



CONTRACT MODIFICATION
CITY OF APPLETON, WISCONSIN

☒ CHANGE ORDER

☐ WRITTEN AMENDMENT

MODIFICATION NO¹: 008

TO CONTRACTOR: Staab Construction Corporation

PROJECT: Regulatory Upgrade and Process Improvement PROJECT NO: 468399

OWNER: City of Appleton

ENGINEER: CH2MHILL

The following modification(s) to the Contract are hereby ordered (use additional pages if required):

See RFQ Log attached. Includes RFQs 23, 57, 58R and 59.

Reason for Modification(s):

See RFQs 23, 57, 58R and 59, attached.

Attachments (List Supporting Documents):

RFQs 23, 57, 58R and 59, attached.

Contract Amount or Price		Contract Times (Calculate Days)	
Original	\$4,857,000	Original Duration	365 Days
Previous Contract Modification(s) (Add)	\$86,675	Previous Contract Modification(s) (Add)	180 Days
This Contract Modification (Add)	\$8,372	This Contract Modification (Add/Deduct)	0 Days
Revised Contract Amount	\$4,952,047	Revised Contract Time	545 Days
The Revised Contract Completion Date is:			
July 27, 2015			

Owner	Contractor	Engineer Recommendation ²
By: <u>[Signature]</u>	By: <u>[Signature]</u>	By: <u>Tony Myers</u>
Date: <u>10/9/15</u>	Date: <u>10/9/15</u>	Date: <u>10/09/2015</u>

¹ Number all Modifications consecutively.

Copies: Owner

² Recommendation necessary for Change Orders.

City of Appleton
Regulatory Upgrade and Process
Improvement Project

REQUEST FOR
QUOTATION

QUOTATION NO: 023

TO: Staab Construction DATE: 06/05/2014

FROM: CH2M HILL

PROJECT: Regulatory Upgrade and Process Improvement Project

KEYWORD DESCRIPTION: Expansion Joint Repair

DATE QUOTATION REQUIRED: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a quotation for the alteration as described in Item 1. The quotation should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (Include list of attachments)

On the clearwell exterior is a failing expansion joint. The east wall vertical joint has popped concrete at the location of the parapet wall (on both sides). Two photos that show the failure are attached. Propose a method of joint repair and cost for review by Engineer.

2. Reason(s) for Modification: ☒ Owner ☐ Unforeseen Conditions(site, weather, etc) ☐ Other

Owner need for repairs.

3. Approval of Request:

Owner: Chris Shaw Date: 06-29-15

Engineer: Tony Myers Date: 06-25-2015

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 9,703.00

5. Will a modification to the contract time be required? ☐ Yes ☐ No

If so, trade(s) _____

No. of personnel _____

Duration (calendar days) _____

4466\COJB-55.xlsx

6. Attachment Identification: (list) _____

7. Quotation is in effect until: (date) 5-18-15

8. Approval of Quotation Leon Haffenbredl

Contractor Staab Const. Corp. Date 5/7/15



STAAB CONSTRUCTION
135 SOUTH 84TH STREET SUITE 400
MILWAUKEE, WI 53214

CHANGE ORDER ESTIMATE

File: 4488-CO
Date: 5/7/15
Project: Appleton WTF
Re: Cost to Complete Exterior Clearwell Wall Concrete Patchwork per RFQ 023.
File: 4488\COJB-55.xlsx

Tony Myers
CH2M HILL
135 South 84th Street Suite 400
Milwaukee, WI 53214

NEW	ITEM DESCRIPTION	COMMENTS	Qty	UM	Material	Indirect	Rank	Hours	Rate	Labor	Sub	Equip	Totals
1007	PROJECT MANAGEMENT/SUPERVISION		1	LS				0	95.23	0			0
1228	BONDS & INSURANCE	1.13% OF TOTAL CONTRACT	9,704	CS		110							110
1410	QUALITY CONTROL			CY					87.02	0			0
1998	TOTAL INDIRECT		XXXXXXX	XXXX	0	110	0	0	80.80	0	0	0	110
2031-002	SCAFFOLDING	SETUP & TEAR DOWN		CF				6	88.73	632			532
2031-003	SAWCUT REPAIR PERIMETER			CF				8	88.73	710			710
2031-004	CHIPBUSH CONCRETE SURFACE	MIN 2" DEEP		CF				30	88.73	2,662			2,662
3030-002	CLEARWELL WALLS LWR	FORM & POUR GROUT		SF				20	88.73	1,775			1,775
3030-003	GRIND & RUB WALL			SF				10	88.73	887			887
3160-002	DRILL & EPOXY REBAR	NO. 3 @ 6" E.W.		EA	200			5	88.73	444			444
3210	REINFORCING STEEL	NO. 3 @ 6" E.W.		TN	100			3	88.73	268			268
3260	CONCRETE FORMS			CY	50				88.73	0			50
3310	GROUT MATERIAL			CY	250				88.73	0			250
7800-001	CAULK VERTICAL WALL	ENTIRE JOINT TOP TO BOTTOM		LF					88.73	0	500		500
7800-002	CAULK HOR. EXP. JOINT			LF					88.73	0	525		525
10050	ELECTRICAL CONSTRUCTION	REMOVE/REINSTALL PARAPET CONDUIT	34	LF					87.02	0	500		500
19985	TOTAL COST		9,704	CS		110	0	02	88.73	7,276	1,525	0	9,511
98996	PERCENT MARGIN ***		XXXXXXX	XXXX	800	110	11.80%	XXXXXXX	XXXXXXX	XXXXXXX	7.20%	XXXXXXX	XXXXXXX
98996	PERCENT MARGIN ***		XXXXXXX	XXXX	11,80%	11.80%	11.80%	XXXXXXX	XXXXXXX	XXXXXXX	7.20%	XXXXXXX	XXXXXXX
98996	MARGIN ***		XXXXXXX	XXXX	70	13	0	XXXXXXX	XXXXXXX	XXXXXXX	110	0	182
98997	CONTRACT PRICE ***		XXXXXXX	XXXX	870	922	0	XXXXXXX	XXXXXXX	7,276	1,525	0	9,703

