.3 Proposed VO No. ____			
5.3.1 As requested by the Contractor	<Amount>	<Additional Contract Duration due to proposed VO in c.d.>	<Percent increase/decrease from the original contract amount>
5.3.2 As recommended by the Implementing Unit	<Amount>	<Additional Contract Duration due to proposed VO in c.d.>	<Percent increase/decrease from the original contract amount>
5.4 Revised Contract Cost due to this proposed VO No. ____, if approved	<Amount>	<Total Contract Duration in c.d.> due to VO if approved	<Percent increase/decrease from the original contract amount>
5.5 <Previously Approved Requests in Time Variance>		<Total Additional CTE due to Approved CTE Duration in c.d.>	
5.5.1 WSO No. 1			<Date of effectivity>
5.5.2 WRO No. 1			<Date of effectivity>

5.5.3 CTE No. 1			
5.6 Revised Contract Expiry		<Revised Contract Duration>	<Revised Contract Expiry Date>

Note: For Item 5.2 and 5.6, specify and enumerate the approved request for WSO, WRO, or CTE, and VO, respectively. (The VO and TE requests stated above should be in chronological order based on the date of approval)

(Do not include this note upon printing)

6. Physical Accomplishment as of <The date of request for this VO/FVO>:

Scheduled Physical Accomplishment :
 Actual Physical Accomplishment :
 Slippage :

7. Certificate of Availability of Funds:

If proposed VO is additive:

Additional funds for this proposed Variation Order No. ____ is still available out of the appropriations comprehensively released per CAF/CAA dated _____.

If proposed VO is deductive or no change in cost:

Additional funds for this proposed Variation Order No. ____ is not necessary since the said proposal incurred a negative change/no change from the original contract amount.

8. Remarks :

*Note: This item pertains to the review/evaluation/recommendation of the Chief of Implementing Unit.
 (Do not include this note upon printing)*

- a. The changes introduced in this proposed V.O. No. ____ as shown/reflected in the ICR, approved <State the approved plan corresponding to this proposed V.O. (i.e., As Staked Plan, Revised Plan, As-built Plan> and other supporting documents are found to be meritorious/valid after the review/evaluation made by this Office. Likewise, the proposed changes are found to be necessary for the completion/protection/improvement of the project.

Further, the contractor's request for this proposed V.O. is within the timeframe requirement as set forth in (input section and annex of the latest applicable government procurement act and its implementing rules and regulations), to quote:

<Insert the provision here>

- b. The cumulative amount for this proposed V.O. No. ___ is within the limit as provided in (input section and annex of the latest applicable government procurement act and its implementing rules and regulations).

- c. *If proposed VO has no new item of work:*

The unit costs of similar items of work involved in this proposed V.O. No. ___ were based on the existing original contract as indicated/ reflected in the ICR. No new item of work is involved.

If proposed VO has new item/s of work:

The unit costs of similar items of work involved in this proposed V.O. No. _____ were based on the existing original contract as indicated/ reflected in the Itemized Cost of Revision.

<State the modifications made in the DUPA of the Contractor if in case the unit cost used in the new item/s of work is/are inconsistent with the original DUPA, lowest canvass price of materials, or DPWH Construction Materials Price Data, whichever is applicable.>

- d. *If proposed VO has additional contract duration:*

<State the request of the contractor and the recommendation of the Implementing Unit. Mention the critical activities affected and/or the items of work with additional quantities that is deemed necessary for the completion of the project, which affects the critical path.>

Note: If the proposed VO has no additional contract duration, please skip this item. (Do not include this note upon printing)

By virtue of this proposed Variation Order No. ___/Final Variation Order involving an additive/deductive amount of _____ ,<____ %> increase/decrease from the original contract, as evaluated/ reviewed by this Office with _____ calendar days additional contract duration, revises the original contract amount from _____ to _____.

In view of the foregoing, the herein proposed Variation Order No. ___/Final Variation Order for the contract of __ (Contractor)___ relative to the implementation of the above subject project is respectfully recommended for <District Engineer's/Regional Director's/Undersecretary's (*choose whichever is applicable*)> consideration and approval.

**NAME & SIGNATURE OF THE HEAD OF
IMPLEMENTING UNIT**

Position

Office Code (e.g. R01.2/AAA/BBB/CCC)

Note: The information/data not covered in this outline may be included as long as such information/data are necessary to establish the justification and necessity of the proposed VO. (Do not include this note upon printing)

<Use the official letterhead details in accordance with the most current standards for Agency Identity>

<Date Prepared>

Annex A-2

MEMORANDUM

FOR : Head of Implementing Office <FULL NAME>
This Office

SUBJECT : Project Engineer's Report (*choose one* - Proposed Variation Order No. ____/Final Variation Order)

Contract ID :
Contract Name/Location :
Contractor :

Paragraph 1:

Pursuant to (*input section and annex of the latest applicable government procurement act and its implementing rules and regulations*), submitted herewith is the Project Engineer's Report relative to this proposed Variation Order (VO) No. ____ / Final Variation Order (FVO) for the above-mentioned project.

Paragraph 2: Choose one:

This proposed Variation Order No. ____ / Final VO was requested by the undersigned Project Engineer in consideration to the circumstances at the project site wherein state reason or circumstance.

This proposed Variation Order No. ____ / Final VO was requested by the *Contractor / End-User / Other Stakeholders*, through a *letter / Resolution / correspondence* dated _____. They mentioned therein that (*state the reason/s for this proposed changes*).

