

CITY OF NEW HAVEN CONTRACT CHANGE ORDER (CO)

1	CONTRACT TITLE:	On Call Fire Extinguishers Services				
2	CONTRACT #.:	21704-1-5	CO#		CO DATE	
3	CONTRACTOR:	Life Safety Svc. & Supply LLC.			VENDOR CODE	19626
:4	EMAIL	drew@lifesafetyservice.com			PROJECT No.:	NA
:5	CONTRACT START DATE	July 1, 2020		CONTRACT END DATE:	June 30, 2021	
6	CONTRACT TERM WILL BE:	<input checked="" type="checkbox"/>			June 30,2021	
		UNCHANGED	INCREASED	DECREASED	NEW END DATE	
7	FUNDING SOURCE OF CONTRACT:	3C202072-58700			C A P O #:	70210012
:8	FUNDING SOURCE OF CO	3C202072-58700			C A P O #:	70210012
:9	ORIGINAL AWARDED AMOUNT	\$25,000				
10	CONTRACT AMOUNT PRIOR TO THIS CO:	\$25,000				
11	AMOUNT OF THIS CO	\$0			ACTUAL	<input checked="" type="checkbox"/> ESTIMATE
					INCREASE	DECREASE
12	NEW CONTRACT AMOUNT	\$25,000				
13	Is this Change Order a final close-out of the Contract?	YES		NO	<input checked="" type="checkbox"/>	
14	Has the cost of this contract been increased from the original amount? (YES		NO	<input checked="" type="checkbox"/>	
15	What is the total percentage increase/decrease over the original contract, including the current CO?	0			%	
16	Is any part of this Change Order outside of the scope of the original bid documents?	YES		NO	<input checked="" type="checkbox"/>	
17	Has any of the work described in this Change Order been ordered to be done?	YES		NO	<input checked="" type="checkbox"/>	
18	Are there any unit prices or lump-sum amounts in this Change Order that were not taken from the Contractor's original bid for the project? (If the answer is yes, approved quotes and prices, with back-up, must be appended hereto along with certification by the person who approved the reasonableness of the prices .)	YES		NO	<input checked="" type="checkbox"/>	

19	<i>COMPANY HOLDING PERFORMANCE BOND: (If Applicable)</i>
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23			
	Contract Number	CO #	DATE

ALL TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT REMAIN IN FULL FORCE AND EFFECT.		
CONTRACTOR'S SIGNATURE	TITLE	DATE

BY SIGNING BELOW, WE CERTIFY THAT THIS CHANGE ORDER HAS BEEN REVIEWED BY THE APPROPRIATE PARTIES AND FOUND TO BE IN COMPLIANCE WITH THE RULES, REGULATIONS AND POLICIES OF OUR INDIVIDUAL DEPARTMENTAL REQUIREMENTS.	
REQUESTING AGENCY DEPARTMENT HEAD SIGNATURE	DATE
SMALL CONTRACTOR DEVELOPMENT SIGNATURE	DATE
COMMISSION ON EQUAL (CEO) SIGNATURE	DATE
CAPO REVISED AND APPROVED SIGNATURE	DATE
PURCHASING AGENT SIGNATURE	DATE
OFFICE OF CORPORATION COUNSEL: - APPROVED TO FORM & CORRECTNESS.	DATE
CONTROLLER: - CERTIFIED AS TO SUFFICIENCY OF APPROPRIATION OR AVAILABILITY OF FUNDS	DATE

<i>This section is utilized when and as needed:</i>		
24	ENGINEER/ARCHITECT:	COMPANY/FIRM
		DATE