



Document G701™ - 2001

05/31/16 mtg
Agenda Item #8

Change Order

PROJECT: (Name and address)	CHANGE ORDER NUMBER: 2	OWNER <input type="checkbox"/>
Alterations to Siouxland Dist Health 1014 Nebraska Sioux City, Iowa	DATE: 5/12/2016	ARCHITECT <input type="checkbox"/>
TO CONTRACTOR: (Name and address)	ARCHITECT'S PROJECT NUMBER: 1431	CONTRACTOR <input type="checkbox"/>
Sioux Contractors 412 Pavonia Sioux City, Ia 51101	CONTRACT DATE: 3/15/2016	FIELD <input type="checkbox"/>
	CONTRACT FOR: General Construction	OTHER <input type="checkbox"/>

The Contract is changed as follows:

(Include, where applicable, any undisputed amount attributable to previously executed Construction Change Directives.)

1. Relocate ticket numbering system complete with conduit and wiring to front desk.
2. Furnish and install 4 pushbuttons at front counter for numbering system.
3. Add 1 duplex convenience outlet in Reception area per Owner's directive.
4. Add 2 data outlets in Reception area per Owner's directive.

TOTAL ADD \$1,500.00

The original (Contract Sum) (Guaranteed Maximum Price) was	\$ 477,900.00
The net change by previously authorized Change Orders	\$ 800.00
The (Contract Sum) (Guaranteed Maximum Price) prior to this Change Order was	\$ 478,700.00
The (Contract Sum) (Guaranteed Maximum Price) will be (increased) (decreased) (unchanged) by this Change Order in the amount of	\$ 1,500.00
The new (Contract Sum) (Guaranteed Maximum Price), including this Change Order, will be	\$ 480,200.00
The Contract Time will be (increased) (decreased) (unchanged) by	(0) days.
The date of Substantial Completion as of the date of this Change Order, therefore, is	June 24, 2016

NOTE: This Change Order does not include changes in the Contract Sum, Contract Time or Guaranteed Maximum Price that have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.

<u>RML Architects, LLC</u> ARCHITECT (Firm name)	<u>Sioux Contractors</u> CONTRACTOR (Firm name)	<u>Woodbury County Board of Supv.</u> OWNER (Firm name)
<u>Sioux City, IA</u> ADDRESS	<u>Sioux City, IA</u> ADDRESS	<u>[Signature]</u> Signature
<u>[Signature]</u> BY (Signature)	<u>[Signature]</u> BY (Signature)	<u>Siouxland District Health</u> Owner
<u>MIKE NESWICK</u> (Typed name)	<u>ROBERT J. AGNES</u> (Typed name)	<u>[Signature]</u> Signature
<u>5/16/16</u> DATE	<u>5/16/16</u> DATE	<u>06/01/16</u> DATE

CAUTION: You should sign an original AIA Contract Document, on which this text appears in RED. An original assures that changes will not be obscured.