**STOP WORK ORDER**

Company

ATTN:

Address

City, State, Zip

Subject: ***[Insert Contract Number and project description]***

Date: ***[Insert date]***

Dear ***[Insert name]***,

Pursuant to AMS Clause 3.10.1-[***Insert clause number], [Insert clause name],*** titled “Stop-Work Order”, the Contractor is hereby instructed to ***[Choose one of the following: (1) “stop all work immediately and to make no further commitments” or (2) enter a description specifying the work to be suspended]*** under contract [*insert number*]. Under the requirements of this clause, the Contractor shall take steps necessary to minimize the incurrence of costs allocable to the period of work stoppage and advise all sub-contractors and vendors to do the same. ***[If applicable, insert other suggestions for minimizing the contractor’s cost]***. This stop-work order is in effect for 90 days after the order is received by the Contractor, and for any further period to which the Parties may agree. The Contractor shall not resume work under this contract until notification has been received in writing from the Contracting Officer that this order has been canceled, or that the work has been terminated by the Contracting Officer.

Should you have any questions concerning this notification, please feel free to contact ***[Insert name of Contracting Officer]***, at ***[contracting.officer@faa.gov]*** or ***[Insert*** ***phone number]***.

Sincerely,

***[Insert CO’s Name]***

Contracting Officer

***[Insert Office Name/Code e.g., AAQ]***

***[Insert Office Address]***