



**FULTON
COUNTY**

**CHANGE ORDER #1
FORM TO CONTRACT**

**#21RFP22421K-DB
CONSTRUCTION MANAGEMENT AT
RISK SERVICES FOR THE NEW FULTON
COUNTY ANIMAL SHELTER FACILITY**

**DEPARTMENT OF REAL ESTATE AND ASSET
MANAGEMENT**

CHANGE ORDER NO. 1 TO FORM OF CONTRACT

Contractor: **Winter Johnson Group**

Contract No. **21RFP224211K-DB, Construction Management at Risk Services for the New Fulton County Animal Shelter Facility**

Address: **5616 Peachtree Road**
City, State **Chamblee, Georgia 30341**

Telephone: **(404) 790-8985**

E-mail: breid@wintercompanies.com and ajohnson@winterjohnsongroup.com

Contact: **Brent Reid, Managing Member**
Artis L. Johnson, Managing Member

W I T N E S S E T H

WHEREAS, Fulton County ("County") entered into a Contract with **Winter Johnson Group**, to provide/perform Construction Management at Risk Services for the New Fulton County Animal Shelter Facility, dated August 5, 2021, on behalf of the Department of Real Estate and Asset Management; and

WHEREAS, the purpose of this change order is required to make modification to the existing Contract for additional funding due to substantial costs attributable to price escalation for equipment, materials and supplies, scope changes required by regulatory agencies during permitting processes, and unforeseen conditions of developing a raw site for the new construction project for the Fulton County Animal Shelter Facility (FCAS) and

WHEREAS, the Contractor has performed satisfactorily over the period of the contract; and

WHEREAS, this amendment was approved by the Fulton County Board of Commissioners on **November 16, 2022, BOC Item #22-0838**.

NOW, THEREFORE, the County and the Contractor agree as follows:

This Change Order No. 1 to Form of Contract is effective as of the 16th day of November, 2022, between the Winter Johnson Group, who agree that all Services specified will be performed in accordance with this Change Order No. 1 of Form of Contract and the Contract Documents.

SCOPE OF WORK TO BE PERFORMED: Modify the existing Contract for additional funding due to substantial costs attributable to price escalation for equipment, materials and

supplies, scope changes required by regulatory agencies during permitting processes, and unforeseen conditions of developing a raw site for the new construction project for the Fulton County Animal Shelter Facility (FCAS). Though these additional costs are specific to the Animal Services Facility Project, they are representative of inflationary price escalations, delays in equipment and materials deliveries, and labor shortages now seen throughout the construction industry.

Details of the additional costs prompting this Change Request are shown in the following:

	Owner's Contingency Balance	\$20,621.00	Balance as of 7/5
1	Design Revisions 1, 2 & 3 (Part Two)	\$91,852	User Requested Front Fencing & Additional Data/Camera Locations & Window Flashing Design Revisions
2	Canopy VE Reconciliation	\$226,048	Sub-Contractor Pricing Error reduced previously accepted Value Engineering Item & Steel Cost Escalation
3	Barn Escalation	\$37,716	Price Escalation Request from Selected Barn Manufacturer
4	Price Escalation as of 5/26	\$1,188,331	Price Escalation Requests for Equipment, Materials & Supplies from 19 Sub-Contractors as of 5/26
5	Animal Equipment/ Stainless Steel Escalation	\$413,372	Price Escalation in Stainless Steel Kennels vs Aluminum & Specialty Veterinary Equipment
6	Extended General Conditions	\$158,000	Design Revisions to accommodate FAA required Underground Detention System & resolve COA Water Pipe Location issue delaying receipt of LDP and extending Construction Commencement to 7/15
7	COA Impact Fees	\$28,846	County reportedly non-exempt from COA Impact Fees on new building construction. Fees negotiated from \$165,727 to \$28,846
8	Replenish Owner's Contingency	\$679,379	
Total Order Change Request		\$2,823,544.00	

This Change Order is necessary in requesting additional funding to prevent the disruption in the process and enabling the completion the construction for the new 58,000 square foot Fulton County Animal Services Facility located at 1251 Fulton Industrial Boulevard, Atlanta, Georgia 30318.

