

# REQUEST FOR CHANGE ORDER FORM

Procurement Services Division

Revised 10-01-2025

consent  
DOT 8/11  
CB 8/18

Date: Jul 29, 2026

File ID #: 26-2132

|                                                                                                                                                                 |                                                 |                          |                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|--------------------------|---------------------------------------|
| <b>Purchase Order #:</b> 7780-1-SERV                                                                                                                            | <b>Original Purchase Order Date:</b> 06/24/2025 | <b>Change Order #:</b> 1 | <b>Department:</b> DOT                |
| <b>Vendor Name:</b> DOT - Elmhurst Chicago Stone                                                                                                                |                                                 | <b>Vendor #:</b> 10031   | <b>Dept. Contact:</b> Patricia Miller |
| <b>Action Requested and Reason for Change Order Request:</b><br>Portland Cement Concrete - Expired 3/31/2026<br>Decrease remaining encumbrance & close contract |                                                 |                          |                                       |

## IN ACCORDANCE WITH 720 ILCS 5/33E-9

- ☐ (A) Were not reasonably foreseeable at the time the contract was signed.
- ☐ (B) The change is germane to the original contract as signed.
- ☒ (C) Is in the best interest for the County of DuPage and authorized by law.

## INCREASE/DECREASE

|   |                                                                                                            |               |
|---|------------------------------------------------------------------------------------------------------------|---------------|
| A | Starting Contract Value                                                                                    | \$64,000.00   |
| B | Net \$ Change for Previous Change Order                                                                    |               |
| C | Current Contract Amount (A + B)                                                                            | \$64,000.00   |
| D | Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease | (\$51,961.75) |
| E | New Contract Amount (C + D)                                                                                | \$12,038.25   |
| F | Cumulative Change Order Amount (B + D)                                                                     | (\$51,961.75) |
| G | Cumulative Percent of all Change Orders (B+D/A); (60% maximum on construction contracts)                   | -81.19%       |

## DECISION MEMO NOT REQUIRED - Check Applicable Box(es)

- ☐ Cancel Entire Order ☐ Close Contract ☐ Contract Extension (≤59 Days) ☐ Update Budget Code
- ☐ Change Budget Code From: \_\_\_\_\_ to: \_\_\_\_\_
- ☐ Increase/Decrease Quantity From: \_\_\_\_\_ to: \_\_\_\_\_
- ☐ Price Shows: \_\_\_\_\_ should be: \_\_\_\_\_ ☐ Move Funds Between Lines
- ☒ Decrease Remaining Encumbrance and Close Contract ☐ Increase Encumbrance and Close Contract ☐ Decrease Encumbrance ☐ Increase Encumbrance

## DECISION MEMO REQUIRED - Check Applicable Box(es) and Fill In All Answers Below

- ☐ Contract Extension Greater Than 59 Days From \_\_\_\_\_ to: \_\_\_\_\_ ☐ Cancel Contract
- ☐ Cumulative Increase Greater Than \$10,000 (Row 'F' Above) ☐ Other - Explain In Summary Explanation Box Below

**Summary Explanation** - Provide a summary of the action. Explain why it is necessary and what is to be accomplished.

**Original Source Selection/Vetting Information** - Describe method used to select source; for instance, bid, RFP, sole source, etc.

**Recommendations/Alternatives** - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.

**Fiscal Impact/Cost Summary** - Include projected cost for each fiscal year, approved budget amount and account number

**APPROVALS - Initials Only**

PM \_\_\_\_\_ 6911 \_\_\_\_\_ Jul 29, 2026 \_\_\_\_\_  
Prepared By \_\_\_\_\_ Phone Ext. \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ SMT \_\_\_\_\_ 6910 8/5/26  
Recommended for Approval \_\_\_\_\_ Phone Ext. \_\_\_\_\_ Date \_\_\_\_\_

8 \_\_\_\_\_ 8/5/2026  
Reviewed by Procurement Officer \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ \_\_\_\_\_  
Completed by Buyer \_\_\_\_\_ Date \_\_\_\_\_