

Print Form

Project Name:			
Construction Manager:			
Contract #:	Project	#:	RFQ #:
Transfer Requested By:			Date of Request:
Upon the completion and execut Manager will be authorized to a			rties to the Contract, the Construction ges in the Contract Documents:
Description: Various adjustmen	ts to constructio	n cost line item amounts.	
Purpose of Transfer: To adjust tl item amounts as priced by the C			e item amounts to match the actual line
Attachments:			
1) Contingency Transfer	r History		
2) Proposal Requests Nu	umbers		
Contingency in GMP Price:			
Guaranteed Maximum Price: Original Project Contingency Amount:			
Previous Contingency Trans Number to Numbe		rease (Decrease) of this ntingency Transfer	New Project Contingency Amount
It is understood and agreed that the acceptance of this modification by the CONSTRUCTION MANAGER constitutes an accord and satisfaction, and represents an agreement for payment in full for all costs arising out of, or incidental to, the above mentioned change.			
RECOMMENDED:		ACCEPTED:	APPROVED:
Consultant (If Applicable)	Date	Construction Manager	Department Director
Project Manager	Date	Construction Manager	Department Director
Lee County Board of County Commissioners2115 Second St Fort Myers, FL 33901PO Box 398 - Fort Myers, FL 33902-0398Rev. 8/2016Main Phone: (239) 533-2111			