

# AIA® Document G701® – 2017

## Change Order

**PROJECT:** *(Name and address)*  
 St. Martin CTE Expansion  
 11300 Yellow Jacket Road  
 Ocean Springs, MS 39564

**CONTRACT INFORMATION:**  
 Contract For: General Construction  
 Date: August 20, 2024

**CHANGE ORDER INFORMATION:**  
 Change Order Number: 001  
 Date: December 20, 2024

**OWNER:** *(Name and address)*  
 Jackson County School District  
 4700 Colonel Vickrey Road  
 Vancleave, MS 39565

**ARCHITECT:** *(Name and address)*  
 MP Design Group  
 918 Howard Avenue, Suite F  
 Biloxi, MS 39530

**CONTRACTOR:** *(Name and address)*  
 D.N.P., Inc.  
 P.O. Box 6399  
 D'Iberville, MS 39540

**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.)*

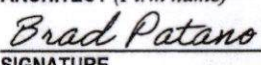
This Change Order is to provide and install the added equipment to the project as requested in WCPR 04.

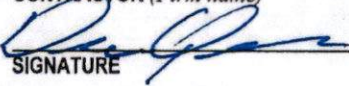
The original Contract Sum was	\$ 5,691,000.00
The net change by previously authorized Change Orders	\$ 0.00
The Contract Sum prior to this Change Order was	\$ 5,691,000.00
The Contract Sum will be increased by this Change Order in the amount of	\$ 161,640.36
The new Contract Sum including this Change Order will be	\$ 5,852,640.36

The Contract Time will be unchanged by Zero (0) days.  
 The new date of Substantial Completion will be N/A

**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.**

MP Design Group  
 ARCHITECT *(Firm name)*  
  
 SIGNATURE  
 Brad Patano, P.E., Principal  
 PRINTED NAME AND TITLE  
 December 20, 2024  
 DATE

D.N.P., Inc.  
 CONTRACTOR *(Firm name)*  
  
 SIGNATURE  
 Darren Quave, President  
 PRINTED NAME AND TITLE  
 12-23-24  
 DATE

Jackson County School District  
 OWNER *(Firm name)*  
 \_\_\_\_\_  
 SIGNATURE  
 David Baggett, Superintendent  
 PRINTED NAME AND TITLE  
 \_\_\_\_\_  
 DATE

