

CHANGE ORDER REQUEST FORM



GENERAL CONTRACTOR

Broken Arrow Inc.  
 8960 Clinton Landing Road  
 Lakepoint, Utah 84074  
 Main Office: (801) 355-0527  
 Fax Number: (801) 252-7501

Project Manager: Sonny Smith  
 Contact Number: (435) 241-588

Date: April, 14 2020

TO: Ensign Engineering & Land Surveying  
 169 N. Main St.  
 Tooele, UT 84074

CHANGE DIRECTIVE **NO. 1**

Project: Bated Canyon & Cambridge Intersection  
 JOB #: B1919  
 Address: Bated Canyon & Cambridge Intersection  
 Start Date: November 12, 2019  
 Finish Date: TBD

DESCRIPTION

This Change Order references additional work outside of the original contract agreement and/or adjusts items within the current contract agreement. The description includes the following:		
1. Credit - Storm Drain Box (1 EA x \$3,348.85)		\$ (3,348.85)
2. Credit - 36-Inch Class III RCP SD Main Line (28.53 LF x \$118.68)		\$ (3,385.94)
3. Add - 4-Inch Asphalt Paving (Includes Road Base) (1,918 SF x \$8.04)		\$ 15,420.72
4. Add - 30-Inch HB Curb & Gutter (855 LF x \$33.31)		\$ 28,480.05
5. Add - 30-Inch Mountable Curb & Gutter (90 LF x \$47.76)		\$ 4,301.10
6. Add - Curb Transition (3 EA x \$986.64)		\$ 2,959.92
7. Add - Curb Inlet Box Tie-ins (2 EA x \$540.00)		\$ 1,080.00
<b>Total Amount:</b>		<b>\$ 45,507.00</b>

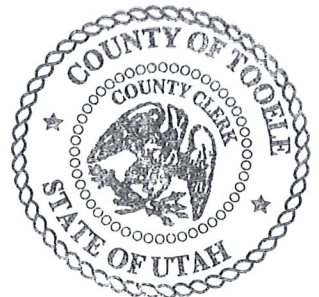
COST AND DURATION SUMMARY

Original Contract Amount:	\$ 117,528.31	Summary of Orders	Amount	Contract Calendar Days:
Billed To Date:	\$ 77,693.95	Change Order No. 1	\$ 45,507.00	Revised Contract Calendar Days:
Remaining Contract Amount:	\$ 39,834.36	Change Order No. 2		Previous Finish Date:
Revised Contract Amount:	\$ 163,035.31	Change Order No. 3		New Finish Date:
Billed To Date:	\$ 77,693.95	Change Order No. 4		
Revised Remaining Contract Amount:	\$ 85,341.36	Change Order No. 5		

CONTRACT SUMMARY:

Upon signature approval of this Change Order, the contract is hereby modified to include the changes specified herein, and this change order is hereby made a part of the titled contract. The work shall be performed and completed in accordance with the contract documents and the project schedule shall be adjusted as required to allow sufficient time to complete the additional work. Payment terms shall follow the contract agreement terms. This Change Order shall include labor and materials to complete the work as described. The terms and other provisions of the original agreement and/or purchase order which are not expressly changed above are to remain.

ACCEPTED BY:



*[Handwritten Signature]*

ATTEST: June 2020

Tom TRIPP

*[Handwritten Signature: Marilyn K. Gillette]*  
 MARILYN K. GILLETTE  
 TOOELE COUNTY CLERK

Bates Canyon and Cambridge Storm Drain  
Broken Arrow, Inc. - Job # B1919

PAYMENT APPLICATION # 1 11/26/19

DESCRIPTION	QUANTITY		UNIT	PRICE	AMOUNT	CURRENT UNITS	PREVIOUS UNITS	TOTAL UNITS	% COMPLETE	INVOICE AMOUNT
	EA	LF								
1 PROVIDE & INSTALL TRAFFIC SIGN	5.00		EA	456.47	\$2,282.35	4.00	-	4.00	80%	\$1,825.88
2 SAW CUT EXISTING ASPHALT	719.00		LF	3.00	\$2,157.00	230.00	-	230.00	32%	\$690.00
3 TRAFFIC CONTROL	1.00		LS	1,121.11	\$1,121.11	0.80	-	0.80	80%	\$896.89
4 REMOVE & DISPOSE OF EXISTING CURB & GUTTER	64.28		LF	22.9807	\$1,477.20	40.00	-	40.00	62%	\$919.23
5 REMOVE & DISPOSE OF EXISTING ASPHALT	1,543.92		SF	0.93223	\$1,440.83	350.00	-	350.00	23%	\$326.63
6 SWPPP CONTROLS	1.00		LS	1,562.97	\$1,562.97	-	-	-	0%	\$0.00
7 REMOVE & DISPOSE OF EXISTING STORM DRAIN LINE & FLARED END SECTIONS	156.81		LF	29.1742	\$4,574.80	156.81	-	156.81	100%	\$4,574.80
8 MOBILIZATION	1.00		LS	4,708.67	\$4,708.67	0.80	-	0.80	80%	\$3,766.94
9 36-INCH CLASS III RCP SD MAIN LINE (INCLUDES BEDDING & IMPORT BACKFILL)	548.53		LF	118.68	\$65,099.54	520.00	-	520.00	95%	\$61,713.60
10 RELOCATE EXISTING CONCRETE FLARED END SECTION	1.00		EA	1,215.86	\$1,215.86	-	-	-	0%	\$0.00
11 STORM DRAIN BOX	2.00		EA	3,348.85	\$6,697.70	-	-	-	0%	\$0.00
12 STRIPING	1.00		LS	2,160.00	\$2,160.00	-	-	-	0%	\$0.00
13 4-INCH ASPHALT PAVING (INCLUDES ROAD BASE)	4,569.21		SF	5.04038	\$23,030.55	350.00	-	350.00	8%	\$1,764.13
				<b>SUBTOTAL</b>	<b>\$117,528.59</b>					
				<b>ESTIMATE TOTAL</b>	<b>\$117,528.59</b>				<b>INVOICE TOTAL</b>	<b>\$77,693.95</b>



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/24/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER <b>Curry Insurance Agency, Inc.</b> PO Box 739 Tooele, UT 84074	CONTACT NAME: <b>Lori Weirich</b>
	PHONE (A/C, No, Ext): <b>(435)882-1216</b> FAX (A/C, No): <b>(435)882-1220</b> E-MAIL ADDRESS: <b>lori@curins.com</b>
INSURED <b>Clean Freak Custom Services</b> 36 Benchmark Vlg Tooele, UT 84074-2410	INSURER(S) AFFORDING COVERAGE
	INSURER A : <b>Acuity</b>
	INSURER B :
	INSURER C :
	INSURER D :
	INSURER E :

COVERAGES CERTIFICATE NUMBER: 00012053-0 REVISION NUMBER: 3

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR			ZD0527	05/22/2019	05/22/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER <b>Canyon Cove Housing</b> 178 E Vine St Tooele, UT 84074	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE  (LHW)
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