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|--|------------------------|-----------------|
| LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT CONTRACT CHANGE ORDER | DATE: | October 8, 2019 |
| | Contract Modification: | 1 |
| | CONTRACT #: | #55-2016 |
| PROJECT: North Limestone Sustainability Grant | | |
| TO: North Limestone Community Development Corp. (NoLi CDC) | | |

| | |
|---|-------------|
| Original Contract Amount | \$91,298.92 |
| Cumulative Amount of Previous Contract Modifications | \$0.00 |
| Percent Change of Previous Contract Modifications | 0% |
| Existing Contract Amount | \$91,298.92 |
| Net (increase/decrease) in Contract Amount - (From following pages) | -\$4,028.00 |
| Percent Change of This Contract Modification | -4% |
| Original Contract Amount | \$91,298.92 |
| Cumulative Amount of all Contract Modifications | -\$4,028.00 |
| Percent Change of all Contract Modifications | -4% |
| New Contract Amount Including this Change Order | \$87,270.92 |

| | | |
|---|----------------|------------------------------|
| Recommended by <u><i>Jerry M. Carey</i></u> | (Proj. Engr.) | Date <u><i>10/24/19</i></u> |
| Accepted by _____ | (Consultant) | Date: _____ |
| Accepted by <u><i>KH KRISTOFER NONN</i></u> | (Contractor) | Date: <u><i>10/15/19</i></u> |
| Approved by <u><i>[Signature]</i></u> | (Director) | Date: <u><i>10/30/19</i></u> |
| Approved by _____ | (Commissioner) | Date: _____ |
| Approved by _____ | (Mayor or CAO) | Date: _____ |

**LEXINGTON-FAYETTE URBAN COUNTY GOVERNMENT
CONTRACT MODIFICATION**

DATE: October 8, 2019

Contract Mod #: 1

CONTRACT #: #55-2016

Project: NoLi CDC

TO:

You are hereby requested to comply with the following changes from the contract plans and specifications;

| Item No. | ADD / DEL | Description of changes | Units | Quantity | Unit Price | Decrease in contract price | Increase in contract price |
|-----------------------|-----------|------------------------|-------|----------|---------------|----------------------------|----------------------------|
| 1 | DEL | | LS | 1 | \$ (4,028.00) | \$ (4,028.00) | \$ - |
| 1 | | | | | | \$ - | \$ - |
| 2 | | | | | | \$ - | \$ - |
| 3 | | | | | | \$ - | \$ - |
| 4 | | | | | | \$ - | \$ - |
| 5 | | | | | | \$ - | \$ - |
| 6 | | | | | | \$ - | \$ - |
| 7 | | | | | | \$ - | \$ - |
| 8 | | | | | | \$ - | \$ - |
| 9 | | | | | | \$ - | \$ - |
| 10 | | | | | | \$ - | \$ - |
| 11 | | | | | | \$ - | \$ - |
| 12 | | | | | | \$ - | \$ - |
| 13 | | | | | | \$ - | \$ - |
| Total decrease | | | | | | \$ (4,028.00) | |
| Total increase | | | | | | | \$ - |

Net (increase) in contract price

\$ 4,028.00

JUSTIFICATION FOR CHANGE

| | |
|---------------|----------|
| PROJECT: | NoLi CDC |
| CONTRACT NO. | #55-2016 |
| CHANGE ORDER: | 1 |

- 1. Necessity for change:

- 2. Is proposed change an alternate bid? ___Yes XNo
- 3. Will proposed change alter the physical size of the project? ___Yes XNo
If "Yes", explain.

- 4. Effect of this change on other prime contractors: N/A

- 5. Has consent of surety been obtained? ___Yes XNot Necessary
- 6. Will this change affect expiration or extent of insurance coverage? ___Yes XNo
If "Yes", will the policies be extended? ___Yes ___No
- 7. Effect on operation and maintenance costs: N/A

- 8. Effect on contract completion date: N/A

Mayor

Date