



# CHANGE ORDER FORM FORT BEND COUNTY ENGINEERING

Distribution:

- FBC Engineering
- FBC Judge
- FBC Purchasing
- Contractor
- Consultant

**Address:** 301 Jackson Street Richmond, Texas  
77469

**Phone:** 281-633-7500

**Web site:** www.FortBendCountyTx.gov

PROJECT:

Mason Road Left Turn Lanes (17419x)

CONTRACTOR:

Wadecon, LLC  
1525 LAKEVILLE DR

The contract is changed as follows:

Balancing Change Order

CHANGE ORDER NUMBER .... 1

DATE ..... 08/14/2020

PROJECT NUMBER ..... 17419x

BID NUMBER ..... 20-057

CONTRACT DATE ..... 03/03/2020


FBC PURCHASE ORDER NO.. 187673

**Not valid until signed by Fort Bend County.**

The Original ( <b>Contract Sum</b> ) .....	\$ 309,219.00
The ( <b>Contract Sum</b> ) Prior to this Change Order was.....	\$ 309,219.00
The ( <b>Contract Sum</b> ) will be <input type="checkbox"/> increased or <input checked="" type="checkbox"/> decreased or <input type="checkbox"/> unchanged	
by this Change Order in the amount of .....	\$ -9,480.50
The new ( <b>Contract Sum</b> ) including this Change Order will be .....	\$ 299,738.50
The Contract Time will be <input type="checkbox"/> increased or <input type="checkbox"/> decreased or <input checked="" type="checkbox"/> unchanged by.....	
	0 Days
The Contract End Date as of this Change Order therefore is	
<input type="checkbox"/> changed or <input checked="" type="checkbox"/> unchanged to.....	06/15/2020

Authorized:

Fort Bend County Judge  
Honorable KP George  
301 Jackson St.,  
Richmond, Texas 77469

By:   
\_\_\_\_\_  
(Signature)

DATE: 10/27/2020  
\_\_\_\_\_



## CHANGE ORDER FORM

### FORT BEND COUNTY ENGINEERING

<b>Project Code</b>	17419x	<b>Report Run Date</b>	10/15/2020
<b>Project Name</b>	Mason Road Left Turn Lanes (17419x)	<b>Change Order Date</b>	08/14/2020
<b>Contract Number</b>	CN-1	<b>Original Contract Amount</b>	309,219.00
<b>Contractor</b>	Wadecon, LLC	<b>Current Contract Amount</b>	309,219.00
<b>Change Order Number</b>	1	<b>Net Change This Order</b>	-9,480.50
<b>Short Description</b>	Balancing Change Order	<b>Contract Amount After Change</b>	299,738.50

Container	Line No.	Item Description	Unit	Quantity	Unit Price in \$	Amount in \$
<b>Construction</b>	<b>Construction</b>					
	16	TRENCH EXCAVATION PROTECTION	LF	-12.0000	10.00	-120.00
	17	RC PIPE (CL III) (24 IN)	LF	-4.0000	200.00	-800.00
	21	CONC PVMT (CONT REINF)(FAST TRK)(13")	SY	-37.2500	150.00	-5,587.50
	28	REFL PAV MRK TY I (W) 8" (SLD) (100MIL)	LF	-1.0000	3.00	-3.00
	29	REFL PAV MRK TY I (Y) 12"(SLD) (090MIL)	LF	-392.0000	6.00	-2,352.00
	30	REFL PAV MRK TY I (W) 24" (SLD) (100MIL)	LF	-2.0000	10.00	-20.00
	31	PAVEMENT SEALER 4"	LF	-10.0000	1.00	-10.00
	32	PAVEMENT SEALER 8"	LF	-1.0000	1.00	-1.00
	33	PAVEMENT SEALER 12"	LF	-392.0000	1.00	-392.00
	34	PAVEMENT SEALER 24"	LF	-2.0000	1.00	-2.00
	38	PAV SURF PREP FOR MRK (4")	LF	-10.0000	1.00	-10.00
	39	PAV SURF PREP FOR MRK (8")	LF	-1.0000	1.00	-1.00
	40	PAV SURF PREP FOR MRK (24")	LF	-2.0000	1.00	-2.00
	49	BIODEG EROSN CONT LOGS (INSTL) (8")	LF	-6.0000	20.00	-120.00
	50	BIODEG EROSN CONT LOGS (REMOVE)	LF	-6.0000	10.00	-60.00
	<b>Container Total</b>					-9,480.50
	<b>Grand Total</b>					-9,480.50

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.  
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY  
CERTIFICATION OF FILING**

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
WadeCon, LLC  
Kingwood, TX United States

**Certificate Number:**  
2020-677314

**Date Filed:**  
10/12/2020

**2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.**  
Fort Bend County

**Date Acknowledged:**  
10/27/2020

**3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.**  
17419x  
Construction of Mason Road and SH 99 Improvements Phase 1— Turn Lanes Under SH 99 Change Order 1

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

**5 Check only if there is NO Interested Party.**

**6 UNSWORN DECLARATION**

My name is \_\_\_\_\_, and my date of birth is \_\_\_\_\_.

My address is \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_.  
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in \_\_\_\_\_ County, State of \_\_\_\_\_, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.  
(month) (year)

\_\_\_\_\_  
Signature of authorized agent of contracting business entity  
(Declarant)