FACPAC PO Change Order Supplemental Information Form (Ref# 61662)

Form Status: Saved

Tier 1 Project: CHHS Phase 2

BG Number: 23-403

Status: Active

District: Hardin County (HB678) (231)

Phase: Project Initiation (View Checklist)

Contract: TMP Construction, 0009, Resilient Floors
Type: CM Bid Package Proposed

Purchase Order Number: 9-2 Vendor Name: Nora Systems, Inc.

Change Order Number

9-2-1

Time Extension Required

No

Date Of Change Order

1/23/2025

Change Order Amount To Date

Construction Contingency

Calculations below are project wide. Remaining negative Construction Contingency may require the submission of a revised BG1.

Current Approved Amount

\$2,026,223.39

Net Approved COs

\$1,924.53

Remaining After Approved COs

\$2,024,298.86

Net All COs

\$467,457.14

Remaining After All COs

\$1,558,766.25

This Requested Change Order Amount \$475,000.00

+/-

Change In A/E Fee This Change Order \$0.00

+/-

Change In CM Fee This Change Order \$0.00

+/-

Remaining Construction Contingency \$2,033,766.25

Balance

Contract Change Requested By

Contract Change Reason Code

Change Supplier

Change Order Description And Justification

Change order being written to zero out Purchase Order written to Ted McCain as they are no longer in the Distribution business. Remaining balance of Ted McCain PO will be Allocated to Nora via this change order.

Cost Benefit To Owner

Contract unit prices have been utilized No to support the cost associated with this change order.

Detailed Cost Breakdown

Contract unit prices have not been utilized, provide a detailed cost breakdown which separates labor, material, profit and overhead.

Detail Item	Amount	Percent of Total
Labor		0.00%
Materials	\$475,000.00	100.00%
Profit and Overhead		0.00%
Bond Insurance		0.00%
Cost Breakdown Total:	\$475,000.00	
Cost for this Change Order supported No		
by an alternate bid or competitive price		
quote		
Explain Why		

Change Order Supplemental Information Form Signature Page (Online Form Ref# 61662)

Date
Date
Date
Date



Change Order - Construction Manager-Adviser Edition

OWNER ⊠
CONSTRUCTION MANAGER
ARCHITECT 🗌
CONTRACTOR
FIELD 🗌
OTHER 🗍

PROJECT (Name and Address) CENTRAL HARDIN HS PHASE II 3040 LEITCHFIELD ROAD CECILIA, KY 42724

TO CONTRACTOR (Name and Address) NORA SYSTEMS, INC.

CHANGE ORDER NUMBER: 9-2-1 INITIATION DATE: 1/23/2025

PROJECT NUMBERS: 000826

CONTRACT DATE:

CONTRACT FOR: PURCHASE ORDER #09-02

THE CONTRACT IS CHANGED AS FOLLOWS: Change order being written to zero out Purchase Order written to Ted McCain as they are no longer in the Distribution business. Remaining balance of Ted McCain PO will be Allocated to Nora via this change order.

The original Contract Sum was Net change by previously authorized Change Orders The Contract Sum prior to this Change Order was The Contract Sum will be Increased by this Change Order in the amount of The new Contract Sum including this Change Order will be

0.00 0.00 0.00 475,000.00

475,000.00

The Contract Time will be adjusted by 0 days. The date of Substantial Completion as of the date of this Change Order therefore is :

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

CODELL CONSTRUCTION COMPANY		JRA ARCHITECTS						
CONSTRUCTION MANAGER (Firm Name) 4475 ROCKWELL ROAD WINCHESTER, KY 40391		ARCHITECT (Firm Name) 3225 SUMMIT SQUARE PLACE, SUITE 200 LEXINGTON, KY						
ADDRESS Steven Osborne		ADDRESS D. Robert Deal 2025.01.23 14:05:47-05'00'						
BY (Signature)		BY (Signature)						
(Typed Name)	DATE:	(Typed Name)	DATE:					
NORA SYSTEMS, INC.		HARDIN COUNTY BOARD OF	EDUCATION					
CONTRACTOR (Firm Name) 9N Ortheastern Blud, Salem, NH		OWNER (Firm Name) 65 W. A. JENKINS ROAD ELIZABETHTOWN, KY 42701						
ADDRESS	. 0307	9 ADDRESS						
BY (Signature)		BY (Signature)						
(Typed Name)	- 3/6/25 DATE:	(Typed Name)	DATE:					

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(1884033357)

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Phone (502) 584-7181 Fax (502) 589 - 9469

TED MCCAIN COMPANY

NOORPORATED

Carpet / Resilient Flooring and Acoustical Contracting 208 E. MARKET ST. LOUISVILLE, KENTUCKY 40202

October 14, 2024

To Whom it May Concern:

Ted McCain Company hereby requests that DPO #53240 for Bid Package #9 be cancelled immediately so that TMP Construction can establish DPO's with other suppliers and / or vendors to purchase the materials needed for the Central Hardin High School Phase II project.

