



ARCHITECTURE
PROJECT MANAGEMENT
INTERIOR DESIGN

July 11, 2016

Ms. Maria "Lulu" Lucio
Executive Assistant
Hidalgo County Precinct 4
1051 North Doolittle Road
Edinburg, Texas 78542

Hidalgo County – Precinct 4 – Linn-San Manuel Emergency Services Facility

Ms. Lucio:

We enclose the following:

- Change Order No. 9 – deleting the exterior signage from the signage allowance.

If you have any questions, feel free to call.

Thanks,

Hector Rene Garcia
Architect / Partner





AIA Document G701™ – 2001

Change Order

PROJECT (Name and address):	CHANGE ORDER NUMBER: 009	OWNER: <input checked="" type="checkbox"/>
Hidalgo County Pct. No. 4 Linn-San Manuel Emergency Services Facility Linn - San Manuel Texas	DATE: June 22, 2016	ARCHITECT: <input checked="" type="checkbox"/>
TO CONTRACTOR (Name and address):	ARCHITECT'S PROJECT NUMBER: 201310	CONTRACTOR: <input checked="" type="checkbox"/>
JCon Construction LLC 604 Palmview Dr. Mission, Tx. 78574	CONTRACT DATE: August 05, 2014	FIELD: <input type="checkbox"/>
	CONTRACT FOR: General Construction	OTHER: <input type="checkbox"/>

THE CONTRACT IS CHANGED AS FOLLOWS:

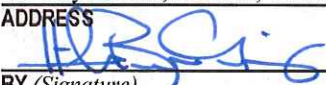
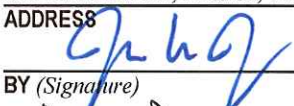
(Include, where applicable, any undisputed amount attributable to previously executed Construction Change Directives)
Deletion of exterior signage and installation, credit to contract of \$2,106.00

The original Contract Sum was	\$ 1,350,000.00
The net change by previously authorized Change Orders	\$ 3,010.20
The Contract Sum prior to this Change Order was	\$ 1,353,010.20
The Contract Sum will be decreased by this Change Order in the amount of	\$ 2,106.00
The new Contract Sum including this Change Order will be	\$ 1,350,904.20

The Contract Time will be unchanged by Zero (0) days.
The date of Substantial Completion as of the date of this Change Order therefore is April 17, 2015

NOTE: This Change Order does not include changes in the Contract Sum, Contract Time or Guaranteed Maximum Price which 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.

<u>Mata+Garcia Architects LLP</u> ARCHITECT (Firm name)	<u>JCon Construction LLC</u> CONTRACTOR (Firm name)	<u>County of Hidalgo / Precinct No. 4</u> OWNER (Firm name)
<u>1314 Ivy Avenue, McAllen, Tx. 78501</u> ADDRESS	<u>604 Palmview Dr., Mission, Tx. 78575</u> ADDRESS	<u>1051 N. Doolittle Road, Edinburg Tx 78542</u> ADDRESS
 BY (Signature)	 BY (Signature)	 BY (Signature)
<u>Hector Rene Garcia</u> (Typed name)	<u>Judin Pena</u> (Typed name)	 (Typed name)
<u>June 22, 2016</u> DATE	<u>7-1-2016</u> DATE	 DATE



Change Order

Date: April 27 2016

Change Order

Linn San Manuel Emergency Facility

JCon Construction is providing this change order for additional material and services as stated in this change order.

Description of Work

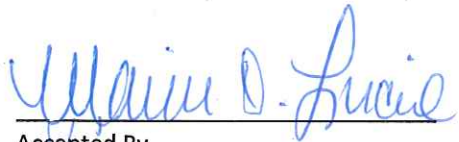
Removal of exterior signage from scope of work as requested by architect.

Total Cost additional work **\$-2,106.0**



Provided By: Jaime Tijerina

4/27/16
Date



Accepted By

7-11-16
Date

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
JCON Construction LLC
Mission, TX United States

Certificate Number:
2016-84714

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Hidalgo County PCT 4

Date Filed:
07/14/2016

Date Acknowledged:

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
C-14-067-06-03
General Construction

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Pena, Juan	Mission, TX United States	X	

5 Check only if there is NO Interested Party.

6 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

[Handwritten Signature]

Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Juan Pena Jr., this the 14 day of July, 2014, to certify which, witness my hand and seal of office.

[Handwritten Signature]

Signature of officer administering oath

Maria D. Garza

Printed name of officer administering oath

Secretary

Title of officer administering oath

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

Complete Nos. 1 - 4 and 6 if there are interested parties.
 Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
 CERTIFICATION OF FILING**

Certificate Number:
 2016-84714

Date Filed:
 07/14/2016

Date Acknowledged:
 07/15/2016

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
 JCON Construction LLC
 Mission, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
 Hidalgo County PCT 4

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.
 C-14-067-06-03
 General Construction

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Pena, Juan	Mission, TX United States	X	

5 Check only if there is NO Interested Party.

6 AFFIDAVIT I swear, or affirm, under penalty of perjury, that the above disclosure is true and correct.

 Signature of authorized agent of contracting business entity

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

 Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath