



Kevin Ruane
District One

April 6, 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. Scott Urquhart
T2 UES, Inc., dba T2 Utility Engineers
7217 E 87th St
Indianapolis, IN 46256

Dear Mr. Urquhart:

Enclosed is your executed copy of Change Order No. 3 for the contract CN180051ANB Surveying & Mapping Services C-8597.

The new expiration date is 7/18/22.

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 Jan 29, 2021

Print Form

Change Order Agreement #: CO3 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: Scott Urquhart

Contract Name: Surveying & Mapping Services

Project Name: _____

Project #: CONSULTANT: T2 UES, Inc. dba T2 Utility Engineers (Formerly Cardno Contract)

Solicitation #: CN180051ANB Contract #: 8597


Lee County Project Manager: _____ Request Date: 1/29/2021

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.

Scott Urquhart 
Consultant Signature (Print & Sign Name)

2/16/21
Date Signed

Scott.Urquhart@T2ue.com
Contact E-mail Address

293.829.7018
Contact Phone Number



Print Form

Change Order Agreement #: CO3 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 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 7/19/21 to 7/18/22.

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



Lee County Procurement Management Signatory Authorization Affidavit

Date: 02/04/2021 Company Name: T2 UES, Inc, dba T2 Utility Engineers ("Company")

AUTHORIZATION: The Affiant warrants the truth and accuracy of this Affidavit to statements hereinafter made. The Affiant acknowledges that it is of critical importance that the individuals signing legally binding documents on the Company's behalf possess the authority to bind the Company so that both parties are bound by the terms of said documents. The Affiant further acknowledges that the Lee County Board of County Commissioners ("County") reserves the right to request supporting documentation regarding signatory authorization, at any time, and a document will be rejected, if it does not comply exactly with the signature authorization requirements.

INSTRUCTIONS: This Authorization Affidavit shall only be executed by the following:

- Corporation: President or CEO
- LLC: Managing Member, if manager-managed LLC or Member, if member-managed LLC
- Sole Proprietor: Owner
- An individual authorized to sign on the Company's behalf as evidenced by internal Company documentation delegating signing authority to that individual. Please attach internal Company documentation, if applicable.

All signatures on this Affidavit must be wet, non-electronic and non-digital original signatures. If you have more than four Authorized Signatories, please duplicate this page. A wet, non-electronic and non-digital original signature is required on each page. The following individuals are hereby authorized, as representatives of the Company identified above, to sign and execute legally binding documents on behalf of the Company.

Authorized Signatory Name	Title
Daryl Thie	Vice President - Southern US
Scott Urquhart	Branch Manager

By executing this Affidavit, I hereby authorize the individuals shown above to sign and execute legally binding documents on behalf of the Company. I further acknowledge that it shall be the sole responsibility of the Company to provide an updated Signatory Authorization Affidavit, upon any change in signatory authorization, to the County, Attention: Procurement Management Director, 1500 Monroe Street, 4th Floor, Fort Myers, FL 33901.

Craig Snyder President 02/04/2021
 (Signature of Affiant) (Title: President, CEO, Managing Member, Member, Owner) (Date)

Craig Snyder
(Printed Name of Affiant)

STATE OF Florida
COUNTY OF Hillsborough

The foregoing instrument was signed and acknowledged before me this 16th day of Feb

2021 who produced the following as identification Drivers license
(type of identification and number or personally known)

[Signature] Gregory J. Fischer
 Notary Public Signature 18801 N. Dale Mabry Hwy
 State of Florida Notary Public
March 31 2024
 Commission Number/Expiration

