CHANGE ORDER FORM Additional Days Only Date 03/23/2021 Check One Change in Scope **Unforeseen Condition*** Change Order # Project Title & Bid/Contract or Quote Number Vendor (Name & Address) 14ST-142 BCC Approved 11/17/20 Sunstate Meter & Supply Inc Project Number UTC000117 14001 West Newberry Rd Newberry, FL 32669 PO Number: 2100486 **Budget Account Code** Contract Amount (include 10% contingency) ZF448536-563102 Is the change order amount from Contingency? Yes No 🔀 **DESCRIPTION OF CHANGE & CHANGE ORDER AMOUNT** Purchase of additional water meters for AMR program \$100,000. \$350,000. Net change by previous authorized Change Orders..... The PO amount prior to this Change Order was..... \$350,000. The PO will be increased/decreased by this change order in the amount of...... \$100,000. (PO amount will not change if it comes from contingency). * Finance MUST approve increase prior to submitting form. The new PO amount including this change order will be..... \$450,000 (PO amount will not change if it comes from contingency). Contract time will be Increased/decreased by.......DAYS Prior Substantial Completion Date N/A Revised Substantial Completion Date N/A Prior Final Completion Date N/A **Revised Final Completion Date** N/A **Approval:** BCC Approval (when applicable) Department Head Chairman, BCC Date Asst. Co. Administrator: (If Applicable) Date Attest: Clerk of Court Date

Approval:

Department Head

Date

Chairman, BCC

Date

Asst. Co. Administrator: (If Applicable)

Date

Administration Approval (when applicable)

Finance

Date

County Administrator

County Administrator

Date

*BACKUP DOCUMENTATION MUST BE ATTACHED CLARIFYING CHANGE Rev 04/15