



County of San Benito
RESOURCE MANAGEMENT AGENCY

CONTRACT CHANGE ORDER NO. 2

PROJECT SAN BENITO COUNTY BEHAVIORAL HEALTH CENTER

PROJECT No. PWB-1810

CONTRACTOR SILVER CREEK INDUSTRIES INC.

CONTRACT No. _____

ARCHITECT HY ARCHITECTS, INC.

DATE 09.20.21

Note: Give complete description of work. The documents supporting this Change Order, including any drawings and estimates of cost, are referenced hereon and made a part hereof. (Reference supplemental drawing number, request for information number, change order request number, and any other documents as applicable. A copy of each shall be attached to the County's copy of this Change Order.)

AS I #	R F #	P C O #	Description	Extra	Credit	Days Ext.
02		4.2	Flooring Changes per ASI-002	\$34,209.08		12
07		05	Add Electrical For TV's	\$716.66		1
06		06	Remove Upper Cabinets in Room 176		\$1,511.21	
	48	07	Add Floor Drain to Room 128	\$1,108.12		
		08	Vapor Barrier	\$51,953.90		
08		09	ASI-008 Add Electrical to Room 183	\$230.03		
09		11	Add Door Bottoms	\$9,565.69		4
08		12	Casework Removal in Room 183		\$954.45	
		13	Reception Area - Countertops	\$402.38		1
07		14	Add EFSB4 Back Boxes	\$2,448.64		4
		16	Window Shades	\$5,599.44		0
10		17	Casework	\$424.20		1
		18	Extend Builders Risk	\$6,907.78		0
		19	Mechanical Acoustical Test	\$1,567.95		3
		20	Sign Credit		\$2,131.12	0
		21	Builders Risk	\$0.00		0
	64	22	OSA Louvers	\$6,509.28		4
		23	Casework for Room 144	\$1,659.68		10
		24	Power Delays	\$5,488.09		40
		25	Change Toilet Paper Dispenser	\$1,784.53		0
Execution of this change order represents full and final costs of all direct, indirect, and delay costs for the scope of services identified hereon unless noted otherwise. (Time extensions to date are non-compensable)						
TOTALS				\$130,575.34	\$4,596.78	76


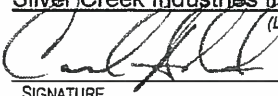

I hereby certify upon my own personal knowledge that budget funds are available for this encumbrance.


CAPITAL PROGRAM MANAGER

10/27/21
Date



County of San Benito
RESOURCE MANAGEMENT AGENCY

APPROVAL RECOMMENDED			Net Extra.....\$125,978.56
	Project Director	10/26/21	Or
CONSTRUCTION MANAGER	Title	DATE	Net Credit.....\$0
CONTRACTOR AGREEMENT			Calendar days time extended: 76
The undersigned hereby agrees to the above-described amendment of the contract.			Revised Completion Date: 4/08/21
<u>Silver Creek Industries Inc.</u>			COPIES TO: <ul style="list-style-type: none">• Capital Program Manager• Construction Manager• Contractor• Architect/Engineer• Other (specify):
(Legal firm name of Contractor)			
	DIRECTOR OF FIELD	10/25/21	
SIGNATURE	TITLE	DATE	
Note: The Contractor's name shall be as listed on the contract. All signatures must be signed in ink.			
COUNTY APPROVAL			
	COUNTY DIRECTOR	10/27/21	
APPROVED	TITLE	DATE	