2. **COMPENSATION:** The services described under Scope of Work herein shall be performed by Contractor for a total amount not to exceed **\$2,823,544.00** (Two Million Eight Hundred Twenty-Three Thousand Five Hundred Forty-Four Dollars and No Cents).
3. **LIABILITY OF COUNTY:** This Change Order No. 1 to Form of Contract shall not become binding on the County and the County shall incur no liability upon same until such agreement has been executed by the Chair to the Commission, attested to by the Clerk to the Commission and delivered to Contractor.
4. **EFFECT OF CHANGE ORDER NO. 1 TO FORM OF CONTRACT:** Except as modified by this Change Order No. 1 to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

[INTENTIONALLY LEFT BLANK]

IN WITNESS THEREOF, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and their corporate seals to be hereunto affixed as of the day and year date first above written.

OWNER:

CONSULTANT:

FULTON COUNTY, GEORGIA

WINTER JOHNSON GROUP

DocuSigned by:

Robert L. Pitts

Robert L. Pitts, Chairman
Fulton County Board of Commissioners

DocuSigned by:

Brent Reid

Brent Reid, Managing Member

DocuSigned by:

Artis Johnson

Artis Johnson, Managing Member



ATTEST:

ATTEST:

DocuSigned by:

Tonya R. Grier

Tonya R. Grier
Clerk to the Commission

(Affix County Seal)



APPROVED AS TO FORM:

DocuSigned by:

Ralph Mumme

Secretary/
Assistant Secretary

(Affix Corporate Seal)



ATTEST:

DocuSigned by:

[Signature]

Office of the County Attorney

APPROVED AS TO CONTENT:

DocuSigned by:

Joseph N. Davis

Joseph N. Davis, Director
Department of Real Estate and Asset
Management

ITEM#: 2022-0838	RCS: 11/16/2022	ITEM#: _____	RM: _____
RECESS MEETING		REGULAR MEETING	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
10/24/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Greyling Ins. Brokerage/EPIC 3780 Mansell Road, Suite 370 Alpharetta, GA 30022	CONTACT NAME: Jerry Noyola PHONE (A/C, No, Ext): 770-220-7699	FAX (A/C, No):	
	E-MAIL ADDRESS: jerry.noyola@greyling.com		
INSURED Winter Johnson Group, A Joint Venture; 5616 Peachtree Road; Suite 100 Atlanta, GA 30341	INSURER(S) AFFORDING COVERAGE		NAIC #
	INSURER A : Zurich American Insurance Co		16535
	INSURER B : Starr Indemnity and Liability Company		38318
	INSURER C : American Zurich Insurance Company		40142
	INSURER D : Allied World Assurance Company (U.S.)		19489
	INSURER E :		
INSURER F :			

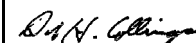
COVERAGES CERTIFICATE NUMBER: 22-23 REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:			GLO551426405	11/01/2022	11/01/2023	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 \$
C	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			BAP551426505	11/01/2022	11/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> EXCESS LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 0			1000584504221	11/01/2022	11/01/2023	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	WC551426305	11/01/2022	11/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Prof. Liab. incl. Pollution Liab.			03131181	11/01/2022	11/01/2023	Per Claim: \$10,000,000 Aggregate: \$10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Re: Project #21RFP22421K-DB - CM@Risk Services for the new Fulton County Animal Shelter Facility. Fulton County Government, Its Officials, Officers & Employees are named as Additional Insureds with respects to General Liability where required by written contract. The above referenced liability policies with the exception of workers compensation and professional liability are primary & non-contributory where required by written contract. Waiver of Subrogation in favor of Additional Insured(s) where required by written contract & allowed by law.

CERTIFICATE HOLDER Fulton County Government Purchasing Department 130 Peachtree Street S.W., Suite 1168 Atlanta, GA 30303-3459	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
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