Paragraph 3:

In order to establish the necessity of this proposed changes, the undersigned Project Engineer conducted inspection and investigation on (state date of inspection / investigation) as supported by the attached geotagged photos. Based on the said inspection and investigation, it was established that the changes being introduced is necessary for the completion / improvement / protection of the project particularly at the following location, to wit:

<Use the official footer details in accordance with the most current standards for Agency Identity>

Items of Work	Stations / Locations	Remarks and Reason for the proposed Changes (Increase / Decrease / New)
Item XXX	Sta 000 – Sta. 120 (Left Lane)	Increase due to ____
	Sta. 150 – Sta. 160 (Right Lane)	Increase due to ____
Item YYY	Sta. 200 – Sta. 240 (Right Lane)	Decrease due to ____

Note: Include all items of work and its specific stations / locations.

Paragraph 4:

In consideration to the proposed changes above, the unit cost for the existing items of work in the original contract were used while for new items of work, the Contractor submitted a proposed Detailed Unit Price Analysis with appropriate supporting documents, checked and recommended by the undersigned. Likewise, the corresponding quantities for the proposed changes were established as per _____ (*revised/as-staked/as-built/supplemental*) plans together with the detailed quantity calculations attached thereof. All changes in the quantities and cost are duly reflected in the Itemized Cost of Revision.

Paragraph 5:

The changes covered under this proposed VO No. ____ / FVO is pursuant to Section ____ of RA ____ / Department Order which provides that:

Section ____ " x x x x x "

Recommendation:

In view of the foregoing, the undersigned Project Engineer hereby recommends to the _____ (*Head of Implementing Office*) the approval of VO No. ____ / Final VO, as supported by the pertinent documents in accordance with (*latest approved DO on DoTS*).

NAME & SIGNATURE OF THE PROJECT ENGINEER

Project Engineer I/II/III/JPE

Office Code (e.g. R01.2/AAA/BBB/CCC)

<Contractor's Logo/Header>

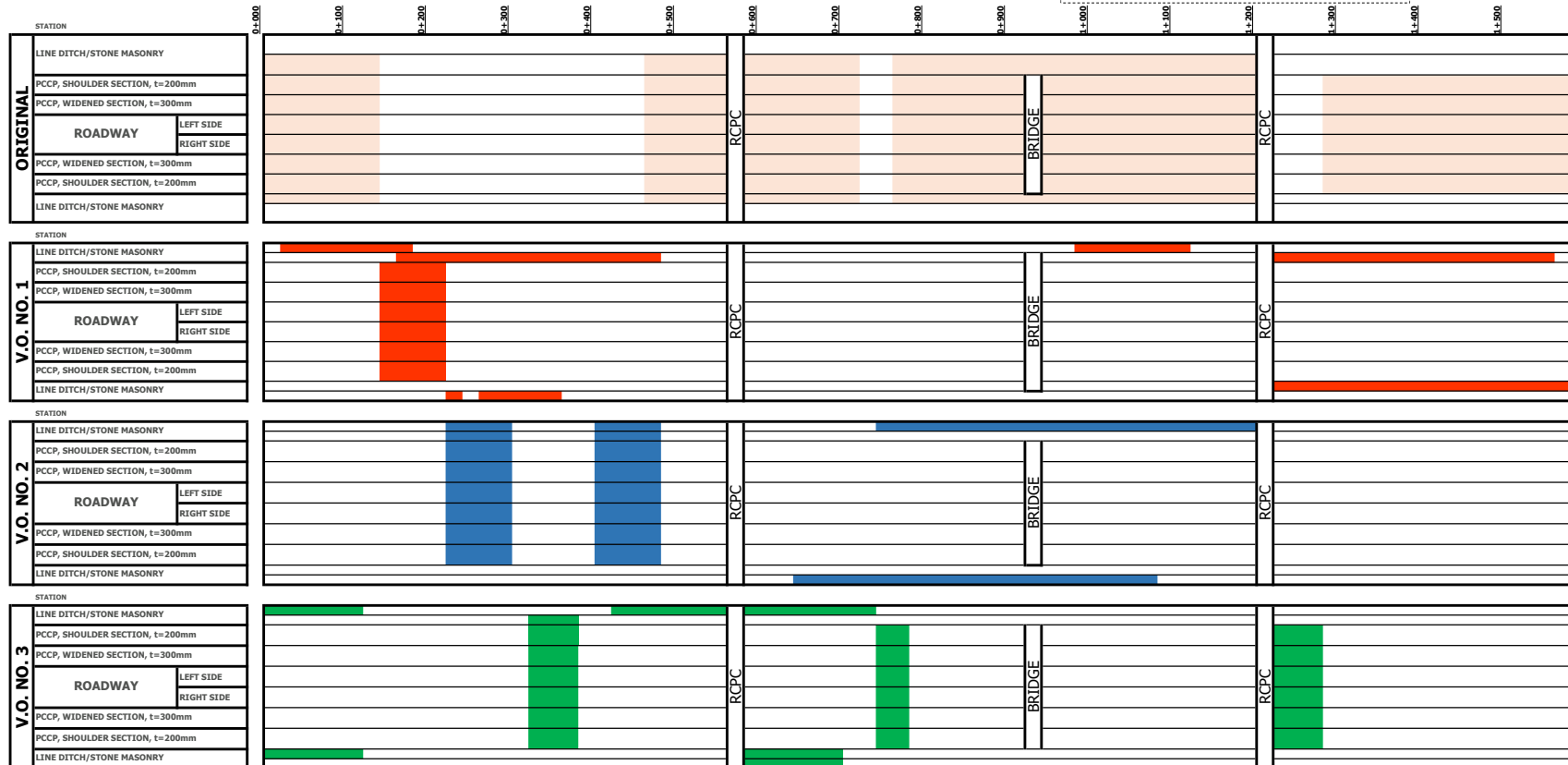
STRAIGHT-LINE DIAGRAM

(Showing the Proposed Works for this Variation Order No.____/Final Variation Order)

