



# AGILITY WORK PLAN

Agility Work Plan Number/Letter: \_\_\_\_\_ Agility Agreement: \_\_\_\_\_

Partner Name: \_\_\_\_\_

Agility Agreement Expiration Date: \_\_\_\_\_

Agility Agreement Renewal Letter Expiration Date: \_\_\_\_\_

WBS Element: \_\_\_\_\_ County: \_\_\_\_\_

**PARTNER COMPLETES**

Services/Resources Received from the Partner	Planned Production Units	Unit	Unit Price	Total	Estimated Date of Completion	Completion Date Initials/Date Work Approved
<b>TOTALS:</b>						

**PennDOT COMPLETES**

Services/Resources Received from PennDOT	Planned Production Units	Unit	Unit Price	Total	Estimated Date of Completion	Completion Date Initials/Date Work Approved
<b>TOTALS:</b>						

Accepting:

Signature, PennDOT \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature, Partner \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature, AFSCME \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Signature, Partner's Union \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_