

Consent
SWM 4/7
CB 4/14

REQUEST FOR CHANGE ORDER FORM

Procurement Services Division

Revised 10-01-2025

Date: Mar 24, 2026

File ID #:

Purchase Order #: 1946-1- SERV	Original Purchase Order Date: Jul 27, 2016	Change Order #: 7	Department: Stormwater Management
Vendor Name: Copenhagen Construction		Vendor #: 13083	Dept. Contact: Alicia Favela
Action Requested and Reason for Change Order Request: Decrease PO by (\$30,297.39) to \$0.00 and close PO. PO Expired on 11/30/2025			

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	\$1,425,374.74
B	Net \$ Change for Previous Change Order	\$0.00
C	Current Contract Amount (A + B)	\$1,425,374.74
D	Amount of this Change Order <input type="checkbox"/> Increase <input checked="" type="checkbox"/> Decrease	(\$30,297.39)
E	New Contract Amount (C + D)	\$1,395,077.35
F	Cumulative Change Order Amount (B + D)	(\$30,297.39)
G	Cumulative Percent of all Change Orders (B+D/A); (60% maximum on construction contracts)	-2.13%

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.

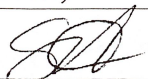
Recommendations/Alternatives - Describe staff recommendation and provide justification. Identify at least 2 other options to accomplish this request.

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

APPROVALS - Initials Only

AFP _____ 6698 _____ Mar 24, 2026 _____

Prepared By _____ Phone Ext. _____ Date _____

 _____ 6676 03.25.26
Recommended for Approval Phone Ext. Date

 _____ 3/27/2020
Reviewed by Procurement Officer Date

Completed by Buyer Date