Annex A-3

Contract ID:
Contract Name:
Contractor:

Items of work and station limits may be modified according to the details of the project
This is applicable for road/bridge/flood control projects
(Do not include this upon printing)



LEGEND:

- Original Scope of Work
- Variation Order No.1
- Variation Order No.2
- Variation Order No.3

Prepared by:

Reviewed and Checked by:

<NAME & SIGNATURE OF THE CONTRACTOR'S PE>
Project Engineer I/II/PPE

<NAME & SIGNATURE OF THE DPWH PE>
Project Engineer I/II/III/JPE

<Date Prepared>

Annex B-1a

EXECUTIVE SUMMARY

(Proposed <Type of Request>)

FOR : District Engineer <FULL NAME>
This Office

*For proposed WSO/WRO/CTE in District
Engineering Office Implemented Projects (for
approval by the District Engineer)*

(Do not include this upon printing)

**SUBJECT : Proposed <Type of Request> for the Project: <Name of Project>,
Contract ID No. <ID No. in Contract Agreement>**

1. Action Recommended : (For Approval or For Consideration)
2. Implementing Unit :
3. Contractor :
4. Reason for this request :

Paragraph 1:

This proposed <choose one – Work Suspension Order (W.S.O.)/Work Resumption Order (W.R.O.)/Contract Time Extension (C.T.E.) No. ____>, which was requested by the **<Contractor or DPWH Project Engineer (choose one) >**, per letter dated <Date of letter/memorandum> (**Annex ""**) was due to <state the reason for this request>.

Paragraph 2:

- ✓ State a brief background of the project from the date of effectivity up to the circumstance leading to this request and include a discussion on how the above-mentioned reason/s affected project implementation and/or prevented the contractor working at the project site.

Example for WSO:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting) of the <State the project (i.e. school building, road, flood control) has started on <Date of effectivity of contract >, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. During the implementation of the project, the contractor has encountered <State the reason for suspension> that resulted to the <Discuss how aforementioned reason for suspension will affect project implementation and/or prevented the contractor working at the project site>.

Example for WRO:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract >, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. As per approved Work Suspension Order No. ____ (**Annex ""**), the project was suspended due to <State the reason for suspension (elaborate)>. However, the problem has already been resolved, allowing the project to be resumed.

Example for CTE:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract >, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. As per approved Work Suspension Order No. ____ and Work Resumption Order No. ____ (**Annexes "" and ""**), the <choose one Contractor/DPWH PE> has requested for the suspension of the project due to <State the reason for the request of suspension of the project>. The aforementioned problem has been resolved resulting to the resumption of the project on <Date of resumption>.

Paragraph 3:

- ✓ State the action taken by the contractor and the DPWH Project Engineer.

5. Contractual Data :

DETAILS	ORIGINAL	REVISED
i. Contract Amount	<Amount>	<Amount>
ii. Contract Duration	<Duration in c.d.>	<Duration in c.d.>
iii. Effectivity of Contract	<Date>	<Date>
iv. Expiry Date	<Date>	<Date>
v. <Previously Approved Request>	<Amount> <Duration in c.d.>	<Amount> <Duration in c.d.>
vi. Effect in Cost of this Request	None	None

Note: For Item 5.v., specify and enumerate the approved request for VO, WSO, WRO, or CTE. (Do not include this note upon printing)

6. Physical Accomplishment as of <The date of request for WSO/WRO/CTE>:

Scheduled Physical Accomplishment:

Actual Physical Accomplishment :

Slippage :

7. Based on the approved PDM Network Diagram, here under are the items of work in the critical path affected by this request, to wit:

- i. Item XXX
- ii. Item YYY
- iii. Item ZZZ ...

8. Remarks :

- a) On the basis of the submitted documents indicated in the Checklist, this Office finds the request for WSO/WRO/CTE to be meritorious since... *(continue this paragraph based on the options stated below)*

If the request is WSO:

the <state reason of the request> prevented the contractor from implementing the project and no fault is attributable to the said contractor.

If the request is WRO:

the problem on <state reason for WSO> has been successfully resolved by the Implementing Unit/Office and the contractor. Thus, the contractor can now proceed or continue with the implementation of the project.

If the request is CTE:

no fault is attributable to the contractor on the reason for suspension issued corresponding to this Contract Time Extension.

- b) The request of the contractor for this proposed <state the type of request here> is within the timeframe as stipulated in (input section and annex of the latest applicable government procurement act and its implementing rules and regulations for WSO and CTE requests) and Department Order No. 39 series of 2024 (*changed this D.O. if there is a new issuance*).
- c) In view of the foregoing, the proposed <state the type of request> is respectfully recommended for the ____ (*Head of IO*) approval, **subject to the condition that the approval of <choose one - suspension order / resumption order> is not an automatic basis to revise the contract duration and expiry date.** (*delete the phrase in bold if the request is CTE*).

