

# County of Santa Clara

## Facilities and Fleet Department

County Center at Charcot  
2310 North First Street, Suite 200  
San Jose, California 95131-1011  
(408) 993-4600



MRI

### CHANGE ORDER NO. 02

**PROJECT TITLE:** MRI 2 (Room 1408) Equipment & Chiller Replacement, Renovation  
**PROJECT NO.:** 263-CP24030 **CONTRACT NO.:**  
**CONTRACTOR:** California Plus Engineering Inc. **SHEET 1 OF 2**

**Proposed Change Order Numbers covered by this Change:** 002

#### TERMS AND CONDITIONS OF CHANGE:

The contractor is hereby directed to make changes set forth below. By its signature on this Change Order, Contractor agrees that the net change in the Contract Sum stipulated below shall constitute full compensation, accord and satisfaction, for all costs and requests for costs, associated with the changed work, including labor, material and equipment costs, rescheduling, overhead, profit and any other costs arising directly or indirectly from the changed work, including without limitation, delay and disruption. The contractor further agrees that the additional contract time allotted (if any) is sufficient, and that there shall be no further time extensions or delay claims resulting from this Change Order. Contractor certifies the net adjustment in Contract Sum reflects costs of labor, equipment and materials, including all markups, calculated in conformance with the contract documents. Payment of adjusted Contract Sum includes final and full compensation, accord and satisfaction, for all labor, equipment, materials, incidentals and mark-up to perform the work and claims resulting; therefore, no additional compensation will be allowed.

The undersigned Contractor approves the foregoing as to the changes, if any, and the Contract Sum specified for each item and as to the extension of time allowed, if any, for completion of the entire Work as stated herein, and agrees to furnish all labor, materials and service, and perform all work necessary to complete any additional work specified for the consideration stated herein. Submission of sums which have no basis in fact or which Contractor knows are false are at the sole risk of Contractor and may be a violation of the False Claims Act set forth under Government Code section 12650 *et seq.*

It is expressly understood that the value of the extra Work or changes expressly includes any and all of Contractor's costs, expenses, field overhead, home office overhead, and profit, both direct and indirect, resulting from additional time required on the Project or resulting from delay to the Project. Any costs, expenses, damages, or time extensions not included are deemed waived.

#### DESCRIPTION OF WORK TO BE PERFORMED:

CO#02 – Provide Tear off of existing roofing furnish and install 3500 sq feet of new Carlisle TPO roofing, sure weld, vapor barrier, underlayment dens deck/Insulation as per specifications new drawings and scope of work provided.

By reason of this change, the Contract completion time is hereby increased by 14 calendar days from the previous completion date.

The Contract Amount due to this Change Order is hereby increased by \$176,014.00.

**IMPORTANT:** Contractor is required to sign this document and return one (1) copy to the Capital Programs office.

**Board of Supervisors:** Sylvia Arenas, Cindy Chavez, Otto Lee, Susan Ellenberg, S. Joseph Simitian  
**County Executive:** James R. Williams

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We the undersigned have considered all aspects of the change order proposed and hereby agree.

NAME AND TITLE OF SIGNER (Type or Print)	
Rey Fard, President	
CONTRACTOR	
DocuSigned by:	3/27/2024
(Signature of person authorized to sign)	Date Signed

NAME AND TITLE OF SIGNER (Type or Print)	
Roger Soohoo, Deputy Director, Facilities and Fleet	
COUNTY OF SANTA CLARA	
DocuSigned by:	3/27/2024
(Signature)	Date Signed

#### REVIEWED AS TO FORM AND LEGALITY:

DocuSigned by:
John A. Castro, Deputy County Counsel

#### COUNTY OF SANTA CLARA:

\_\_\_\_\_  
Susan Ellenberg, President, Date  
Board of Supervisors

Signed and certified that a copy of this document has been delivered by electronic or other means to the President, Board of Supervisors

#### ATTEST:

\_\_\_\_\_  
Curtis Boone, Acting Clerk Date  
of the Board of Supervisors