|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| PSP 4 – Early Warning Notice | | | | | |
| **Project Data** | | | | | |
| Title |  | | | | |
| Project Manager |  | | | | |
| Client |  | | Early Warning Number | | **EWN-XXX-YYY** |
| Client Reference |  | | | | |
| Item | Early Warning Notification Form | | Early Warning Notification To: | | |
| Name |  | |  | | |
| Position |  | |  | | |
| Contractor |  | |  | | |
| Address |  | |  | | |
| Telephone Number |  | |  | | |
| Mobile Number |  | |  | | |
| Email |  | |  | | |
| **Details of Early Warning Notice** | | | | | |
| Date of Issue |  | | | | |
| Response required within |  | | Working days | | |
| Related Early Warnings Notices |  | | | | |
| Date at which Consultant became aware of event | Click or tap to enter a date. |  | | | |
| Event Title |  | | | | |
| Description |  | | | | |
| **Implications of Event** | | | | | |
| Anticipated effect |  | | | | |
| Increase the total of the Prices | YES | | NO | | |
| Delay Completion | YES | | NO | | |
| Impair the performance of the works/services | YES | | NO | | |
| Adversely affect the Consultant’s performance | YES | | NO | | |
| Early Warning Meeting instructed: | YES | | NO | | |
| Consultant Project Manager signature |  | | Name: |  | |
| Date | Click or tap to enter a date. | |  | | |
| **Acknowledgement of Early Warning:** | | | | | |
| From: | Click or tap to enter a date. | | To: | | Click or tap to enter a date. |
| Early Warning Meeting Instructed | YES | | NO | | |
| **Signature** |  | | Date: | Click or tap to enter a date. | |
| Early Warning Meeting held: | YES | | NO: | | |
| Minutes of Meeting/Comments: |  | | | | |
| **Signature:** |  | | Date: | Click or tap to enter a date. | |