

INDIANA Department of Transportation**Construction Change Order and Time Extension Summary****Contract Information**

Contract No.: B -36229	Letting Date:02/20/2019
District:LAPORTE DISTRICT	AE:Beale, Cortney
PE/S:Randell, Lee	Status:Draft

Change Order Information

Change Order No.: 017	EWA: N or Force Acct: N
Date Generated: 11/11/2020	Date Approved: 00/00/0000
Reason Code: CHANGED COND, Utility Related	

Description: Supplemental Acceleration Cost, 45th St

Original Contract Amount	\$ 20,538,846.45	
Current Change Order Amount	\$ 50,000.00	Percent: 0.243 %
Total Previous Approved Changes	\$ 1,382,108.36	Percent: 6.729 %
Total Change To-Date	\$ 1,432,108.36	Percent: 6.972 %
Modified Contract Amount	\$ 21,970,954.81	

Time Extension Information

Date Initiated 00/00/0000	Date Completed 00/00/0000
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Original Contract Time	SS Completion Date 00/00/0000 or SS Calendar/Work Days 0
	SP Date 00/00/0000 or SP Days
	(SS = Standard Specification, SP = Special Provision)

Time Element Description:

Current Time Extension	SS Days 0 SP Days 0	SP Days Value \$ 0.00
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Previous Time Approved	SS Days by AE:_____ DCE:_____ SCE:_____ DDCM:_____
	SS Days_____ SP Days Value \$ _____

Revised Contract Time	SS Completion Date 00/00/0000 or SS Calendar/Work Days 0
	SS Date 00/00/0000 or SP Days 0

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Review and Approval Information

Required Approval Authority AE:_____ DCE:_____ SCE:_____ * DDCM:_____ *
(\$ per Change Order) (- LE \$ 250K-) (- LE \$ 750K -) (-- LE \$ 2 M --) (-- GT \$ 2 M --)
(Days per Contract) (50 SS days) (100 SS days) (200 SS Days) (GT 200 SS days)

Verbal Approval Required? Y / N If Y, by_____ Date Issued_____

Total Change To-Date>5%? Y / N If Y , Copy to Program Budget Manager_____

Scope/Design Recommendation Y / N If Y, Referred to Project Manager(PM) _____
Required?

Date to PM_____ Date Returned_____

Approval Authority Concurs with PM? Y / N If Y, Concurrence by_____ Date_____

If N,Resolution: Approved _____ Disapproved _____

Resolved by_____ Date_____

LPA Signatures Required? Y / N If Y, Date to LPA _____ Date Returned _____

FHWA Signatures Required? Y / N If Y, Date to FHWA_____ Date Returned_____

* Field Engineer Recommendation (Required for SCE or DDCM Approval)

Field Engineer _____ Date _____

Comments: _____

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Contract: B -36229
 Project: 0710056 - State:0710056
 Change Order Nbr: 017
 Change Order Description: Supplemental Acceleration Cost, 45th St
 Reason Code: CHANGED COND, Utility Related

CLN	PCN	PLN	Item Code	Unit	Unit Price	CO Qty	Comment	Amount Change
0263	0710056	0261	105-09357	DOL	1.000	50000.000	C	Amount:\$ 50,000.00

Item Description: COST ADJUSTMENT FOR ACCELERATION

Supplemental Description1: , 45th St between Calumet Ave and Southwood Dr

Supplemental Description2:

Total Value for Change Order 017 = \$ 50,000.00

Whereas, the Standard Specifications for this contract provides for such work to be performed, the following change is recommended.

General or Standard Change Order Explanation

Change Order 17 is being created as a supplemental cost to Change Order 11 as a result of continued acceleration efforts with the intent to complete construction of 45th St between Calumet Ave and Southwood Dr by November 30, 2020. The content of this change order is the same as Change Order 11. CLN 0261 was created under Change Order 11 as category 0002 for \$275,000. 00 and is being increased an estimated \$50,000.00 under this change order. Under Change Order 11 the cost could be extended if necessary and approved by INDOT and the Town of Munster.

General or Standard Change Order Explanation

INDOT and the Town of Munster previously agreed that there are acceleration costs associated with completing the work by the November intermediate completion date. From conversations with Walsh, their original schedule was based on a 40 hour work week. The Town of Munster is willing to pay the difference in labor beyond 40 hours per week. Weekly costs shall be forecasted each week prior to commencing any work. The pay item under this change order, Cost Adjustment for Acceleration, 45th St between Calumet Ave and Southwood Dr, is being created for estimated acceleration costs up to \$275,000.00 and may be extended following approval by INDOT and the Town of Munster. The Town of Munster agrees to pay the premium labor time necessary to accelerate the contract and meet the intermediate completion date. This process will involve tracking the premium time used over 8 hours per day Monday thru Friday, and hours worked on Saturday, and Sunday if directed. This process will also involve biweekly tracking of reported premium labor time based on certified payroll submittals. Biweekly tracking meetings will be required between Walsh, Town of Munster, INDOT and DLZ. INDOT and the Town of Munster can cancel the acceleration at any time and request a meeting to change the schedule if work is not progressing as intended. All expenses shall be submitted to the engineer throughout the duration of acceleration. The cost to accelerate can also be stopped at any time by the engineer.

General or Standard Change Order Explanation

See attached acceleration agreement for specific details. No additional time is required under this change order to perform this work. Pricing for work under this change order has been deemed reasonable and fair. The LPA ERC has confirmed acceptance of this change order, and the INDOT PM has been notified. Attached for reference is the previously approved change order 11, acceleration agreement, acceleration agreement response by the contractor and INDOT PM notification.

Change Order Explanation for Specific Line Item

It is the intent of the parties that this change order is full and complete compensation for the work describe above.

Notification and consent to this change order is hereby acknowledged.

Contractor:_____

Signed By:_____

Date:_____

NOTE: Other required State and FHWA signatures will be obtained electronically through the SiteManager system.

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APPROVED FOR LOCAL PUBLIC AGENCY

(SIGNATURE)

(TITLE)

(DATE)

(SIGNATURE)

(TITLE)

(DATE)

SUBMITTED FOR CONSIDERATION

PE/S _____

APPROVED FOR INDIANA DEPARTMENT OF TRANSPORTATION

Approval Level	Name of Approver	Date	Status
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