



## **PUBLIC WORKS – SERVICE OPERATIONS**

**DATE:** October 17, 2016  
**FROM:** Jeff Heintz, Director of Service Operations   
**ITEM:** Change Orders for Subtitle “D” Landfill MSW Pit Expansion

### **REQUEST**

Consider and approve Change Orders with Northern Improvement for Subtitle “D” Landfill MSW Pit Expansion.

Please place this item on the October 25, 2016 City Commission meeting.

### **BACKGROUND INFORMATION**

The east side construction of Municipal Solid Waste Cell #3 is nearing its completion. We would like to add twelve inches of wood chips to the sand base to protect the liner from puncture during the initial phase of adding garbage. Traditionally we have placed the wood chips after the project was completed. I would ask that since Northern Improvement is on site, we add Change Order 1 to the contract. Adequate funds are available to cover this change order amount.

Change Order 2 is for extension of time line to accommodate the work in Change Order 1.

### **RECOMMENDED CITY COMMISSION ACTION**

Consider and approve Change Orders with Northern Improvement for Subtitle “D” Landfill MSW Pit Expansion.

### **STAFF CONTACT INFORMATION**

Jeff Heintz, Director of Service Operations, 355-1700, [jheintz@bismarcknd.gov](mailto:jheintz@bismarcknd.gov)

# CONTRACT CHANGE ORDER FORM

## DEPARTMENT

Contract between the City of Bismarck and Northern Improvement Co.

Contract Number: 2016-43 Change Order Number: 1

Project/Subproject: LF 2016-01 Original Contract Amt: \$ 811,318.28

Project Description: Subtitle "D" Landfill MSW Pit Expansion

Previous Contract Amount: \$ 811,318.28

Change Order Amount: \$ 45,519.60

Original Contract Date: Sept 7, 2016 Change in Contract Timeline: -

Within Project Scope: Y / N\* Within Project Funding: Y / N\*\*

\*If not within project scope, attach description of change in scope for Board approval.

\*\*If not within project funding, attach revised Project Budget for Board approval.

## Type of Change Order

Non Design-related Change Order: These change orders include unforeseen conditions, code-related issues, and building inspector changes.

Design-related Change Order: These change orders include unforeseen conditions that affect the appearance, layout, functionality, dimensions, and/or quality of the project.

Emergency Field Condition Change Orders: These change orders include any condition that causes an emergency situation where safety or other immediate losses may occur.

Other: (describe Judicious time/money saving opportunity with contractor availability)

Project Manager Signature: (<\$15,000) Dwight W Wright Date 10/14/2016

Department Head Signature: (<\$25,000) [Signature] Date 10/17/16

## ADMINISTRATION

City Administrator Signature: (<\$50,000) [Signature] Date 10-17-16

Add to Commission Consent Agenda

## COMMISSION APPROVAL

Commission Approval Date: \_\_\_\_\_

Attach minutes for Commission Approval

## FISCAL

Comments: \_\_\_\_\_  
Signature Date Completed

**TO ALL DEPARTMENTS:** Please attach a copy of the change order





# CONTRACT CHANGE ORDER FORM

## DEPARTMENT

Contract between the City of Bismarck and Northern Improvement Inc \_\_\_\_\_

Contract Number: 2016-043 \_\_\_\_\_ Change Order Number: 2 \_\_\_\_\_

Project/Subproject: SWDUTIL.LANDFILL.PHS3EASTHALF Original Contract Amt: \$811,318.28 \_\_\_\_\_

Project Description: Construction of MSW Cell #3 East side \_\_\_\_\_

Previous Contract Amount: \$856,837.88 \_\_\_\_\_

Change Order Amount: 0 \_\_\_\_\_

Original Contract Date: 8/23/2016 \_\_\_\_\_ Change in Contract Timeline: 12/31/2016 \_\_\_\_\_

Within Project Scope: Y / N\*

Within Project Funding: Y / N\*\*

*\*If not within project scope, attach description of change in scope for Board approval.*

*\*\*If not within project funding, attach revised Project Budget for Board approval.*

## Type of Change Order

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Emergency Field Condition Change Orders: These change orders include any condition that causes an emergency situation where safety or other immediate losses may occur.

Other: (describe) \_\_\_\_\_

Project Manager Signature: (<\$15,000) \_\_\_\_\_

Department Head Signature: (<\$25,000)  \_\_\_\_\_

Date

10/20/16

Date

## ADMINISTRATION

City Administrator Signature: (<\$50,000) \_\_\_\_\_

Date

Add to Commission Consent Agenda

## COMMISSION APPROVAL

Commission Approval Date: \_\_\_\_\_

Attach minutes for Commission Approval

## FISCAL

Comments: \_\_\_\_\_

Signature

Date Completed

**TO ALL DEPARTMENTS:** Please attach a copy of the change order