Dixieline
BUILDERS FUND CONTROL
Builders FirstSource

INCREASE REQUEST

To: Dixieline Builders Fund Control, Inc.

Re: Fund Name _____

Fund Number_____

Please accept this change order as your authorization to increase the line item as follows:

ITEM NUMBER:

Item Number/Description	DOLLARS

ACKNOWLEDGED AND AGREED:

_____ _____

Construction Lender Date

_____ _____

Contractor Date

_____ _____

Owner Date

By signing above it is also acknowledged and agreed that there may be an increase to the fund control fee which will be calculated based upon the revised total budget and the appropriate fee rate in accordance with our current fee schedule.