NAME & SIGNATURE OF THE HEAD OF IMPLEMENTING UNIT

Position

Office Code (e.g. R01.2/AAA/BBB/CCC)

<Date Prepared>

Annex B-1b

EXECUTIVE SUMMARY

(Proposed <Type of Request>)

*For proposed WSO/CWSO/CTE in District
Engineering Office Implemented Projects (for
approval by the Regional Director)*

(Do not include this upon printing)

FOR : Regional Director <FULL NAME>
This Office

THRU : Assistant Regional Director <FULL NAME>
This Office

**SUBJECT : Proposed <Type of Request> for the Project: <Name of Project>,
Contract ID No. <ID No. in Contract Agreement>**

1. Action Recommended :
2. Implementing Office :
3. Contractor :
4. Reason for this request :

Paragraph 1:

This proposed <choose one – Work Suspension Order (W.S.O.)/Continuance of Work Suspension Order (C.W.S.O.)/Contract Time Extension (C.T.E.) No. ____>, which was requested by the **<Contractor or DPWH Project Engineer (choose one)>**, per letter dated <Date of letter/memorandum> (**Annex ""**) was due to <state the reason for this request>.

Paragraph 2:

- ✓ State a brief background of the project from the date of effectivity up to the circumstance leading to this request and include a discussion on how the above-mentioned reason/s affected project implementation and/or prevented the contractor working at the project site.

Example for WSO/CWSO:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract>, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. During the implementation of the project, the contractor has encountered <State the reason for suspension> that resulted to the

<Discuss how aforementioned reason for suspension will affect project implementation and/or prevented the contractor working at the project site>.

Example for WRO:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract >, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. As per approved Work Suspension Order No. ____ (**Annex ""**), the project was suspended due to <State the reason for suspension (elaborate)>. However, the problem has already been resolved, allowing the project to be resumed.

Example for CTE:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract >, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. As per approved Work Suspension Order No. ____ and Work Resumption Order No. ____ (**Annexes "" and ""**), the <choose one Contractor/DPWH PE> has requested for the suspension of the project due to <State the reason for the request of suspension of the project>. The aforementioned problem has been resolved resulting to the resumption of the project on <Date of resumption>.

Paragraph 3:

- ✓ State the action taken by the contractor and the DPWH Project Engineer.

5. Contractual Data :

DETAILS	ORIGINAL	REVISED
i. Contract Amount	<Amount>	<Amount>
ii. Contract Duration	<Duration in c.d.>	<Duration in c.d.>
iii. Effectivity of Contract	<Date>	<Date>
iv. Expiry Date	<Date>	<Date>
v. <Previously Approved Request>	<Amount> <Duration in c.d.>	<Amount> <Duration in c.d.>
vi. Effect in Cost of this Request	None	None

Note: For Item 5.v., specify and enumerate the approved request for VO, WSO, WRO, or CTE. (Do not include this note upon printing)

6. Physical Accomplishment as of <The date of request for WSO/WRO/CTE>:

Scheduled Physical Accomplishment:
 Actual Physical Accomplishment :
 Slippage :

7. Based on the approved PDM Network Diagram, here under are the items of work in the critical path affected by this request, to wit:

- i. Item XXX
- ii. Item YYY
- iii. Item ZZZ ...

8. Remarks :

- a) On the basis of the submitted documents indicated in the Checklist, this Office finds the request for WSO/WRO/CTE to be meritorious since... (*continue this paragraph based on the options stated below*)

If the request is WSO:

the <state reason of the request> prevented the contractor from implementing the project and no fault is attributable to the said contractor.

If the request is WRO:

the problem on <state reason for WSO> has been successfully resolved by the Implementing Unit/Office and the contractor. Thus, the contractor can now proceed or continue with the implementation of the project.

If the request is CTE:

no fault is attributable to the contractor on the reason for suspension issued corresponding to this Contract Time Extension.

- b) The request of the contractor for this proposed <state the type of request here> is within the timeframe as stipulated in (*input section and annex of the latest applicable government procurement act and its implementing rules and regulations for CWSO and CTE requests*) and Department Order No. 39 series of 2024 (*changed this D.O. if there is a new issuance*).
- c) In view of the foregoing, the proposed <state the type of request> is respectfully recommended for the ____ (*Head of IO*) approval, **subject to the condition that the approval of <choose one - suspension order / resumption order> is not an automatic basis to revise the contract duration and expiry date.** (*delete the phrase in bold if the request is CTE*).

NAME & SIGNATURE OF THE HEAD OF IMPLEMENTING OFFICE

Position

Office Code (e.g. R01.2/AAA/BBB/CCC)

<Date Prepared>

Annex B-1c

EXECUTIVE SUMMARY

(Proposed <Type of Request>)

*For proposed WSO/WRO/CTE in Regional Office
Implemented Projects (for approval by the
Regional Director)*

(Do not include this upon printing)

FOR : Regional Director <FULL NAME>
This Office

THRU : Assistant Regional Director <FULL NAME>
This Office

SUBJECT : Proposed <Type of Request> for the Project: <Name of Project>, Contract ID No. <ID No. in Contract Agreement>

1. Action Recommended :
2. Implementing Unit :
3. Contractor :
4. Reason for this request :

Paragraph 1:

This proposed <choose one – Work Suspension Order (W.S.O.)/Work Resumption Order (W.R.O.)/Contract Time Extension (C.T.E.) No. ____>, which was requested by the **<Contractor or DPWH Project Engineer (choose one)>**, per letter dated <Date of letter/memorandum> (**Annex ""**) was due to <state the reason for this request>.

Paragraph 2:

- ✓ State a brief background of the project from the date of effectivity up to the circumstance leading to this request and include a discussion on how the above-mentioned reason/s affected project implementation and/or prevented the contractor working at the project site.

Example for WSO:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract>, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. During the implementation of the project, the contractor has encountered <State the reason for suspension> that resulted to the

<Discuss how aforementioned reason for suspension will affect project implementation and/or prevented the contractor working at the project site>.

