

TASK ORDER AGREEMENT INSTRUCTIONS

If **NEW TASK ORDER** follow instructions below:

1. **Task Order Number:** Take task order number from pre-assigned number provided for each division.
 2. **Check New Task Order or Backfill:** for replacement of vacated position.
 3. **Contract Vendor:** Name of vendor providing this contractor.
 4. **Contract Number:** Actual Master Agreement or Catalog Master Agreement contract number for contractor requested.
 5. **Task Start Date:** Task Order start date.
 6. **Task End Date:** Task Order end date.
 7. **Total Authorized Billable Task Hours:** Total authorized billable hours for the task order for the contractor.
 8. **Total Orientation Hours (non-billable):** This should not exceed 24 hours total for each contractor. This line must be completed by the Commonwealth. Orientation hours must be included on item 9 or 10. If this line is omitted, zero (0) hours of orientation are assumed.
 9. **Total Cost of Task Order:** Calculate total by multiplying the appropriate rate for Contract Line Item position times the number of billable hours for each contract.
 10. **COT or Agency Manager:** Manager responsible for signing timesheets.
 11. **COT or Agency Manager Phone #:** Phone number of manager responsible for signing timesheets.
 12. **COT Location ID#:** Appropriate COT location id# for the organization responsible for administering Task Order Agreement. This is a PMIS-related field that allows COT to identify the organization the contractor resides in, regardless of who issued the task order or who signs the time sheet.
 13. **COT APR #:** Appropriate COT APR number. This is a tracking number entered on the form by COT, and comes from Front Range when the ticket is created for the Task Order. This allows for tracking the task order back to the original Front Range ticket if there are ever questions about the origin of the task order.
 14. **COT Timesheet Approver:** Name of COT employee that will approve this contractor's time sheet.
 15. **Contractor Information:** Name of contractor for the task order to be completed upon acceptance by the Commonwealth. Please include the following information: **Contract Line Item #** is found on contract and is specific to the position of requested contractor. **Pass Thru Code/Activity Code:** Please contact your manager. **Financial Branch Cost Center #:** this number isn't needed if it's the same as the COT LOCATION ID #. If it is different, this number is the "COT Org #", and should be provided by each Branch Manager, or whoever is requesting the Task Order.
 16. **Task Description:** Task description should include a number and classification requested for the task order. Include qualifications/skills/experience & classification of contractor requested, and any specific task deliverables, documentation, inputs and responsibilities.
 17. **Justification:** Clearly state the business reasons for initiating this task order.
 18. **Background Check review and certification (for COT use only):** (Not required if background is free of infractions.) If applicable, the names of the COT manager (or director) and Executive Director who have reviewed and approved this contractor's background check should be included below.
- 2nd page.** The second page of the form is used for ensuring that a proper and recent background check has been performed by the vendor and has been provided to COT. The vendor must also certify that the contractor has signed an Acknowledgment of Confidentiality Agreement (COT-F011) and an Internet and Electronic Mail Acceptable Use Policy Certification Form (COT-F084) in the last 60 days and that these forms have been forwarded to COT.

NOTE: If space allowed on this form is insufficient, please attach additional sheets.

TASK ORDER AGREEMENT AMENDMENT INSTRUCTIONS

If **AMENDED TASK ORDER** follow instructions below:

1. **Task Order Number:** Same number as on the original task order. Indicate amendment to existing task order on second line.
2. **Check Amendment.**
3. **Contract Vendor:** Same as original.
4. **Contract Number:** Same as original.
5. **Task Start Date:** Task Start Date should represent the start date of the amendment. If task order extension, date of extension should start on the end date of the original task order. Task orders cannot be amended after expiration of the original task order.
6. **Task End Date:** Task Order end date depending on the amendment should coordinate with the original end date or if this is an extension, define new date.
7. **Total Authorized Billable Task Hours:** Total authorized hours for amendment only.
8. **Total Orientation Hours:** Estimated orientation hours must be zero, unless a new contractor is added.
9. **Total Estimated Task Cost:** Total of amended amount.
10. **COT or Agency Manager:** Manager responsible for signing timesheets.
11. **COT or Agency Manager Phone #:** Phone number of manager responsible for signing timesheets.
12. **COT Location ID#:** Same as original.
13. **COT APR #:** Same as original.
14. **COT Timesheet Approver:** Same as original.
15. **Contractor Information:** Same as original.
16. **Task Description:** Same as original unless there is a change from the original task order.
17. **Justification:** Same as original unless there is a change from the original task order.
18. **Background Check review and certification:** Not required for task order amendments unless there is a break in service from the original task order.