IMPORTANT NOTICE: This sample form, **ASSIGNMENT OF CONTRACT**, is acceptable to the Dormitory Authority for contractor assignments of contract payments. This form has important legal consequences, and should be prepared and executed under the supervision of an attorney. It is the ultimate responsibility of the user and the user's attorney to determine the legal sufficiency of the form for the use intended with or without change. In connection with the use of this form, the Dormitory Authority shall not be liable for any loss or damage however caused or by whoever used.

DORMITORY AUTHORITY

[project] [contract description] JDE#_____

ASSIGNMENT OF CONTRACT

An Agreement having been made as of [date], by and between the **DORMITORY AUTHORITY OF THE STATE OF NEW YORK**, having its principal office and place of business located at 515 Broadway, Albany, New York 12207, therein and hereinafter referred to as the Authority, and [original contractor] whose address is ______; and

WHEREAS, [original contractor] intends to assign this Agreement from [original contractor] to [new contractor]; and

NOW, THEREFORE, the Authority and [original contractor] agree that said Agreement is hereby further amended as follows:

- 1. [original contractor] hereby irrevocably assigns the above Agreement in all respects to [new contractor], and [new contractor] hereby accepts the assignment thereof in all respects and the Authority hereby consents to this assignment and, as assigned, said Agreement is hereby amended so that wherever the name [original contractor] is used herein they shall mean [new contractor].
- 2. Any and all payments made by the Authority to either [original contractor] or [new contractor] shall be deemed to have been made to both and shall discharge the Authority from any further liability with regard to said payment. Any liability of either [original contractor] or [new contractor] to the Authority shall be deemed to the liability of either or both.

It is further agreed that all terms and conditions of this Agreement, as amended, shall remain in full force and effect.

[new contractor]

By _____

Title _____

[original contractor]

By _____

Title _____

DORMITORY AUTHORITY

By _____

Title _____

ACKNOWLEDGMENT OF OFFICER OF OWNER EXECUTING CONTRACT

STATE OF NEW YORK) COUNTY OF ALBANY) ss:

On the _____day of ______in the year _____, before me personally came ______, to me known, who, being by me duly sworn, did depose and say that (s)he resides at ______, that (s)he is the ______ of Dormitory Authority, the corporation described in and which executed the above instrument; and that (s)he signed her/his name thereto by order of the Board of Directors of said corporation.

Notary Public

ACKNOWLEDGMENT OF [new contractor]

STATE OF NEW YORK) COUNTY OF _____) ss:

On theday of	in the year	, before me personally
came	to me known, who, l	being by me duly sworn, did
depose and say that (s)he resides at		
	, that (s)he is the	of

., the corporation described in and which executed the above instrument; and that (s)he signed her/his name thereto by order of the Board of Directors of said corporation.

Notary Public

ACKNOWLEDGMENT OF [original contractor]

STATE OF NEW YORK) COUNTY OF _____) ss:

On the ______day of ______ in the year _____, before me personally came _______ to me known, who, being by me duly sworn, did depose and say that (s)he resides at ______, that (s)he is the ______ of _____, the corporation described in and which executed the above

______, the corporation described in and which executed the above instrument; and that (s)he signed her/his name thereto by order of the Board of Directors of said corporation.

Notary Public