

## Lee County Professional Service/Service Provider Agreement Change Order/Supplemental Task Authorization

Date Dec 27, 2	2017				Print Form		
X	Change Order	Supplemental T	ask Authorization	Number: 2			
A Change Order or Supplemental Task Authorization requires approval by the Department Director for expenditures under \$50,000 or approval by the County Manager for expenditures between \$50,000.01 and \$100,000 or approval by the Board of County Commissioners for expenditures over \$100,000							
Primary Contact: Henry Elmore							
Contract Name:	Nuisance Vegetation and Debris Removal from Creeks and Waterways in Lee County						
Project Name:							
Consultant:	TDI Disaster Recover	ry LLC		Project #:	: N/A		
Solicitation #:	RFQ140024	Contract #:	6765	Account #:	N/A		
Lee County Project Manager: N/A Request Date: Dec 27, 201							
Fiscal Staff:	Bruce Westberry						
Upon the completion and execution of this Change Order or Supplemental task Authorization by both parties the Consultant / Provider is authorized to and shall proceed with the following exhibits:  • CO-STA Exhibit A - SCOPE OF PROFESSIONAL SERVICE  • CO-STA Exhibit B - COMPENSATION & METHOD OF PAYMENT  • CO-STA Exhibit C - TIME & SCHEDULE OF PERFORMANCE  • CO-STA Exhibit D - CONSULTANTS/PROVIDERS ASSOCIATED SUB-CONSULTANT(S)/SUB-CONTRACTORS  • CO-STA Exhibit E - PROJECT GUIDELINES AND CRITERIA							
It is understood and agreed that the acceptance of this modification by the CONSULTANT/PROVIDER constitutes an accord and satisfaction.							
Name of Consultant/Provider (Print Name)  12/28/2017  Date Accepted							
Name of Consultant/Provider (Print Name)  Date Accepted					oted		
infoctsidisaster.com 407-891-8025					25		
Contact E-mail Address Contact Phone Number							



Date Dec 27, 2017	Print Form
Choose one of the following:	Page A 1 of 1
☐ Change Order Agreement #: 2	☐ Supplemental Task Authorization #:
Scope of Professional Services for:	
Nuisance Vegetation and Debris Removal from	n Creeks and Waterways in Lee County
Section 1.00 Changes to Professional Services	S
Provider, referred to hereinbefore is hereby sup	in Exhibit 'A' of the Professional Services Agreement, or Service oplemented, changed or authorized, so that the Consultant or Service ng professional services, tasks, or work as a supplement to, change to ly agreed to and authorized.
No changes in scope, this is for extension of ter	rm 3/17/18 - 7/17/18.
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Lee County Board of County Commissioners - Procurement Management

1825 Hendry Street - Fort Myers, FL 33901 PO Box 398 - Fort Myers, FL 33902-0398 **Phone**: (239) 533-5450

Email: procurement@leegov.com



Date Dec 27,	2017		Print Form					
Choose one of the following:								
Time & Schedu	Time & Schedule of Performance for:							
Nuisance Vege	tation and Debris Removal from Creeks and Wa	iterways in Lee County						
Section 1.00 Ch	anges for this Change Order or Supplemental	Task Authorization Ag	reement					
tasks or work se	nedule of completion for the various phases or to t forth in this Change Order of Supplemental Ta f Professional Services' attached hereto is as foll	ask Authorization Agree	e and perform the services, ment, Exhibit 'CO/STA-A',					
Task/ Phase Number as Indicated in Exhibit A	Name/Title of Phase/Task	Number of Calendar Days for Completion of Each Phase/Task	Cumulative Number of Calendar Days for Completion from Date of Notice to Proceed for this CO/STA					
Medicard-Do-Date Service Management of the Control	Renewal of Annual Contract	-						
	Original Term: 3/17/14 - 3/16/17							
	Renewal Number 1 Term: 3/17/17 - 3/16/18							
	Extension Number 1 Term: 3/17/18 - 7/17/18							

Lee County Board of County Commissioners - Procurement Management

1825 Hendry Street - Fort Myers, FL 33901 PO Box 398 - Fort Myers, FL 33902-0398 **Phone**: (239) 533-5450



## CO-STA Exhibit C Time & Schedule of Performance

Change Order	Agreement #:	2	Supplemental	Task Authoriza	ation #:
Time & Schedule	of Performance for:				
Nuisance Vegetat	tion and Debris Remo	val from Creeks an	d Waterways	in Lee County	
Section 2.00 Sum Schedule of Perfo	mary of the Impact of ormance	f Change(s) in Prof	fessional Serv	ices on the Ove	rall Project Time and
Supplemental Tas: Consultant, or Ser	n consideration of the o k Authorization Agree vice Provider, has pre nt, or Service Provider	ement, Exhibit 'CO, viously agreed to f	/STA-A' the ting or all of the wo	ne and schedule ork to be done u	this Change Order or e the County and the under this Professional
Task/ Phase Number as Indicated in Exhibit A & Exhibit CO/STA-A	Name/Title	e of Phase/Task	Days fo	per of Calendar or Completion of h Phase/Task	Cumulative Number of Calendar Days for Completion from Date of Notice to Proceed

Rev. 9/2015