



# 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:**

Cane Island Phase 2 (17308)

**CONTRACTOR:**

James Construction  
6130 FM 2218

CHANGE ORDER NUMBER .... 2  
 DATE ..... 10/02/2020  
 PROJECT NUMBER ..... 17308  
 BID NUMBER ..... 20-052  
 CONTRACT DATE ..... 02/11/2020  
 FBC PURCHASE ORDER NO.. 186684

The contract is changed as follows:


Change Order No. 2

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

The Original ( <b>Contract Sum</b> ) .....	\$ 4,664,105.32
The ( <b>Contract Sum</b> ) Prior to this Change Order was.....	\$ 4,680,672.81
The ( <b>Contract Sum</b> ) will be <input checked="" type="checkbox"/> increased or <input type="checkbox"/> decreased or <input type="checkbox"/> unchanged	
by this Change Order in the amount of .....	\$ 159,366.35
The new ( <b>Contract Sum</b> ) including this Change Order will be .....	\$ 4,840,039.16
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.....	01/05/2021

**Authorized:**

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

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

DATE: 12/8/2020  
\_\_\_\_\_



## CHANGE ORDER FORM

### FORT BEND COUNTY ENGINEERING

<b>Project Code</b>	17308	<b>Report Run Date</b>	11/24/2020
<b>Project Name</b>	Cane Island Phase 2 (17308)	<b>Change Order Date</b>	10/02/2020
<b>Contract Number</b>	CN-1	<b>Original Contract Amount</b>	4,664,105.32
<b>Contractor</b>	James Construction	<b>Current Contract Amount</b>	4,680,672.81
<b>Change Order Number</b>	2	<b>Net Change This Order</b>	159,366.35
<b>Short Description</b>	Change Order No. 2	<b>Contract Amount After Change</b>	4,840,039.16

Container	Line No.	Item Description	Unit	Quantity	Unit Price in \$	Amount in \$
<b>Construction</b>	<b>Construction</b>					
	159	Cement Stabilized Backfill	CY	660.0000	35.58	23,482.80
	162	Revision to Cap Rebar	LS	1.0000	5,071.12	5,071.12
	163	Area Drainage at FM 1463	LS	1.0000	29,018.84	29,018.84
	164	Asphalt Transition at Cane Island and IH 10 Frontage Road	LS	1.0000	71,710.84	71,710.84
	165	5' Slope Paving (5" Thick)	CY	67.0000	523.59	35,080.53
	166	Biodgrd Ero Ctrl Inlet Protection	LF	396.0000	11.12	4,403.52
	167	Rail Mounted Signs at IH10 Overpass	LS	1.0000	6,787.20	6,787.20
	168	6" Conc Curb (Dowel)	LF	683.0000	7.81	5,334.23
	169	Safety Officers	HRS	20.0000	51.96	1,039.20
	24	Hydrated Lime (Estimated at 6% by Dry Weight)	TON	-73.2700	191.58	-14,037.07
	26	Lime Treated Subgrade (8" Depth)	SY	-4608.0300	1.85	-8,524.86
	<b>Container Total</b>					159,366.35
	<b>Grand Total</b>					159,366.35

# 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**

Certificate Number:  
2020-691983

Date Filed:  
11/20/2020

Date Acknowledged:  
12/08/2020

**1 Name of business entity filing form, and the city, state and country of the business entity's place of business.**  
James Construction Group, LLC  
Houston, TX United States

**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

**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.**  
FBC PO# 186684 c/o 2  
qty overruns on Cane Island parkway phase 2

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)