Example for WRO:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract >, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. As per approved Work Suspension Order No. ____ (**Annex ""**), the project was suspended due to <State the reason for suspension (elaborate)>. However, the problem has already been resolved, allowing the project to be resumed.

Example for CTE:

The <State the nature of the project (i.e. Construction, Rehabilitation, Concreting)> of the <State the project (i.e. school building, road, flood control)> has started on <Date of effectivity of contract >, with a contract duration of <Original contract duration> and expiry date on <Original expiry date>. As per approved Work Suspension Order No. ____ and Work Resumption Order No. ____ (**Annexes "" and ""**), the <choose one Contractor/DPWH PE> has requested for the suspension of the project due to <State the reason for the request of suspension of the project>. The aforementioned problem has been resolved resulting to the resumption of the project on <Date of resumption>.

Paragraph 3:

- ✓ State the action taken by the contractor and the DPWH Project Engineer.

5. Contractual Data :

DETAILS	ORIGINAL	REVISED
i. Contract Amount	<Amount>	<Amount>
ii. Contract Duration	<Duration in c.d.>	<Duration in c.d.>
iii. Effectivity of Contract	<Date>	<Date>
iv. Expiry Date	<Date>	<Date>
v. <Previously Approved Request>	<Amount> <Duration in c.d.>	<Amount> <Duration in c.d.>
vi. Effect in Cost of this Request	None	None

Note: For Item 5.v., specify and enumerate the approved request for VO, WSO, WRO, or CTE. (Do not include this note upon printing)

6. Physical Accomplishment as of <The date of request for WSO/WRO/CTE>:

Scheduled Physical Accomplishment:
 Actual Physical Accomplishment :
 Slippage :

7. Based on the approved PDM Network Diagram, here under are the items of work in the critical path affected by this request, to wit:

- i. Item XXX
- ii. Item YYY
- iii. Item ZZZ ...

8. Remarks :

- a) On the basis of the submitted documents indicated in the Checklist, this Office finds the request for WSO/WRO/CTE to be meritorious since... (*continue this paragraph based on the options stated below*)

If the request is WSO:

the <state reason of the request> prevented the contractor from implementing the project and no fault is attributable to the said contractor.

If the request is WRO:

the problem on <state reason for WSO> has been successfully resolved by the Implementing Unit/Office and the contractor. Thus, the contractor can now proceed or continue with the implementation of the project.

If the request is CTE:

no fault is attributable to the contractor on the reason for suspension issued corresponding to this Contract Time Extension.

- b) The request of the contractor for this proposed <state the type of request here> is within the timeframe as stipulated in (*input section and annex of the latest applicable government procurement act and its implementing rules and regulations for WSO and CTE requests*) and Department Order No. 39 series of 2024 (*changed this D.O. if there is a new issuance*).
- c) In view of the foregoing, the proposed <state the type of request> is respectfully recommended for the ____ (*Head of IO*) approval, **subject to the condition that the approval of <choose one - suspension order / resumption order> is not an automatic basis to revise the contract duration and expiry date.** (*delete the phrase in bold if the request is CTE*).

NAME & SIGNATURE OF THE CHIEF OF IMPLEMENTING UNIT

Position

Office Code (e.g. R01.2/AAA/BBB/CCC)

<Date Prepared>

Annex B-2a

MEMORANDUM

FOR : Head of Implementing Office <FULL NAME>
This Office

SUBJECT : Project Engineer's Report for the (Proposed Work Suspension Order No. __)

Contract ID :
Contract Name :
Reason for this request :

Paragraph 1:

Discuss who initiated the request and when. Include also the specific scenario or circumstance that renders the project site to be unworkable which ultimately led a party to request for the issuance of work suspension order. The discussion should also include the following:

- a.) the item/s of work affected;
- b.) whether such item/s are in the critical path of the approved construction schedule; and
- c.) whether or not there are workable areas at the project site.

Paragraph 2:

Discuss the actions taken by the Contractor and the Implementing Office / Unit to address or resolve the issue causing the work stoppage, if any.

Paragraph 3:

Cite the applicable department policies and existing laws, rules and regulations that serves as the legal basis for this request.

<Name of Project>
<Type of Request>

Page _ of _

Recommendation :

The approval of [Type of Request] is hereby **recommended** in view of the circumstances which affect the implementation of the project, as supported by the submitted pertinent documents in accordance with [Latest approved DO for DoTS], and pursuant to existing laws and Department Policies.

NAME & SIGNATURE OF THE PROJECT ENGINEER

Project Engineer I/II/III/JPE

Office Code (e.g. R01.2/AAA/BBB/CCC)

<Date Prepared>

Annex B-2b

MEMORANDUM

FOR : Head of Implementing Office <FULL NAME>
This Office

SUBJECT : Project Engineer's Report for the (Proposed Work Resumption Order No. __)

Contract ID :
Contract Name :
Reason for this request :

Paragraph 1:

Discuss who initiated the request and when. Include also the specific scenario or circumstance that renders the project site to be unworkable which ultimately led to the issuance of work suspension order.

Paragraph 2:

Discuss the actions taken by the Contractor and the Implementing Office / Unit to address or resolve the issue causing the work stoppage, if any. Establish also the date as to when the problem was resolved.

Paragraph 3:

Cite the applicable department policies and existing laws, rules and regulations that serves as the legal basis for this request.

Recommendation :

The approval of [Type of Request] is hereby **recommended** since the circumstances which affect the implementation of the project had been resolved, as supported by the submitted pertinent

<Name of Project>

<Type of Request>

Page _ of _

documents in accordance with [Latest approved DO for DoTS], and pursuant to existing laws and Department Policies.

