

**ALACHUA COUNTY CDBG HOUSING GRANT #18DB-OM-03-11-01-H03
CHANGE ORDER # 1**

Client Name: Angeline Salvas CLIENT NO.: N/A
 Address: 6924 SE 179th St DATE: 3/14/2022
Hawthorne, FL

Change order to the Demolition/ New Home Construction Contract between the contractor, Unison Development LLC and the homeowner Angeline Salvas, for the Alachua County CDBG Housing Program.

Background Information: *The following items are either code violations or health and safety issues*

Change Ordered: Install new septic system utilizing CDBG Funds

SCOPE OF WORK:

Health Department is requiring septic system be disposed of and replaced, inspection report is attached.

Incorporate Bid Alternate #1 -Septic System inground into contract to be paid with CDBG Funds \$5,000.00
 Install and connect complete new septic system that meets code to include permitting, tank, drainfield, piping, plumbing and existing septic system disposa. - To be paid with CDBG Funds

If a built up system with pump is required and additional change order for \$2,500.00 incorporating Bid Alternate #2 - Built up septic will be submitted.

TOTAL: \$5,000.00

CONTRACT AMOUNT

Original Contract Amount (SHIP \$45,000.00 CDBG \$ 66,200.00)	<u>\$111,200.00</u>	
Previous Change Orders	<u>\$0.00</u>	
Amount of SHIP Funds this Change Order	<u>\$0.00</u>	Total SHIP Amount: \$ 45,000.00
Amount of CDBG Funds this Change Order	<u>\$5,000.00</u>	Total CDBG Amount: \$ 71,200.00
Amount of Owner Funds this Change Order	<u>\$0.00</u>	Total Owner Amount: \$ 0.00
Revised Contract Amount	<u>\$116,200.00</u>	

This document shall become an amendment to the Contract and all stipulations and covenants of the Contract shall apply hereto.

<u>Angeline Salvas</u>	<u>5/11/22</u>
Homeowner's Signature	Date
<u>Unison Hutchinson</u>	<u>5/18/22</u>
Contractor's Signature	Date
<u>[Signature]</u>	<u>5/31/22</u>
Authorized County Representative's Signature	Date
<u>[Signature]</u>	<u>5-18-22</u>
Project Manager's Signature	Date

1924 SE 179th St
Hawthorne



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
EXISTING SYSTEM AND SYSTEM REPAIR EVALUATION

PERMIT # _____

APPLICANT: Angela Santos
CONTRACTOR / AGENT: Environmental Development LLC
LOT: _____ BLOCK: _____ SUBDIV: _____ ID#: _____

TO BE COMPLETED BY FLORIDA REGISTERED ENGINEER, DEPARTMENT EMPLOYEE, SEPTIC TANK CONTRACTOR OR OTHER CERTIFIED PERSON. SIGN AND SEAL ALL SUBMITTED DOCUMENTS. COMPLETE ALL APPLICABLE ITEMS. COMPLETE TANK CERTIFICATION BELOW OR NOTE IN REMARKS WHY THE TANKS CANNOT BE CERTIFIED.

EXISTING TANK INFORMATION

1750 [] GALLONS SEPTIC TANK/GPD ATU LEGEND: _____ MATERIAL: Block RAFFLED: [Y / N]
[] GALLONS SEPTIC TANK/GPD ATU LEGEND: _____ MATERIAL: _____ RAFFLED: [Y / N]
[] GALLONS GREASE INTERCEPTOR LEGEND: _____ MATERIAL: _____
[] GALLONS DOSING TANK LEGEND: _____ MATERIAL: _____ # PUMPS: []

I CERTIFY THAT THE LISTED TANKS WERE PUMPED ON 10/22/21 BY 4 in Autoclave, HAVE THE VOLUMES SPECIFIED AS DETERMINED BY 1 DIMENSIONS 1 FILLING 1 LEGEND [], ARE FREE OF OBSERVABLE DEFECTS OR LEAKS AND HAVE A [SOLIDS DEFLECTION DEVICE / OUTLET FILTER DEVICE] INSTALLED.

SIGNATURE OF LICENSED CONTRACTOR: [Signature] BUSINESS NAME: Angela Santos DATE: 10/22/21

EXISTING DRAINFIELD INFORMATION

21339 [] SQUARE FEET PRIMARY DRAINFIELD SYSTEM NO. OF TRENCHES [2] DIMENSIONS: _____ X _____
[] SQUARE FEET SYSTEM NO. OF TRENCHES [] DIMENSIONS: _____ X _____
TYPE OF SYSTEM: [] STANDARD [] FILLED [] MOUND []
CONFIGURATION: [] TRENCH [] BED []
DESIGN: [] HEADER [] D-BOX [] GRAVITY SYSTEM [] DOSED SYSTEM
ELEVATION OF BOTTOM OF DRAINFIELD IN RELATION TO EXISTING GRADE 42" INCHES [ABOVE / BELOW]

SYSTEM FAILURE AND REPAIR INFORMATION

[] SYSTEM INSTALLATION DATE TYPE OF WASTE [1] DOMESTIC [] COMMERCIAL
[] GPD ESTIMATED SEWAGE FLOW BASED ON [] METERED WATER [] TABLE 1, 64E-6, FAC
SITE [] DRAINAGE STRUCTURES [] POOL [] PATIO / DECK [] PARKING
CONDITIONS: [] SLOPING PROPERTY []
NATURE OF FAILURE: [] HYDRAULIC OVERLOAD [] SOILS [] MAINTENANCE [] SYSTEM DAMAGE
[] DRAINAGE / RUN OFF [] ROOTS [] WATER TABLE []
FAILURE SYMPTOM: [] SEWAGE ON GROUND [] TANK [] D BOX/HEADER [] DRAINFIELD
[] PLUMBING BACKUP []

REMARKS/ADDITIONAL CRITERIA: Tank is root bound and collapsing needs to be replaced

SUBMITTED BY: [Signature] TITLE/LICENSE: SRC890160 DATE: 10/22/21
DH 4015, 08/09 (Obsoletes previous editions which may not be used)
Incorporated 64E-6.001, FAC