



Marion County Board of County Commissioners

Procurement Services

2631 SE Third St.
Ocala, FL 34471
Phone: 352-671-8444
Fax: 352-671-8451

CHANGE ORDER FORM

This form is to be used when a Purchase Order has a change in scope, amount or date. Amounts exceeding 10% of original award requires BCC approval. Some fields may not be applicable and may be left blank. Use your cursor to hover over a field for help.

Date 01/16/2025 Department Fire Rescue Change Order # 1

Additional Days Only Is Board Action Required? Yes No N/A

Bid/Contract/Quote Number & Project Title:
22SS-136 - Annual Maintenance of Extrication Equipment

Vendor (Name & Address):
Dean Shepherd #105055
DBA: Southern Rescue Tools LLC
Largo, FL 33770

Project Code: _____

PO Number: 2500216

Contract Amount: \$47500.00

GL Account Number (ORG/OBJECT):
EF300522-546301

Have you sent Procurement the revised P&P Bond? Yes No N/A

Contingency Amount Using (if requesting use):

Is the change order amount from Contingency? Yes No

JUSTIFICATION & DESCRIPTION OF CHANGE

Need additional funds to cover estimated cost overage (see attached estimate from Vendor). Cost overage is due to additional extrication equipment purchased this past year & the process change to send the Vendor out to station quadrants so that engines can stay in their zones while their equipment is being tested, which added 1 day to the maintenance schedule in order to cover all fire station quadrant locations. The new process also requires the Vendor to move their testing equipment each day.

* BACKUP DOCUMENTATION MUST BE ATTACHED CLARIFYING CHANGE*

Original Ordered Amount: _____	\$47,500.00
Current Ordered Amount (Not the balance): _____	\$47,500.00
The PO will be increased/decreased by this change order in the amount of: _____ (Do not put contingency amount) Increase <input checked="" type="checkbox"/> Decrease <input type="checkbox"/>	\$7,500.00
The new PO amount including this change order will be: (PO amount will not change if it comes from contingency)(auto calculated) _____	\$55,000.00
Contract time will be increased/decreased by _____ DAYS	1
Prior Substantial Completion Date _____	Revised Substantial Completion Date _____
Prior Final Completion Date _____	Revised Final Completion Date _____

Approval: [Signature] 1-21-25
Director/Designee Date

BCC Approval (when applicable):
Chairman, BCC Date

Project Mgr. _____ Date

Attest: Clerk of Court _____ Date

Administration (If Applicable) _____ Date
Procurement: Bekky Jayne 1-21-25
Date

County Administrator _____ Date