

CHANGE ORDER

Sheet No. _____ of _____

Change Order No. 2

County_____

Route_____

To Emery Sapp & Sons

Contractor

You are hereby directed to make the following changes from the contract.

Project

Job No. Resurfacing 2018

[illegible]

1. Description and Reason for Change (Attach Supplemental Sheets if Required)

To add additional streets for resurfacing.

2. Estimate of Cost of work Affected by this Change Order.

(A) EST. LINE NO.	(B) CONTRACT ITEM NO.	(C) ITEM DESCRIPTION	(D) UNITS PREVIOUSLY PROVIDED FOR	(E) UNITS TO BE CONSTRUCTE D	(F) UNITS OVERRUN, UNDERRUN, CONTINGENT	(G) CONTRACT OR AGREED UNIT PRICE	(H) AMOUNT OF OVERRUN OR PLUS CONTINGENT	(I) AMOUNT OF UNDERRUN OR MINUS CONTINGENT
1	1	BP1/BP2 Asphalt Surfacing 2" Ave	26941.28	30,923.59	3982.31	50.61	201,544.71	201,544.71
2	2	Cold Planing 1"-2" (Edge Mill)	75489.17	94,616.27	19127.10	1.85	35,385.13	35,385.13
						TOTALS	\$	236,929.84

3. Cost Justification for items not bid in contract:

Current bid prices of 2018 Resurfacing Project

4. Other City Departments Consulted:

Name _____

Date _____

Department / Title

Date _____

Name _____

Department / Title

Date _____

Name _____

Department / Title _____

5. Settlement for Cost of the above Change to be made at Contract Unit Price Except as Noted:

1. CONTRACT AMOUNT		\$1,719,134.59	The Terms of Settlement outlined above are hereby agreed to.
2. OVERRUN THIS ORDER	\$	236,929.84	CONTRACTOR
3. OVERRUN PREVIOUS	\$	27,941.28	
4. TOTAL OVERRUN TO DATE	\$	\$ 264,871.12	by : _____ Date
5. TOTAL		\$1,984,005.71	

Emergency Provisions of Change Order Policy Used YES ☐ NO ☐ Date approved _____

Reason for Emergency and description of work approved _____

SUBMITTED ENGINEER _____
DATE *APPROVAL DIRECTOR OF FINANCE _____
DATE

APPROVAL PROJECT MANAGER _____
DATE *APPROVAL CITY MANAGER _____
DATE

APPROVAL SUPERVISOR/
ENGINEERING REVIEWER _____
DATE *When applicable.

APPROVAL OF DEPARTMENT HEAD _____
DATE