



# AIA® Document G701™ – 2017

## Change Order

**PROJECT:** *(Name and address)*  
Webb County Medical Examiner  
7210 Saunders St. Laredo, Tx. 78041

**CONTRACT INFORMATION:**  
Contract For: General Construction  
Date: November 23, 2020

**CHANGE ORDER INFORMATION:**  
Change Order Number: 006  
Date: 6/28/2021

**OWNER:** *(Name and address)*  
WEBB COUNTY PURCHASING

**ARCHITECT:** *(Name and address)*  
REDLINE ARCHITECTURE, LLC.

**CONTRACTOR:** *(Name and address)*  
QUANTCORP CONSTRUCTION, LLC.

1110 WASHINGTON STREET SUITE  
101  
LAREDO TX. 78040.

119 FLORES AVE. SUITE 200  
LAREDO, TX. 78040

6548 SPRINGFIELD AVE.  
SUITE. 101 LAREDO TX. 78041

**THE CONTRACT IS CHANGED AS FOLLOWS:**

*(Insert a detailed description of the change and, if applicable, attach or reference specific exhibits. Also include agreed upon adjustments attributable to executed Construction Change Directives.)*

Credit to change cold room 48" x 84" sliding door to 48" x 84" hinged door:

**Credit: \$5,785.00**

The original Contract Sum was	\$	621,740.37
The net change by previously authorized Change Orders	\$	58,435.07
The Contract Sum prior to this Change Order was	\$	680,175.44
The Contract Sum will be decreased by this Change Order in the amount of	\$	5,785.00
The new Contract Sum including this Change Order will be	\$	674,390.44

The Contract Time will be increased by Zero (0) days.  
The new date of Substantial Completion will be October 27,2021

**NOTE:** This Change Order does not include adjustments to the Contract Sum or Guaranteed Maximum Price, or the Contract Time, that have been authorized by Construction Change Directive until the cost and time have been agreed upon by both the Owner and Contractor, in which case a Change Order is executed to supersede the Construction Change Directive.

**NOT VALID UNTIL SIGNED BY THE ARCHITECT, CONTRACTOR AND OWNER.**

_____ ARCHITECT <i>(Firm name)</i>	Quantcorp Construction, LLC _____ CONTRACTOR <i>(Firm name)</i>	_____ OWNER <i>(Firm name)</i>
_____ SIGNATURE	 _____ SIGNATURE	_____ SIGNATURE
_____ PRINTED NAME AND TITLE	Juan J. Vazquez _____ PRINTED NAME AND TITLE	_____ PRINTED NAME AND TITLE
_____ DATE	6/28/2021 _____ DATE	_____ DATE