



AIA Document G701® – 2017

Change Order

PROJECT: *(Name and address)*

Galaxy All Abilities Park

CONTRACT INFORMATION:

Contract For: PO 256197 Bid: B25-047

Date: 06-27-2025

CHANGE ORDER INFORMATION:

Change Order Number: 001

Date: 06-27-2025

OWNER: *(Name and address)*

Fort Bend County

ARCHITECT: *(Name and address)*

Bowman Consulting Group, LTD

2900 North Loop West Ste 950

Houston, TX 77092

CONTRACTOR: *(Name and address)*

DL Meacham, LP

1702 Washington Ave

Houston, TX 77007

THE CONTRACT IS CHANGED AS FOLLOWS:
(Insert a detailed description of the change and, if applicable, attach or reference specific exhibits. Also include agreed upon adjustments attributable to executed Construction Change Directives.)

Storm sewer - add 22 LF of poly pipe, 36" junction box, 24" poly pipe, and connection at existing curb	\$12,581.00
Deduct Connect to existing manhole	(\$2,808.00)
Deduct Boring for 12" drainage pipe	(3,369.60)
Deduct Drainage pipe 12" PVC (30 LF @ \$77.50)	(\$2,325.00)

The original was

\$ 601,961.85

The net change by previously authorized Change Orders

\$ 0.00

The prior to this Change Order was

\$ 601,961.85

The will be increased by this Change Order in the amount of

\$ 4,078.40

The new including this Change Order will be

\$ 606,040.25

The Contract Time will be unchanged by (0) days.

The new date of Substantial Completion will be

NOTE: This Change Order does not include adjustments to the Contract Sum or Guaranteed Maximum Price, or the Contract Time, that have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.

ARCHITECT (Signature)

By: Darren M Sharkey, Director, TX 3658

(Printed name, title, and license number if required)

7/11/2025

Date

CONTRACTOR (Signature)

BY: DL Meacham, LP

(Printed name and title)

6-27-25

Date

OWNER (Signature)

BY: Fort Bend County

(Printed name and title)

July 23, 2025

Date



Proposal

P.O. Box 431789 Houston, Texas 77243
Office: 713.465.1905

PROPOSAL SUBMITTED TO		DATE	DATE OF PLANS/PAGE #'s/PROJECT NUMBER
Bowman		6/16/2025	Proposal #1 Rev.1
PHONE NUMBER	Added Days	JOB NAME	
713-993-0333		Galaxy All Ability Park	
Attention		ADDRESS,CITY, STATE, ZIP	
Darren Sharkey		2900 North Loop W, Suite 950 Houston, TX 77092	

Proposal to furnish all material and labor necessary of:

Description	Qty	Unit	Unit Price	Extension
Scope of work:				
Storm sewer connection changes per plans dated 6/10/25				
Add 22 LF of poly pipe, add 36" junction box, add 24" poly pipe, and connection at existing curb.	1	LS	\$ 12,581.00	\$ 12,581.00
Line items from contract:				
Connect to existing manhole	1	LS	\$ (2,808.00)	\$ (2,808.00)
Boring for 12" drainage pipe	1	LS	\$ (3,369.60)	\$ (3,369.60)
Drainage pipe 12" PVC	30	LF	\$ (77.50)	\$ (2,325.00)

Total: \$ 4,078.40

SIGNATURE

DATE OF ACCEPTANCE

7/11/2025

Jamie DeForest
Senior Project Manager
DL Meacham LP

TO: DL Meacham

JOB NAME: Galaxy All Abilities Park

DATE: 6/16/2025

FROM: Paul Scott RME-U-2539207
President
Scott Sitework SCR-U-2539231



SCOTT SITEWORK

Richmond, Tx 77407
832.640.7222

ITEM	RFP 3	QTY	UNIT	TOTAL
STORM SEWER				
add 24" hp poly pipe		20	lf	
deduct 12" hdpe		-22	lf	
add 36" junction box		1	ea	
add 24" connect to existing curb inlet		1	ea	
deduct 12" connection		-1	ea	
SUBTOTAL STORM			\$	10,940

** Price includes all labor, materials and supervision.

TOTAL \$ 10,940

Bid Plans Used: L1.01 dated 6/10/2025

Exclusions:

ROW permit or any permits or permit fees

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.

DL Meacham, LP
Houston, TX United States

Certificate Number:
2025-1335472

Date Filed:
07/11/2025

Date Acknowledged:
07/22/2025

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.

Bid 25-047
Galaxy All Abilities Park - Change Order 1

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Meacham, Larry	Houston, TX United States	X	

5 Check only if there is NO Interested Party.

☐

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(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)