



# Request for Change Order

## Procurement Services Division

Attach copies of all prior Change Orders

HS 5/20  
E1+ CB 5/27

Date: May 9, 2025

MinuteTraq (IQM2) ID #:

<b>Purchase Order #:</b> 7431	<b>Original Purchase Order Date:</b> Oct 22, 2024	<b>Change Order #:</b> 2	<b>Department:</b> WEX
<b>Vendor Name:</b> HEALTHY AIR HEATING & AIR INC.		<b>Vendor #:</b> 14166	<b>Dept Contact:</b> GINA STRAFFORD
<b>Background and/or Reason for Change Order Request:</b>	Increase purchase order by \$50,000.00. Increase line 4 by \$50,000.00 from \$104,494.00 to \$154,494.00 New contract total \$916,434.00		
<b>IN ACCORDANCE WITH 720 ILCS 5/33E-9</b>			

- ☐ (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	\$866,434.00
B	Net \$ change for previous Change Orders	
C	Current contract amount (A + B)	\$866,434.00
D	Amount of this Change Order <input checked="" type="checkbox"/> Increase <input type="checkbox"/> Decrease	\$50,000.00
E	New contract amount (C + D)	\$916,434.00
F	Percent of current contract value this Change Order represents (D / C)	5.77%
G	Cumulative percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	5.77%
DECISION MEMO NOT REQUIRED		

- ☐ Cancel entire order ☐ Close Contract ☐ Contract Extension (29 days) ☐ Consent Only
- ☐ Change budget code from: \_\_\_\_\_ to: \_\_\_\_\_
- ☐ Increase/Decrease quantity from: \_\_\_\_\_ to: \_\_\_\_\_
- ☐ Price shows: \_\_\_\_\_ should be: \_\_\_\_\_
- ☐ Decrease remaining encumbrance and close contract ☐ Increase encumbrance and close contract ☐ Decrease encumbrance ☐ Increase encumbrance

DECISION MEMO REQUIRED	
<input type="checkbox"/> Increase (greater than 29 days) contract expiration from: _____ to: _____	
<input checked="" type="checkbox"/> Increase $\geq$ \$2,500.00, or $\geq$ 10%, of current contract amount <input type="checkbox"/> Funding Source _____	
<input type="checkbox"/> OTHER - explain below:	

VC	6184	May 9, 2025	X	6444	5/9/25
Prepared By (Initials)	Phone Ext	Date	Recommended for Approval (Initials)	Phone Ext	Date
<b>REVIEWED BY (Initials Only)</b>					
Buyer _____ Date _____			Procurement Officer _____ Date _____		
Chief Financial Officer _____ Date _____			Chairman's Office _____ Date _____		
(Decision Memos Over \$25,000)			(Decision Memos Over \$25,000)		