



John E. Manning  
*District One*

June 8, 2020

(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. Ashok Aitharaju  
Wood Environment & Infrastructure Solutions, Inc.  
1105 Lakewood Parkway, Suite 300  
Alpharetta, GA 30009

Dear Mr. Aitharaju:

Enclosed is your executed copy of Change Order No.1 for the contract CN180325DLK Environmental Contract (Water Quality and Hydrological Impacts, Site Assessments and Site Remediation).

The new expiration date is 10/15/2021.

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](mailto:FinanceOnBase@leeclerk.org)  
Project File



# Lee County Professional Service Change Order/Supplemental Task Authorization

Date Apr 30, 2020

**Print Form**

Change Order Agreement #: 1       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: Ashok Aitharaju

Contract Name: Environmental Contract (Water Quality and Hydrological Impacts, Site Assessments)

Project Name: \_\_\_\_\_

CONSULTANT: Wood Environment & Infrastructure Solutions, Inc.      Project #: \_\_\_\_\_

Solicitation #: CN180325DLK      Contract #: 8158

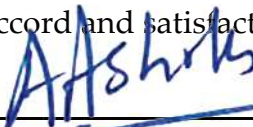
Lee County Project Manager: \_\_\_\_\_      Request Date: Apr 30, 2020

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.

  
\_\_\_\_\_  
Ashok Aitharaju  
Consultant Signature (Print & Sign Name)

\_\_\_\_\_  
05/01/2020  
Date Signed

\_\_\_\_\_  
[ashok.aitharaju@woodplc.com](mailto:ashok.aitharaju@woodplc.com)  
Contact E-mail Address

\_\_\_\_\_  
954-695-6796  
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 #: 1  Supplemental Task Authorization #: \_\_\_\_\_

**Scope of Professional Services for:**

Environmental Contract (Water Quality and Hydrological Impacts, Site Assessments)

**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 10/16/20 - 10/15/21.

**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 #:           1                 Supplemental Task Authorization #: \_\_\_\_\_

**Time & Schedule of Performance for:**

Environmental Contract (Water Quality and Hydrological Impacts, Site Assessments)

**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: 10/16/18 - 10/15/20			
	Renewal Term 1: 10/16/20 - 10/15/21			

Total Number of Calendar Days for Completion of Project from Notice to Proceed: \_\_\_\_\_