

# CITY OF NEW HAVEN CONTRACT CHANGE ORDER

CONTRACTOR:	<b>Cintas</b>	VENDOR CODE :	
Contractor Address			
CONTRACT No.:	<b>210487919</b>	CHANGE ORDER No:	<b>1</b>
		Change Order Date	<b>6/30/2022</b>
PROJECT NAME	<b>On Call Mops and Mats</b>		PROJECT No.:
CONTRACT START DATE:	<b>July 1,2021</b>		
CONTRACT END DATE: Prior to CO	<b>June 30, 2022</b>		
FUNDING SOURCE OF CONTRACT:	<b>3C20-2071-58101</b>	C A P O No.:	
FUNDING SOURCE OF C. O. :	<b>3C22-2261-58101</b>	C A P O No.:	
COMPANY HOLDING PERFORMANCE BOND:			
CONTRACT AMOUNT PRIOR TO THIS CHANGE ORDER	<b>\$60,000.00</b>	ORIGINAL AMOUNT:	<b>\$60,000.00</b>
AMOUNT OF THIS CHANGE ORDER	<b>\$7,631.79</b>	ACTUAL	<input checked="" type="checkbox"/>
		ESTIMATE	<input type="checkbox"/>
CONTRACT AMOUNT, INCLUDING THIS C.O.	<b>\$67,631.79</b>	INCREASE	<input checked="" type="checkbox"/>
		DECREASE	<input type="checkbox"/>

**ALL OTHER TERMS AND CONDITIONS OF ORIGINAL CONTRACT REMAIN IN FULL FORCE AND EFFECT.**

CONTRACTOR'S SIGNATURE:		DATE:
TITLE:		

**FOR USE BY CITY ONLY** ↓

<b>CERTIFIED THAT THIS CHANGE ORDER HAS BEEN REVIEWED AND FOUND TO BE APPROPRIATE AND IN THE BEST INTEREST OF THE CITY OF NEW HAVEN</b>			
REQUESTING AGENCY:			
DEPARTMENT HEAD:	DATE:	PURCHASING AGENT:	DATE:
Department Contact:	Tel:		
OFFICE OF CORPORATION COUNSEL: - APPROVED TO CORRECTNESS AND FORM.	DATE:	CHIEF ADMINISTRATIVE OFFICE	DATE:
CONTROLLER: - CERTIFIED AS TO SUFFICIENCY OF APPROPRIATION OR AVAILABILITY OF FUNDS	DATE:	ACCOUNTS PAYABLE	DATE:

**CITY OF NEW HAVEN**

