

Number: _____

A Change Order requires approval by the Department Director for expenditures under \$50,000 or approval by the County Manager for expenditures from \$50,000 to \$99,999.99 or approval by the Board of County Commissioners for expenditures of \$100,000 and up.

Primary Contact: _____ E-mail Address: _____

Contract Name: _____

Project Name: _____

Contractor: _____ Project #: _____

Solicitation #: _____ Contract #: _____

Lee County Project Manager: _____ Date Quote Received: _____

Fiscal Staff: _____ Account #: _____

Upon the completion and execution of this Change Order to the Contract, the Contractor is authorized to and shall proceed to make the following changes in the Contract Documents as follows:

Purpose of

Change Order:

Description:

Attachments:

(List documents
supporting change)

Change in Contract Price	Dollar Amount	Change in Contract Time	Calendar Days
Original Contract Price		Original Contract Time	
Previous Change Order Total		Net Change from Previous Change Orders	
Contract Price Prior to this Change Order		Contract Time Prior to this Change Order	
Net Increase (Decrease) of this Change Order		Net Increase (Decrease) of this Change Order	
Contract Price with All Approved Change Orders		Contract Time with All Approved Change Orders	

It is understood and agreed that the acceptance of this modification by the CONTRACTOR constitutes an accord and satisfaction, and represents payment in full (both time and money) for all costs arising out of, or incidental to, the above mentioned change.

Each individual signing this Agreement directly and expressly warrants that he/she has been given and has received and accepted authority to sign and execute the Agreement on behalf of the party for whom it is indicated he/she has signed, and further has been expressly given and received and accepted authority to enter into a binding agreement on behalf of such party with respect to the matters contained herein and as stated herein.

Contractor Signature Print Name Date Signed

Director Signature Print Name Date Signed

Procurement Signature Print Name Date Signed

County Manager or Designee Signature Print Name Date Signed

AFFIDAVIT OF COMPLIANCE WITH SECTION 287.138 and 787.06, FLORIDA STATUTES

Before me, the undersigned authority, personally appeared **(Name of affiant)**

_____, who, after being first duly sworn,
deposes and says of his or her personal knowledge the following:

1. Affiant is the **(Title)**_____ of **(Business Name)**

which does business in the State of Florida, hereinafter called the “Vendor.”

2. Vendor, pursuant to Section 287.138, Florida Statutes, certifies that (1) Vendor is not owned by a government of a foreign country of concern; (2) a government of a foreign country of concern does not have a “controlling interest” in Vendor, as defined by Section 287.138(1)(a), Florida Statutes; and (3) Vendor is not organized under the law of nor has its principal place of business in a foreign country of concern. For the purposes of this affidavit, foreign country of concern means the People’s Republic of China, the Russian Federation, the Islamic Republic of Iran, the Democratic People’s Republic of Korea, the Republic of Cuba, the Venezuelan regime of Nicolás Maduro, or the Syrian Arab Republic, including any agency of or any other entity of significant control of such foreign country of concern, as defined in Section 287.138(1)(c), Florida Statutes, as amended from time to time.
3. Vendor, pursuant to Section 787.06, Florida Statutes, certifies that Vendor does not use coercion for labor or services as defined in Section 787.06, Florida Statutes, as amended from time to time.
4. This Affidavit is executed by the Vendor in accordance with Section 287.138, Florida Statutes, for the purposes of preventing the County from entering contracts with foreign entities of concern which would provide Vendor access to an individual’s personal identifying information.
5. This Affidavit is executed by the Vendor in accordance with Section 787.06, Florida Statutes.

(Signature)

(Date)

STATE OF _____

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me, by means of ☐ physical presence or ☐ online
notarization, this ____ day of _____ 20____, by _____
(Print or Type Name)

who has produced _____ as identification.
(Type of Identification)

Notary Public Signature

Printed Name of Notary Public

Notary Commission Number/Expiration