Ted McCain Company is no longer in the distribution business.

Please contact me with questions or concerns.

Sincerely,

Alesha McKinnev

President 502-584-7181

amckinney@tedmccainco.com

FACPAC Purchase Order Form (Ref# 53240)

Form Status: Saved

Tier 1 Project: CHHS Phase 2

BG Number: 23-403

Status: Active

District: Hardin County (HB678)
Phase: Project Initiation (View Checklist)

Contract: TMP Construction, 0009, Resilient Floors
Type: CM Bid Package Proposed

District PO Number

9-1

Ky Sales Tax Exempt Number

B-1005 1/29/2024

Date of Order Specification Section

090000

Material Description / Category

Resilient Flooring

Requested By

TMP Construction

Vendor Name

Ted McCain Company, Inc.

Vendor Address

208 East Market Street Louisville, KY 40202

Vendor Phone

502-584-7181

Vendor Email

amckinney@tedmccainco.com Hardin County Board of Education

Bill To

Bill To Address

C/O TMP Construction

11513 Commonwealth Drive, Suite 200

Louisville, KY 40299

Ship To

Central Hardin High School

Ship To Address 3040 Leitchfield Road

Cecilia, KY 42724

Attention Of

TMP Construction

Contacts

The following project contacts must be notified 48 hours in advance of delivery to jobsite.

Contact Name

Contact Phone

Mark Mitchell

502-384-7059

Materials

Furnish the necessary materials to complete the following bid package(s) / specification section(s) in its entirety. All materials shall be in accordance with the requirements of the Contract.

Item Description	Item Number	Quantity	Unit Price	Total
Resilient Base, Tile & Accessories, Tile Carpeting & Accessories		1	\$475,000.00	\$475,000.00
		Purcha	se Order Total:	\$475,000.00

Authorization

Owner Authorization Date Vendor Authorization Date

Purchase Order Signature Page (Online Form Ref# 53240)

Justu Merran Vendor

Date

Owner

Date

Terms and Conditions

- 1. Drawings, catalogs, cut sheets, or samples shall be submitted for approval.
- 2. All invoices shall be sent to the contractor/subcontractor designated on the purchase order for approval. No invoices shall be sent directly to the Board of Education (Owner) for payment.
- 3. All invoices shall reference the purchase order number.
- 4. No change in, modification of, or revision of this order shall be valid unless in writing and signed by the Owner.
- 5. Vendor agrees to observe and comply with all applicable federal, state and locals laws, rules, ordinances and regulations in performance of this order.
- 6. Vendor shall not assign this order or any right hereunder without first having obtained the written consent of the Owner.
- 7. Deliveries are to be made in accordance with the Owner's schedule, as directed by the General Contractor (GC), Construction Manager (CM) or Qualified Provider (QP).
- 8. The Owner may cancel this purchase order in whole or in part in the event that the vendor fails or refuses to deliver any of the items purchased, within the time provided, or otherwise violates any of the conditions of this purchase order, or if it becomes evident that the vendor is not providing materials in accordance with the specifications or with such diligence as to permit delivery on or before the delivery date.
- 9. The vendor agrees to deliver the items to the supplied hereunder free and clear of all liens, encumbrances and claims.
- 10. If any of the goods covered under this purchase order are found to be defective in material or workmanship, or otherwise not in conformity with the requirements of this order, the Owner, in addition to the other rights which it may have under warranty or otherwise, shall have the right to reject the same or require that such articles or materials be corrected or replaced promptly with satisfactory materials or workmanship.
- 11. By acknowledging receipt of this order, by performing the designated work or any portion thereof, or by shipping the designated goods, the vendor agrees to the terms and conditions outlined.
- 12. This purchase order shall be governed in all respects by the laws of the Commonwealth of Kentucky.

- 13. In the event the quantities of materials supplied via this purchase order are insufficient to complete the work, the GC, CM or QP shall, at no expense to the Owner, provide such materials as necessary to complete the work.
- 14. In the event that at the completion of the work the vendor has not submitted invoices totaling the value of this purchase order, this purchase order shall be considered complete and closed.

Department of the Treasury Internal Revenue Service

Request for Taxpayer Identification Number and Certification

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

Give Form to the requester. Do not send to the IRS.

