Enter Date

Insert DAS/CS PM Name

DAS Project Manager

450 Columbus Boulevard, Suite 1201

Hartford, CT 06103

Re: Request for Suspension of the On-Call Task Assignment for Project No. Insert Project # - Insert Project Name.

Insert DAS/CS PM Name:

The Insert User Agency Name understands that under the provisions of On-Call Contract No.: Insert On-Call Contract Number that the Commissioner of the Department of Administrative Services (hereafter the “Commissioner”) may suspend all or any part of the Consultant services under an On-Call task assignment by providing said Consultant with a written notice of suspension by registered or certified mail, and that the mailing of said notice precludes any claim on the part of the Consultant as to failure to receive notice of such suspension.

It is further understood that the Consultant shall be entitled to such compensation as determined reasonable for services provided prior to the effective date of the suspension of work, and after payment of any outstanding fees, that the Insert User Agency Name shall be entitled to all finished and unfinished documents prepared pursuant to the Contract. The Commissioner may, at the request of the Insert User Agency Name, reactivate any assigned work covered by the Contract, in whole or in part, within one year from the time the work was suspended and any fees paid to the Consultant pursuant to said Contract shall be applied as payment on the fees for the work as set forth in said Contract at the time of reactivation. Should reactivation occur after a period of suspension exceeding one (1) year, the Consultant and the State may renegotiate the fees for the work based on current conditions or either may unilaterally elect to terminate the remaining work under the task assignment.

Now therefore, the Insert User Agency Name does hereby request suspension of On-Call Task Assignment No. Insert Task # assigned to Insert Consultant Name under the provisions of Contract No. Insert On-Call Contract Number for the above referenced project.

Sincerely,

Insert Authorized Representative Name

Insert Authorized Representative Title

cc Craig Russell, Director Project Support Services, craig.russell@ct.gov