

CHANGE ORDER

CONTRACT:	EWRF Aeration	Sys and Headworks	Expansion	CHANGE	ORDER NO:	1
CONTRACTOR:	Poole & Kent C	ompany of Florida	200.71	BID NO:		ITB# 2987-14
	1781 N.W. Nor	th River Drive		PROJECT	NO:	PO# 040834
· · · · · · · · · · · · · · · · · · ·	Miami, Florida	33125		CONTRAC	T DATE:	September 23, 2014
TIME CHANG)E	EXTRA WORK		CREDIT		OTHER
The CONTRACTC aforesaid Contract	OR is hereby auth in accordance w	orized and directed to ith all requirements ap	make the fo	llowing chan eto.	ges and mod	ifications to the
DESCRIPTION C	OF CHANGE:				COST IMPACT	DAYS
 Line Item – C Line Item – C 					(\$40,772.40 (\$129,043.5	
The original Contract Sum (TOTAL BID PRICE) was						
Net change by pre	Orders		\$_	0.00		
	·					9,830,000.00
The Contract Sun	(increase	decrease by thied, decreased bechanged)	is Change Oi	rder	\$_	169,815.91
The new Contract		his Change Order will	be		Te 10 . \$	9,660,184.09
	inal Completion	rior to this Change Ord Milestone for the entire				er, will be extended by
The Final Comple	etion Milestone a	s of this Change Orde	r is therefore	540 calen	dar dave	

The Contractor waives any and all claims to additional time extension and/or additional monetary compensation resulting from these changes and all cost associated with the change order as herein addressed.

Excepting those terms and provisions conflicting with this Change Order which are hereby changed to conform hereto, the aforesaid Contract as amended by all previous change orders hereto is otherwise reaffirmed in its entirety.

IN WITNESS WHEREOF, this Change Order No. 1 to <u>EWRF Aeration System and Headworks Expansion</u> has been executed by the parties hereto or their duly authorized representatives.

ATTEST: Lori Stelzer, City Clerk	
BY:	BY:
	Date of Approval
ATTEST:	CONTRACTOR: 11 Senhul
Witness	Authorized Signature (SEAL)
	TITLE: Project Manager
	DATE: 10 02 17
(ACKNOWLEDGEMENT OF CO	NTRACTOR, IF A CORPORATION)
STATE OF Florida ss	
COUNTY OF MICIMI - Dade	
described in and who executed the foregoing instrument a corporal execution of such instrument as such an officer aforesaid, corporation, pursuant to the powers conferred upon said corporation.	ation, and who severally and duly acknowledged the for and on behalf of and as the act and deed of said
WITNESS my hand and official seal the date afor	esaid. ture of Notary Public – State of Florida)
Constant	Type, or Stamp Commissioned Name of Notary Public)
Personally knownor produced identification	•
Type of identification produced	SARAI PEREZ FINOMY COMMISSIBLE F 247428 EXPIRES: March 10, 2019 Bonded Thru Notary Public Underwriter