

ATTACHMENT 21: WORK ORDER AUTHORIZATION FORM

Work Order Authorization (WOA)

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Contract #: XXXX

WOA #:

Title:

Date:

Expected Term of WOA: ____ through ____

Not-to-Exceed Cost: \$_____

1. Introduction

This Work Order Authorization (“WOA”) is issued pursuant to the terms of California Department of Cannabis Control (DCC) Contract #XXXX (the “Contract”). Upon approval of this WOA, the Contractor shall be authorized to perform the work described herein, including all attachments or exhibits attached hereto or incorporated herein by reference.

2. WOA Scope / Description

This WOA authorizes the Contractor to perform work associated with Phase ____ of the CSI Project, including the deliverables, milestones, and activities defined herein. The work will be executed in accordance with the approved project schedule and Deliverable Expectation Documents (DEDs). The Contractor shall provide all labor, materials, tools, and resources necessary to complete and deliver the defined scope of work.

3. Payment Provisions

3.1 Payment Basis

The Contractor shall be compensated on a fixed-price basis for the successful completion and State acceptance of each deliverable or milestone identified in Table 3.2 – Deliverable Payment Schedule. Each deliverable payment represents full compensation for all work necessary to achieve the specified acceptance criteria.

3.2 Deliverable Payment Schedule

| Deliverable / Milestone ID | SOW Reference | Deliverable / Milestone Name | Acceptance Criteria Reference | Fixed Price | Target Completion Date |
|----------------------------|---------------|------------------------------|-------------------------------|-------------|------------------------|
|----------------------------|---------------|------------------------------|-------------------------------|-------------|------------------------|

| | | | | | |
|--|--|--|--|--|--|
| | | | | | |
| | | | | | |

Total Fixed-Price Not-to-Exceed Amount: \$XXX,XXX

3.3 Payment Terms

Payment shall be made only after the State's formal written acceptance of each deliverable or milestone in accordance with the DED. Each DED shall have a version history and approval table. Signature in the approval table, on the most recent version, indicates the State's formal written acceptance of each deliverable.

3.4 Withhold

☐ 20% Holdback Release in accordance with Contract

☐ Other: _____

4. Approved Contractor Staff

| Staff ID | Name of Personnel | Role | SOW ID | Assigned Deliverables |
|----------|-------------------|------|--------|-----------------------|
| | | | | |

5. WOA Reporting Requirements

The Contractor shall provide weekly written status updates including: work completed to date, risks and issues encountered, planned future work, and any potential schedule or scope variances. If the Contractor anticipates that a deliverable cannot be completed within the WOA schedule, the Contractor shall immediately notify the DCC Project Director or designee for resolution.

6. WOA Entrance and Acceptance Criteria

6.1 Entrance Criteria

All prerequisites necessary to begin work under this WOA must be satisfied prior to initiation (e.g., completion of prior phase deliverables, availability of environments, and data readiness).

6.2 Acceptance Criteria

Each deliverable or milestone shall be deemed accepted upon written approval by the State confirming that all acceptance criteria defined in the corresponding DED have been met.

7. WOA Amendment

Any modification to deliverables, schedule, or cost must be approved by both parties in writing through a formal amendment to this WOA.

8. Attachment Listing

Attachment 1 – WOA Schedule for Contractor Work

9. Approvals

| | |
|---------------------------------------|---|
| DCC Project Director or Designee Date | Contractor Project Manager or Designee Date |
| | |

By signing below, the parties certify that they have the authority to obligate their respective organizations to this WOA and agree to its terms and all incorporated documents.

Attachment 1 – WOA Schedule for Contractor Work

| Deliverable ID | Milestone | Start Date | Completion Date | Dependencies |
|----------------|-----------|------------|-----------------|--------------|
| | | | | |