NAME & SIGNATURE OF THE PROJECT ENGINEER

Project Engineer I/II/III/JPE

Office Code (e.g. R01.2/AAA/BBB/CCC)

<Date Prepared>

Annex B-2c

MEMORANDUM

FOR : Head of Implementing Office <FULL NAME>
This Office

**SUBJECT : Project Engineer's Report for the (Proposed Contract Time Extension
No. __)**

Contract ID :
Contract Name :
Reason for this request :

Paragraph 1:

Discuss who initiated the request and when. Include also the specific scenario or circumstance that renders the project site to be unworkable which ultimately led to the issuance of work suspension order /MTSR. The discussion should also include the following:

- a) the item/s of work affected; and
- b) whether such item/s are in the critical path of the approved construction schedule.

Paragraph 2:

Discuss the actions taken by the Contractor and the Implementing Office / Unit to address or resolve the issue causing the work stoppage, leading to the issuance of work resumption order, if applicable.

Paragraph 3:

Discuss whether no fault is attributable to the contractor for the delayed implementation of the project. For CTE due to rainy/unworkable days, discuss whether or not pre-determined unworkable days were included in the contract and whether the same has been exhausted already.

Paragraph 4:

Cite the applicable department policies and existing laws, rules and regulations that serves as the legal basis for this request.

Recommendation :

The approval of <Number of days recommended for this CTE request> additional Contract Time duration is hereby **recommended** since the circumstances which affect the implementation of the project is not the fault and/or beyond the control of the contractor and to compensate for the suspended period of the project, as supported by the submitted pertinent documents in accordance with [Latest approved DO for DoTS], and pursuant to existing laws and Department Policies.

NAME & SIGNATURE OF THE PROJECT ENGINEER

Project Engineer I/II/III/JPE

Office Code (e.g. R01.2/AAA/BBB/CCC)

<Use the official letterhead details in accordance with the most current standards for Agency Identity>

<Date Prepared>

Annex B-3

CHRONOLOGY OF EVENTS

(*Type of Request*)

Subject : **Proposed <Type of Request> for the Project: <Name of Project>, Contract ID No. <ID No. in Contract Agreement>**

Contractor : **<FULL NAME OF CONTRACTOR>**

DATES	DETAILS
<Mmmm dd, yyyy>	Notice to Proceed
<Mmmm dd, yyyy>	Pre-Construction Meeting
<Mmmm dd, yyyy>	Date of Effectivity of Contract
<Mmmm dd, yyyy>	<Site Instruction, if any>
<Mmmm dd, yyyy>	<Communication Letter, if any>
<Mmmm dd, yyyy>	<Minutes of the Meeting, if any>
<Mmmm dd, yyyy>	<Previously approved requests, if any>
<Mmmm dd, yyyy>	Letter Request of the Contractor for the <For this type of request>

Note: The action taken by the contractor and IO should be in chronological order, same with the previously approved request/s, if any. The details should be comprehensive to include all the events/milestones made prior to this request. (Do not include this note upon printing)

Prepared by:

NAME & SIGNATURE OF THE PROJECT ENGINEER

Project Engineer I/II/III/JPE

Concurred:

NAME & SIGNATURE OF THE HEAD OF IMPLEMENTING UNIT

Position

<Office Code>

<Use the official footer details in accordance with the most current standards for Agency Identity>

CERTIFICATION

Annex B-4

Paragraph 1: State the purpose of this certification and the name of the project with contract ID.

Example:

This is to certify that the predetermined unworkable days equivalent to Thirty (30) calendar days considered during the computation of the duration of the project <State the contract name> has been fully utilized.

This certification is being issued upon the request of <**NAME OF CONTRACTOR**> to support its claim for <Type of Request> for the above-mentioned project.

Given this ___ day of (Month Year), at DPWH <Name of Office>, <Office address>.

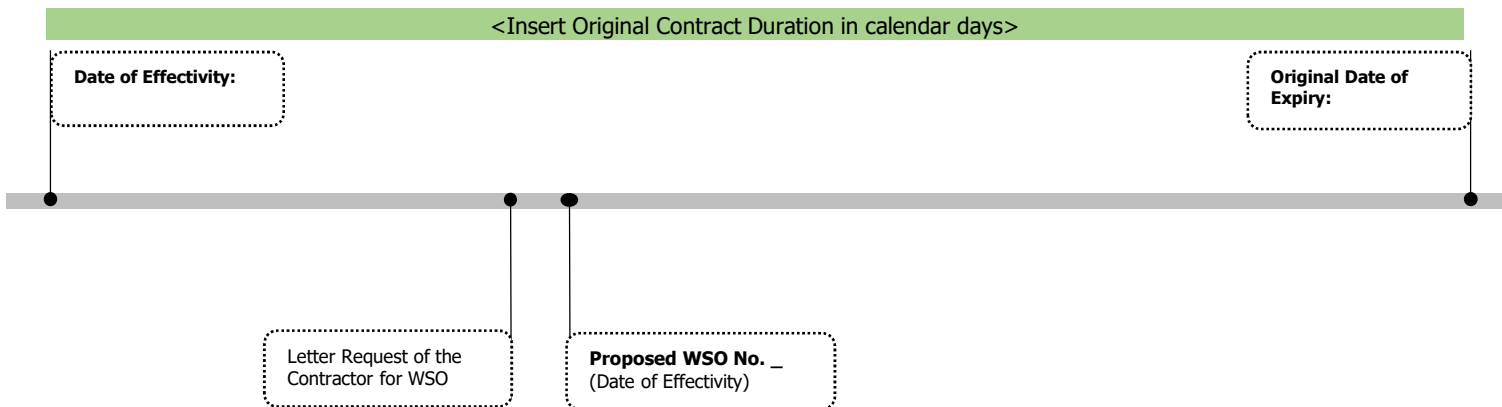
NAME & SIGNATURE OF THE PROJECT ENGINEER

