



**BOARD OF COUNTY COMMISSIONERS**

John E. Manning  
*District One*

May 8, 2019

(239) 533-8871

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*District Two*

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*District Four*

Frank Mann  
*District Five*

Roger Desjarlais  
*County Manager*

Richard Wm. Wesch  
*County Attorney*

Donna Marie Collins  
*Hearing Examiner*

Ms. Elizabeth Gaines  
E. F. Gaines Surveying Services, Inc.  
5235 Ramsey Way, 10  
Fort Myers, FL 33907

SUBJECT: CN180051ANB C-8062

ENCLOSURE: CHANGE ORDER NO. 1

Dear Ms. Gaines:

Enclosed is your executed copy of Change Order No. 1.

The new expiration date is July 18, 2020.

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/Service Provider Agreement  
Change Order/Supplemental Task Authorization

Date Mar 4, 2019

**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: Elizabeth Gaines

Contract Name: Surveying & Mapping Services

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

Consultant: E.F. Gaines Surveying Services, Inc.      Project #: \_\_\_\_\_

Solicitation #: CN180051ANB      Contract #: 8062      Account #: \_\_\_\_\_

Lee County Project Manager: \_\_\_\_\_      Request Date: Mar 4, 2019

Fiscal Staff: \_\_\_\_\_

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.

Authorized Signature (Print Name) Elizabeth F. Gaines

March 5, 2019

Date Accepted

Liz@EFGaines.com

Contact E-mail Address

239-418-0126

Contact Phone Number

**Lee County Board of County Commissioners - Procurement Management**

1500 Monroe Street - 4th Floor - Fort Myers, FL 33901

PO Box 398 - Fort Myers, FL 33902-0398

Phone: (239) 533-8881



Date Mar 4, 2019

**Print Form**

Page A 1 of 1

**Choose one of the following:**

Change Order Agreement #: 1                       Supplemental Task Authorization #: \_\_\_\_\_

**Scope of Professional Services for:**

Surveying & Mapping Services

**Section 1.00 Changes to Professional Services**

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

No changes in scope, this is for renewal of term 7/19/19 - 7/18/20.