ADDITIONAL CAULKING COSTS = \$15,300/LF

City of Appleton
Regulatory Upgrade and Process
Improvement Project

REQUEST FOR
QUOTATION

QUOTATION NO: 57

TO: Staab Construction DATE: 5/20/15

FROM: CH2M HILL

PROJECT: Regulatory Upgrade and Process Improvement Project

KEYWORD DESCRIPTION: Additional Pressure Taps

DATE QUOTATION REQUIRED: 5/29/15

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a quotation for the alteration as described in Item 1. The quotation should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (Include list of attachments)

Install two (2) 1" welded thread-o-lets on 24" UV effluent header crown, one north just upstream of FV845 and one south just upstream of FV815, to facilitate potential future installation of pressure gauges and/or transmitters by City. Location of taps to be field located in coordination with Contractor and City.

2. Reason(s) for Modification: ☒ Owner ☐ Unforeseen Conditions(site, weather, etc) ☐ Other

Provide additional pressure information for controlling valves in UV effluent lines .

3. Approval of Request:

Owner: Chris Shaw Date: 05-26-15

Engineer: Tony Myers Date: 05-26-15

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 614.00

5 Will a modification to the contract time be required? ☐ Yes ☒ No

If so, trade(s) _____

No. of personnel _____

Duration _____ (calendar days)

4466\COJB-57.xlsx

6. Attachment Identification: (list)

7. Quotation is in effect until: (date) 5/27/15

8. Approval of Quotation Leon Haffonbredl

Contractor Staab Construction /corp. Date 5/20/15

**City of Appleton
Regulatory Upgrade and Process
Improvement Project**

**REQUEST FOR
QUOTATION**

QUOTATION NO: 058R

TO: Staab Construction DATE: 6-22-15

FROM: CH2M HILL

PROJECT: Regulatory Upgrade and Process Improvement Project

KEYWORD DESCRIPTION: Mechanical Identification

DATE QUOTATION REQUIRED: 7-15-15

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a quotation for the alteration as described in Item 1. The quotation should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (Include list of attachments)

Credit to not provide mechanical identification per spec section 10 14 00-Signage.

2. Reason(s) for Modification: ☐ Owner ☐ Unforeseen Conditions(site, weather, etc) ☒ Other

It makes sense for the owner to complete this work.

3. Approval of Request:

Owner: Chris Shaw Date: 07-16-15

Engineer: Tony Myers Date: 07-16-15

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ (3,091.00)

5. Will a modification to the contract time be required? ☐ Yes ☒ No

If so, trade(s) _____

No. of personnel _____

Duration _____ (calendar days)

6. Attachment Identification: (list) _____

7. Quotation is in effect until: (date) 7-28-15

8. Approval of Quotation Leon Haffenbredl

Contractor Staab Const Corp Date 7-15-15

City of Appleton
Regulatory Upgrade and Process
Improvement Project

REQUEST FOR
QUOTATION

QUOTATION NO: 059

TO: Staab Construction DATE: 7/15/15

FROM: CH2M HILL

PROJECT: Regulatory Upgrade and Process Improvement Project

KEYWORD DESCRIPTION: CT Tank Wall Injection

DATE QUOTATION REQUIRED: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a quotation for the alteration as described in Item 1. The quotation should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (Include list of attachments)

Cost to inject the existing contact basin no. 1 concrete wall. Time and material work as directed by owner.
Water was pouring through the wall.

2. Reason(s) for Modification: ☒ Owner ☐ Unforeseen Conditions(site, weather, etc) ☐ Other

3. Approval of Request:

Owner: Chris Shaw Date: 07-16-15

Engineer: Tony Myers Date: 07-16-2015

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 1,146.00

5 Will a modification to the contract time be required? ☐ Yes ☒ No

If so, trade(s) _____

No. of personnel _____

Duration _____ (calendar days)

4466\COJB-58.xlsx

6. Attachment Identification: (list)

7. Quotation is in effect until: (date) 7/28/15

8. Approval of Quotation Leon Haffenbredl

Contractor Staab Construction Corporation Date 7/15/15



CHANGE ORDER ESTIMATE

File: 4486-GO
 Date: 7/15/15
 Project: Appleton WTF
 Re: Cost to Inject the Existing CT Tank Wall per Owner's Request (T & M).
 File: 4466\COJB-58.xlsx

Tony Myers
 CH2M HILL
 135 South 84th Street Suite 400
 Milwaukee, WI 53214

NEW	ITEM DESCRIPTION	COMMENTS	Qty	UM	Material	Indirect	Plant	Hours	Rate	Labor	Sub	Equip	Totals
1007	PROJECT MANAGEMENT/SUPERVISION		1	LS				0	95.23	0			0
1220	BONDS & INSURANCE	1.13% OF TOTAL CONTRACT	1.147	CS		13							13
1410	QUALITY CONTROL			CY					87.02	0			0
1895	TOTAL INDIRECT				0	13		0	80.00	0	0	0	13
3900	CT WALL POLY INJECTION			SF	219			10	88.73	887			1,106
3995	TOTAL COST				219	13		10	348.73	887	0	0	1,119
8996	PERCENT MARGIN **				11.80%	11.80%					7.20%	7.20%	XXXXXXX
8996	MARGIN **				25	2		0			0	0	27
9997	CONTRACT PRICE **				244	14		0		887	0	0	1,146