



CONSTRUCTION CHANGE ORDER NO. 2

PROJECT: FY24-FY26 Annual Sanitary Sewer Repair and Extension

CONTRACT NO: 24-0384-ITB-C

AGREEMENT DATE: October 1, 2024

NOTICE TO PROCEED: October 16, 2024

OWNER: Pinellas County Florida, a political subdivision of the State of Florida

CONTRACTOR: Rowland DE, LLC

CHANGE:

Increases the agreement amount by \$5,000,000 and extends the contract for 365 consecutive Calendar Days.

REASON FOR CHANGE:

An additional \$5,000,000.00 under Change Order No. 2 is necessary to maintain uninterrupted contractor availability for sanitary sewer repairs, rehabilitation, replacement, and extensions until the expected issuance of the Annual Sanitary Sewer Repair contract for FY 2027 through FY 2029. Without additional capacity, the County's ability to respond quickly to emergency failures, address deteriorated infrastructure, mitigate inflow and infiltration, and prevent sanitary sewer overflows, environmental impacts, service interruptions, and property damage may be limited. This contract remains the most efficient mechanism to complete these repairs because the work is distributed across numerous smaller, time-sensitive locations that would be delivered less efficiently through separate advertised construction contracts.

The Agreement term has been extended by 365 consecutive Calendar Days to allow for the preparation of a new agreement. The new Agreement Term ends 10/16/2027.

CHANGE IN AGREEMENT PRICE:

Original Agreement Amount: \$10,209,703.75
Increase due to Change Order No. 1: \$5,000,000.00
Increase due to Change Order No. 2: \$5,000,000.00
Final Revised Agreement Amount: \$20,209,703.75

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Pinellas.gov



Office of Management & Budget

Purchasing

Your acceptance of this Change order shall constitute a modification to our Agreement and will be performed subject to all of the same terms and conditions as contained in our Agreement, as indicated above, as fully as if the same were repeated in this acceptance.

Pinellas County Florida, a political subdivision of the State of Florida

By: _____
Signature

Name: _____
Typed, printed or stamped

Title: _____

Date: _____

CONTRACTOR:

By: _____
Signature

Name: _____
Typed, printed or stamped

Title: _____

APPROVED AS TO FORM

By: Miles Belknap
Office of the County Attorney

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