

**LEXINGTON-FAYETTE URBAN COUNTY  
GOVERNMENT CONTRACT CHANGE ORDER**  
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Date:	April 11, 2018
Project:	Evoqua Sole Source Agreement for Scrubber Maintenance @ West Hickman and Town Branch
Location:	West Hickman

To (Contactor):  
Evoqua Water Technologies, LLC  
2650 Tallevast Road  
Sarasota, FL 34243

Contract No.	Res # 422-2017
Original Contract Amt.	\$136,115.00
Cumulative Amount of Previous Change Orders	\$0.00
Percent Change - Previous Change Orders	0.00%
Total Contract Amount Prior to this Change Order	\$136,115.00
Change Order No.	1

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

**Current Change Order**

Item No.	Description of changes-quantities, unit prices, change in completion date, etc.	Decrease in contract price	Increase in contract price	
1	Purchase of new Chemical Pump for Solids Building Odor Scrubber.		\$10,867.00	
	Total decrease	\$0.00		
	Total increase		\$10,867.00	
	Net Amount of this Change Order	\$10,867.00		
	New Contract Amount Including this Change Order	\$146,982.00		
	Percent Change - This Change Order			7.98%
	Percent Change - All Change Orders			7.98%

The time provided for the completion in the contract and all provisions of the contract will apply hereto.

Recommended by Tilley Ruck (Proj. Engr.) Date 4/11/2018  
 Accepted by \_\_\_\_\_ (Contractor) Date \_\_\_\_\_  
 Approved by \_\_\_\_\_ (Director) Date \_\_\_\_\_  
 Approved by \_\_\_\_\_ (Commissioner) Date \_\_\_\_\_  
 Approved by \_\_\_\_\_ (Mayor or CAO) Date \_\_\_\_\_

**JUSTIFICATION FOR CHANGE**

PROJECT: Evoqua Sole Source Agreement for Scrubber Maintenance @ West Hickman and Town Branch

CONTRACT NO. 422-2017

CHANGE ORDER: 1

- 1. Necessity for change: Chemical pump not working needs to be replaced.
- 2. Is proposed change an alternate bid? \_\_\_ Yes  X  No
- 3. Will proposed change alter the physical size of the project? \_\_\_ Yes  X  No  
If "Yes", explain.
- 4. Effect of this change on other prime contractors: N/A
- 5. Has consent of surety been obtained? \_\_\_ Yes  X  Not Necessary
- 6. Will this change affect expiration or extent of insurance coverage? \_\_\_ Yes  X  No  
If "Yes", will the policies be extended? \_\_\_ Yes \_\_\_ No
- 7. Effect on operation and maintenance costs: N/A
- 8. Effect on contract completion date: None

\_\_\_\_\_ Mayor

\_\_\_\_\_ Date