Project Engineer I/II/III/JPE

Office Code (e.g. R01.2/AAA/BBB/CCC)

STRAIGHT LINE DIAGRAM*(Showing the Vital Dates of the Project)**SLD for Work Suspension Order (Do not include this upon printing)***Contract ID:****Contract Name:****Contractor:**

Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy
-----------	-----------	-----------	-----------	-----------	-----------	-----------	-----------

**Legend:**
 Original Contract Duration

Prepared by:

Reviewed and Checked by:

<NAME & SIGNATURE OF THE CONTRACTOR'S PE>

Project Engineer I/II/PPE

<NAME & SIGNATURE OF THE DPWH PE>

Project Engineer I/II/III/JPE

<Contractor's Logo/Header>

Annex B-5b

STRAIGHT LINE DIAGRAM

(Showing the Vital Dates of the Project)

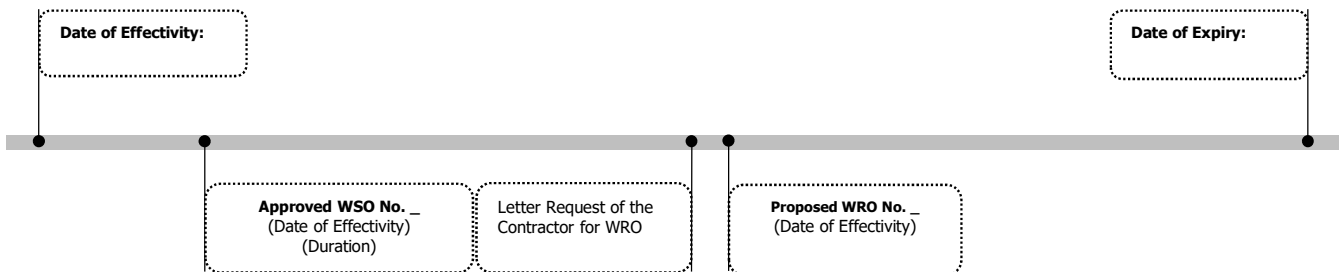
SLD for Work Resumption Order (Do not include this upon printing)

Contract ID:

Contract Name:

Contractor:

Mmm. dd, yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. yyyy	Mmm. dd, yyyy
<Insert Original Contract Duration in calendar days>							



Legend:

 Original Contract Duration

Prepared by:

Reviewed and Checked by:

<NAME & SIGNATURE OF THE CONTRACTOR'S PE>

Project Engineer I/II/PPE

<NAME & SIGNATURE OF THE DPWH PE>

Project Engineer I/II/III/JPE

STRAIGHT LINE DIAGRAM

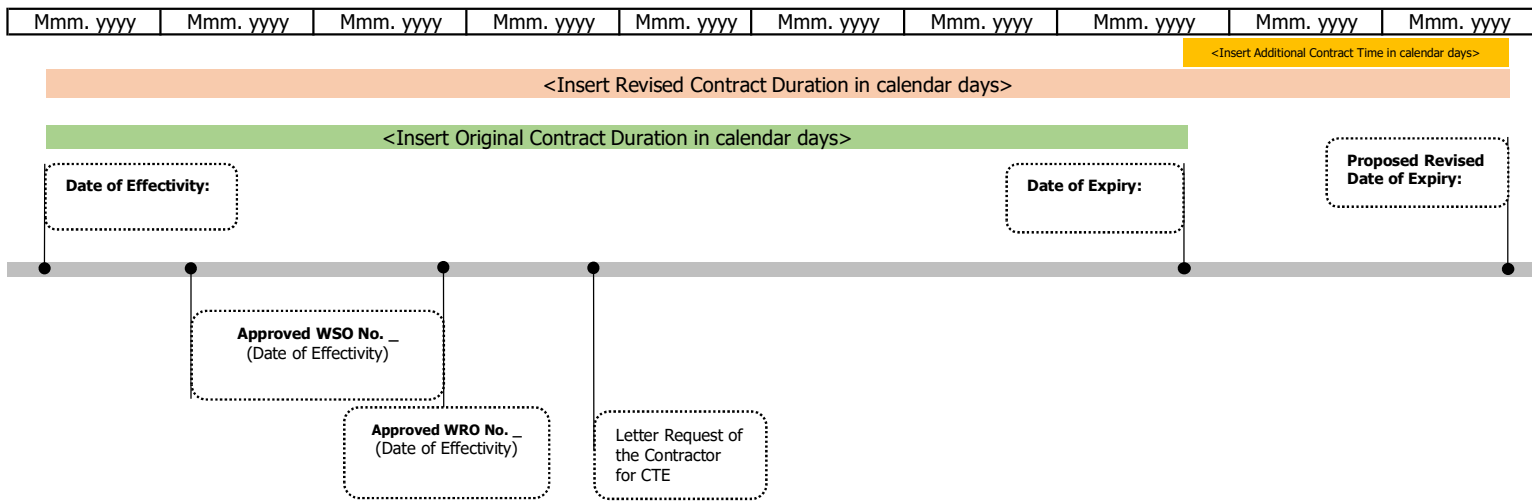
(Showing the Vital Dates of the Project)

