



**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.

Please send completed and signed form to Procurement@marionfl.org

Date 11/20/2024 Department Solid Waste Change Order # 3

Additional Days Only Is Board Action Required? Yes No

Bid/Contract/Quote Number & Project Title:
18P-017

Contractor/Vendor (Name & Address):

Stantec Consulting Services Inc
13980 Collections Center Dr
Chicago, IL 60693

PO Number: 2401661

Contract Amount: _____

GL Account Number (ORG/OBJECT):
ZA423534-531109

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

Project Account Number (If applicable): _____

Is the change order amount from Contingency? Yes No

Requesting Amount of Contingency: _____

JUSTIFICATION & DESCRIPTION OF CHANGE

Request to add \$19,690.00 to purchase order due to a change in scope of project.

* BACKUP DOCUMENTATION MUST BE ATTACHED CLARIFYING CHANGE*

Original Ordered Amount:	\$42,500.00
Current Ordered Amount (Not the balance):	\$49,995.00
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"/> \$19,690.00
The new PO amount including this change order will be: (PO amount will not change if it comes from contingency)(auto calculated)	\$69,685.00
Contract time will be Increased/decreased by _____	DAYS _____
Prior Substantial Completion Date <input type="text"/>	Revised Substantial Completion Date <input type="text"/>
Prior Final Completion Date <input type="text"/>	Revised Final Completion Date <input type="text"/>

Approval

Director/Designee Date

BCC Approval (when applicable):

Chairman, BCC Date

Project Mgr. _____ Date

Attest: Clerk of Court _____ Date

Administration (NEW amount is between \$25k - \$50k) _____ Date

County Administrator _____ Date

Procurement: _____ Date