



**DeKalb County
Department of Purchasing and Contracting
Change Order Request Form**

User Department: Facilities Management		From: Clyde Stovall	
CPA No.:		Title: On-Call Plumbing	
Effective Date: 01/22/19		Expiration Date: 01/31/20	
Contract APPROVED Amount: \$450,000.00			
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Contractor(s)	Contract No.	Amount Spent	
J. Squared Plumbing Company	1145455	\$24,995.20	
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Total Amount Spent to Date: \$24,995.20			

User Department Recommendation:		Change Order X	
Additional Funds Request (if applicable): <u>\$685,500.00</u>			
Facilities Management is requesting an additional \$685,500.00 be added to the contract for major retro fit program (Toilet/Urinal Replacements throughout county buildings) due to Consent Decree.			
		<u>4/12/19</u>	
Department Director Signature		Date	
Funding: General <input checked="" type="checkbox"/> Enterprise <input type="checkbox"/>		3 Digit Fund Code <u>511</u>	
CIP Line Item No. (if applicable): _____			

For Use by Purchasing and Contracting:		Approve <input checked="" type="checkbox"/>	Deny <input type="checkbox"/>
Additional Comments:			
		<u>4/19/19</u>	
Purchasing and Contracting Signature		Date	

4/18/2019