*SLD for Contract Time Extension
(Do not include this upon printing)*

Contract ID:

Contract Name:

Contractor:



Legend:

- Original Contract Duration
- Proposed Additional Contract Time
- Proposed Revised Contract Duration

Prepared by:

Reviewed and Checked by:

<NAME & SIGNATURE OF THE CONTRACTOR'S PE>

Project Engineer I/II/PPE

<NAME & SIGNATURE OF THE DPWH PE>

Project Engineer I/II/III/JPE

STRAIGHT LINE DIAGRAM

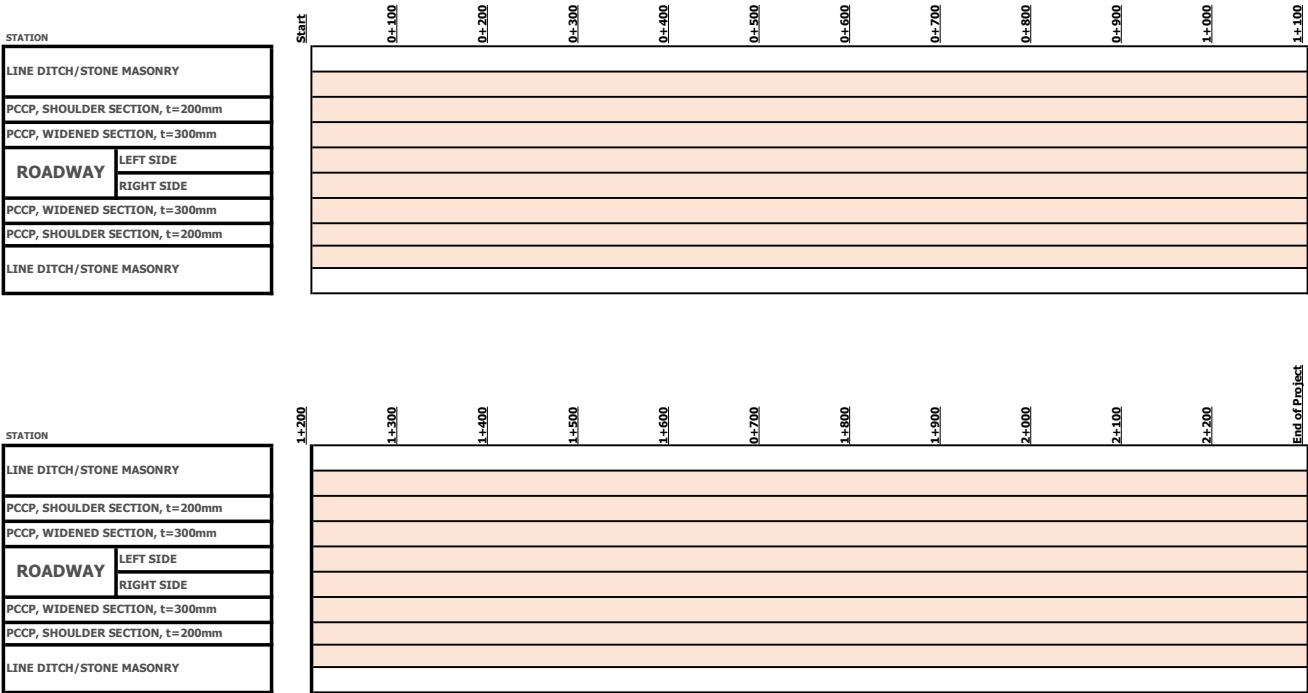
(Showing the Critical Activities Affected)

Contract ID:
Contract Name:
Contractor:

Items of work and station limits may be modified according to the details of the project

This is not applicable for building/vertical projects

(Do not include this upon printing)



Legend:

- Affected items of work due to <State the Request WSO/WRO/CTE>
- Completed works/sections

Prepared by:

Reviewed and Checked by:

<NAME & SIGNATURE OF THE CONTRACTOR'S PE>

Project Engineer I/II/PPE

<NAME AND SIGNATURE OF THE DPWH PE>

Project Engineer I/II/III/JPE

<Date Prepared>

Annex C-1

CONTRACTUAL DATA

(Type of Request)

1. Subject : **Proposed <Type of Request> for the Project: <Name of Project>, Contract ID No. <ID No. in Contract Agreement>**
2. Implementing Unit :
3. Contractor :
4. Original Contract Amount :
5. Contract Effectivity Date :
6. Original Expiry Date :
7. Original Contract Duration :

8. Previously Approved Request :
 - a. <Type of Previously Approved Request>
Revised Contract Amount :
Revised Contract Duration :
Revised Expiry Date :
 - b. <Type of Previously Approved Request>
Revised Contract Amount :
Revised Contract Duration :
Revised Expiry Date :

Note: Add item if there are more previously approved contract-related claims (amount/duration-related)

10. Physical Accomplishment as of <State Date here>:
Scheduled Physical Accomplishment :
Actual Physical Accomplishment :
Slippage :

Prepared by:

NAME & SIGNATURE OF THE PROJECT ENGINEER

Project Engineer I/II/III/JPE

<Office Code>

<Contractor's Logo/Header>

GEOTAGGED PICTURES
(Type of Request)

Annex C-2

(Place geotagged picture here)

Write a brief caption here (e.g. Name of project, Station Limits of the project, location, or how it affects the implementation of the project).

Prepared by:

Verified by:

**NAME & SIGNATURE OF THE
CONTRACTOR'S PE**
Project Engineer I/II/PPE

**NAME & SIGNATURE OF THE
DPWH PE**
Project Engineer I/II/III/JPE