	1 Name (as shown on your income tax return). Name is required on this line; do	not leave this line blank.									
	L & W Supply Corporation										
1	2 Business name/disregarded entity name, if different from above										
page 3.	3 Check appropriate box for federal tax classification of the person whose name following seven boxes.	name is entered on line 1. Check only one of the certain entities, not in instructions on page				indiv	ndividuals; see				
s on g	☐ Individual/sole proprietor or single-member LLC ☐ C Corporation ☐ S Corporation				Exempt payee code (if any) 5						
i i y	Limited liability company. Enter the tax classification (C=C corporation, S=	S corporation, P=Partnership)	▶								
Print or type. Specific Instructions on	Note: Check the appropriate box in the line above for the tax classification of the single-member of LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member of the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of its owner should check the appropriate box for the tax classification of the single-member of the tax classification of tax classificatio			r owner. Do not check ne owner of the LLC is single-member LLC that					ion from FATCA reporting any) N/A		
ij	Other (see instructions)				(Applies to accounts maintained outside the U.S.)						
Špe	5 Address (number, street, and apt. or suite no.) See instructions.	Req	uester's	er's name and address (optional)							
	300 S Riverside Plaza, Suite 200										
σ	6 City, state, and ZIP code										
	Chicago, IL 60606										
	7 List account number(s) here (optional)										
Par	Taxpayer Identification Number (TIN)										
Enter	your TIN in the appropriate box. The TIN provided must match the name	e given on line 1 to avoid	Soc	cial secu	rity nu	mber					
hacku	n withholding. For individuals, this is generally your social security number	ber (SSN). However, for a			T	T	1		\neg		
rocido	at alien, sole proprietor, or disregarded entity, see the instructions for P	art I. later. For other					-		- 1		
	it alief, sole proprietor, or disregarded orthly, see the mode not have a ni s, it is your employer identification number (EIN). If you do not have a ni	umber, see How to get a	or				4	_			
TIN, later.			ployer id	lentific	ation	num	er				
Note: If the account is in more than one name, see the instructions for line 1. Also see <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.					T	T		T	=		
1101112	are are requested the generalise		3	6 -	2	7 1	8	9	8	6	
Dow	Certification						-	-	_		
Par	11 C 1-2-3 V D 10 C 1-4 T 2 D 1 V D										
Under	penalties of perjury, I certify that: number shown on this form is my correct taxpayer identification numb	er (or Lam waiting for a nu	mber to	be issu	ed to	me): a	and				
2. I an Ser	in not subject to backup withholding because: (a) I am exempt from backing (IRS) that I am subject to backup withholding as a result of a failure onger subject to backup withholding; and	kun withholding, or (b) I ha	ve not b	een no	tified t	ov the	ınte	rnal F ed m	Reve e tha	nue at I am	
3. I an	a U.S. citizen or other U.S. person (defined below); and FATCA code(s) entered on this form (if any) indicating that I am exemp	t from FATCA reporting is	correct.								
4. Ine	cation instructions. You must cross out item 2 above if you have been no	tified by the IRS that you are	current	tly subje	ct to t	ackur	with	holdi	na b	ecause	
you ha	ve failed to report all interest and dividends on your tax return. For real esta ition or abandonment of secured property, cancellation of debt, contribution than interest and dividends, you are not required to sign the certification, but	ate transactions, item 2 doe: ons to an individual retiremer	s not ap nt arranc	piy. For gement	mortg IRA), a	age in	nera	lly, pa	ı, ıyme	ints	
Sign Here	Signature of U.S. person ▶	Date	▶ 1/2	2/202	4						
Gei	neral Instructions	 Form 1099-DIV (divider funds) 	nds, inc	luding t	hose f	rom s	tock	s or r	nutu	al	
Section references are to the Internal Revenue Code unless otherwise noted. • Form 1099-MISC (various types of income, prize proceeds)		prizes	, aw	ards,	or g	ross					
Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted		Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)									
after they were published, go to www.irs.gov/FormW9.		Form 1099-S (proceeds from real estate transactions) Form 1099-K (merchant card and third party network transactions)									
Pur	pose of Form										
inform	ividual or entity (Form W-9 requester) who is required to file an ation return with the IRS must obtain your correct taxpayer	 Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition) 							rest),		
identif	ication number (TIN) which may be your social security number individual taxpayer identification number (ITIN), adoption	Form 1099-C (canceled							 . A		
(SON)	reridentification number (ATIN), or employer identification number	Form 1099-A (acquisition)									
(EIN), amou	to report on an information return the amount paid to you, or other nt reportable on an information return. Examples of information	Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.									
	s include, but are not limited to, the following.	If you do not return Fo be subject to backup wit	rm W-9	to the	reques	s bac	tn a	vithh	oldir	rnignt na.	
• Form 1099-INT (interest earned or paid) be subject to back			molum	g. 066	VIII GLE	Juac	rub)	estant.	J.J.	יפי	

later.