

New York State Commission of Correction
Change Order Application Form

SCOC0404a

Name of County, Telephone and Fax #	
Name of Person Filing Application	
Describe Change Order (use additional sheets if necessary)	
Justification (including impact on security)	
Listing of Supporting Documentation	

FOR SCOC USE ONLY:	Date Application Reviewed:
Date Application Received:	<input type="checkbox"/> Accepted
	<input type="checkbox"/> Denied