



Kevin Ruane
District One

October 14, 2021

(239) 533-8871

Cecil L. Pendergrass
District Two

Ray Sandelli
District Three

Brian Hamman
District Four

Frank Mann
District Five

Roger Desjarlais
County Manager

Richard Wesch
County Attorney

Donna Marie Collins
County Hearing Examiner

Mr. Craig Kruempel
GHD Services, Inc.
2055 Niagara Falls Blvd., Suite 3
Niagara Falls, NY 14304

Dear Mr. Kruempel:

Enclosed is your executed copy of Change Order No. 2 for the contract CN180454DLK Environmental Consulting Contract (Permitting, Mitigation and Monitoring) C-8337.

The new expiration date is **3/4/23**.

If you should have any questions, please give me a call.

Sincerely,

Kimberly Urban

Kimberly Urban
Contracts Analyst
Procurement Management Division

c: FinanceOnBase@leeclerk.org
Project File



Lee County Professional Service Change Order/Supplemental Task Authorization

Date Jul 28, 2021

[Print Form](#)

Change Order Agreement #: CO2 Supplemental Task Authorization #: _____

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: Craig Kruempel

Contract Name: Environmental Consulting Contract

Project Name: _____

CONSULTANT: GHD Services, Inc. Project #: _____

Solicitation #: CN180454DLK Contract #: 8337

Lee County Project Manager: _____ Request Date: _____

Fiscal Staff: _____ Account #: _____

Upon the completion and execution of this Change Order or Supplemental task Authorization by both parties the CONSULTANT is authorized to and shall proceed with the following exhibits as applicable:

- 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 ASSOCIATED SUB-CONSULTANTS/SUB-CONTRACTORS

It is understood and agreed that the acceptance of this modification by the CONSULTANT constitutes an accord and satisfaction.

| | |
|---|---|
| <u>Brian Moore, PE Vice President</u> Consultant Signature (Print & Sign Name) | <u><i>Brian Moore</i></u> <u>7/29/21</u> Date Signed |
|---|---|

| | |
|--|---|
| <u>brian.moore@ghd.com</u> Contact E-mail Address | <u>813.971.3882</u> Contact Phone Number |
|--|---|

Lee County Board of County Commissioners - Procurement Management
 2115 Second Street - 1st Floor - Fort Myers, FL 33901
 PO Box 398 - Fort Myers, FL 33902-0398
Phone: (239) 533-8881



[Print Form](#)

Change Order Agreement #: CO2 Supplemental Task Authorization #: _____

Scope of Professional Services for:

Environmental Consulting Contract

Section 1.00 Changes to Professional Services

The 'Scope of Professional Services' as set forth in Exhibit 'A' of the Professional Services Agreement referred to hereinbefore is hereby supplemented, changed or authorized, so that the CONSULTANT shall provide and perform the following professional services, tasks, or work as a supplement to, change to, the scope of services previously agreed to and authorized.

No changes in scope, this is for renewal of term 3/5/2022 to 3/4/2023.

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2115 Second Street - 1st Floor - Fort Myers, FL 33901
PO Box 398 - Fort Myers, FL 33902-0398
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Print Form

Change Order Agreement #: CO2 Supplemental Task Authorization #: _____

Time & Schedule of Performance for:

Environmental Consulting Contract

Section 1.00 Changes for this Change Order or Supplemental Task Authorization Agreement

The time and schedule of completion for the various phases or tasks required to provide and perform the services, tasks or work set forth in this Change Order of Supplemental Task Authorization Agreement, Exhibit 'CO/STA-A', entitled 'Scope of Professional Services' attached hereto is as follows:

| Task Number as Indicated in Exhibit A | Name/Title of Task | Previously Approved Number of Days per Task (CO Only) | Increase in Number of Calendar Days per Task (CO Only) | Cumulative Number of Calendar Days for Completion from Date of Notice to Proceed per Task (CO & STA) |
|---------------------------------------|-------------------------------------|---|--|--|
| | Renewal of Annual Contract | | | |
| | Original Term: 3/5/19 - 3/4/21 | | | |
| | Renewal No. 1 Term: 3/5/21 - 3/4/22 | | | |
| | Renewal No. 2 Term: 3/5/22 - 3/4/23 | | | |
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Total Number of Calendar Days for Completion of Project from Notice to Proceed: _____