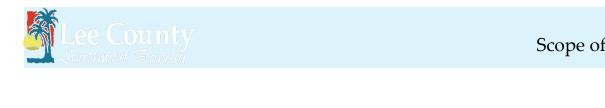
Southwest Florida	Lee County Professional Service Change Order/Supplemental Task Authorization			
Date	Print Form			
Change Order Agreement #:	Supplemental Task Authorization #:			
expenditures under \$50,000 or approval by the	Authorization requires approval by the Department Director for ne County Manager for expenditures between \$50,000.01 and \$100,000 County Commissioners for expenditures over \$100,000			
Primary Contact:				
Contract Name:				
Project Name:				
CONSULTANT:	Project #:			
Solicitation #:	Contract #:			
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 accept accord and satisfaction.	ance of this modification by the CONSULTANT constitutes an			
Consultant Signature (Print & Sign Na	ame) Date Signed			
Contact E-mail Address	Contact Phone Number			



Print Form

	Supplemental	Task Authorization #:
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Scope of Professional Services for:

Change Order Agreement #:

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.

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



CO-STA Exhibit B Compensation & Method of Payment

Print Form

Change Order Agreement #: ____

Supplemental Task Authorization #:

Compensation and Method of Payment for:

Section 1.00 Changes in Compensation

The compensation the CONSULTANT shall be entitled to receive for providing and performing the supplemented or changed services, tasks, or work as set forth and enumerated in the Scope of Services set forth in this CHANGE ORDER OR SUPPLEMENTAL TASK AUTHORIZATION AGREEMENT, Exhibit 'CO/STA-A', attached hereto shall be as follows:

NOTE: A Lump Sum (LS) or Not-to-Exceed (NTE) amount of compensation to be paid the CONSULTANT should be established and set forth below for each task or subtask described and authorized in Exhibit 'CO/STA-A'.

Task Number	Task Name	LS or NTE	Compensation in Agreement or STA	Change Or Adjustment(s) by all previous CO(s)	Adjustment(s)	Total Compensation per Task
	Projoc					

Project Total:

Total amount authorized by this CO or STA:

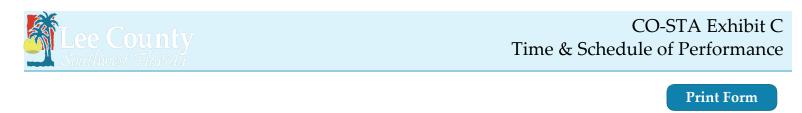
Lee County Board of County Commissioners - Procurement Management 2115 Second Street - 1st Floor - Fort Myers, FL 33901 PO Box 398 - Fort Myers, FL 33902-0398 Phone: (239) 533-8881

Lee County Southwest Florida			CO-STA Exhibit B Attachment
Change Order Agreement		Supplemental Task Authoriza	Print Form
CONSULTANT or Sub-Consu (A separate Attachment #1 should be 1. Project Position or Classification (Function to be Performed)	e included for each Sub-Consultant)	,	2. Hourly Rate to be Charged
Reimbursable Item	Cost	Reimbursable Item	Cost

Receipts or in-house logs are required for all non-personnel reimbursable expenses unless exempt (such as meals).

Administrative Services Fees - Applicable only when specifically authorized by the County, for administering the procurement of special additional services, equipment, reimbursables, etc. not covered under the costs and/or changes established in the Agreement

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



□ Change Order Agreement #: □ Supplemental Task Authorization #:
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Time & Schedule of Performance for:

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)

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

Rev. 02/2020

Page C1 of C1



Print Form

Change Order Agreement #: ______

□ Supplemental Task Authorization #:

CONSULTANT'S Associated Sub-Consultant(s) and Subcontractor(s) for:

CONSULTANT intends to engage the following sub-consultant(s) and/or sub-contractor(s) to assist the CONSULTANT in providing and performing the services, tasks, or work required under this Change Order, or Supplemental Task Authorization Agreement.

If none, enter the word 'none' in the space below.

Service/Work to be Provided/Performed	Name & Address of Individual or Firm	Disadvantaged, Minority or Women Business Enterprise
		Туре

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