METROPOLITAN WASHINGTON AIRPORTS AUTHORITY
REVISION TO ORIGINAL LETTER OF INTENT

(Name of Prime Contractor) Contract Number _____________________________
Location _____________________________
Contract Name _____________________________

(Name of 1st Tier Subcontractor (If Applicable))

Revision # _____ MWAA Change Notice # ___________ MWAA Contract Modification # ___________
Describe Change or Modification _________________________________________________________

This revision represents: ☐ Increase in Contract Amount ☐ Decrease in Contract Amount
If Decrease, state reason _______________________________________________________________

A. The undersigned LDBE intends to perform the work associated with this contract as (Check one):
   ☐ Individual ☐ Partnership ☐ Corporation ☐ Joint Venture

B. The undersigned LDBE will perform the work associated with this contract as a (Check all that apply):
   ☐ Construction Contractor ☐ Stocking Supplier ☐ Manufacturer ☐ Stocking Distributor
   ☐ Broker, Agent, Packager ☐ Hauler ☐ Service Provider (for non-construction contracts)

C. The undersigned LDBE will: ☐ Perform the following services ☐ Supply the following materials, equipment, supplies:

IF AVAILABLE, PLEASE ATTACH A COPY OF THE PROPOSED SCOPE OF WORK FOR THIS SUBCONTRACTOR.

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Detailed Description Of Scope of Work</th>
<th>Scope of Services (Check One)</th>
<th>Quantity</th>
<th>Unit Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>01</td>
<td></td>
<td>☐ Labor Only ☐ Matl Only ☐ Complete</td>
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<tr>
<td>02</td>
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<tr>
<td>04</td>
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</table>

Please Attach Additional Sheets if Necessary

D. Work described above will be performed at the following total price: $_____________________________.

E. Original Total Contract Amount: $___________ Current Total Contract Amount: $___________
   Total Amount of This Revision: $___________ New Total Contract Amount: $___________

F. Term of Contract Original Commencement Date: _________ Original Completion Date: _________
   Revised Commencement Date: _________ Revised Completion Date: _________

G. _______% of the dollar value of the subcontract will be performed by (check if applicable):
   ☐ Non-LDBE contractors ☐ Non-LDBE suppliers.

The undersigned will enter into a subcontract consistent with the above upon execution of a contract between the Prime Contractor and the Authority: (NOTE: SIGNATURES MUST BE DATED)

Agreed To
(Print or Type Name of LDBE Firm) (Print or Type Name of Prime Contractor)

By
(Print or Type Name and Title) (Print or Type Name and Title)

(Signature) (Date) (Signature) (Date)

(Print or Type LDBE’s Certification Number and Expiration Date)

FOR MWAA USE ONLY

MWAA EOP Specialist’s Approval $_________________________ _______________ ___________
(Enter The Amount of Contract Approved for LDBE Participation) (Signature) (Date)

MWAA/EOP 02/2005