



The School Board of Broward County, Florida
Facilities and Construction Management
1700 Southwest 14th Court
Fort Lauderdale, FL 33312

Phone: (754) 321-1500

(This form can only be used for Unforeseen Conditions)

Document 01250h: Contingency Use Directive

To:

Directive No.: _____ **Date:** _____

(Construction Manager)

Project No:

Project Title:

Facility

Name:

(One Directive per form)

Description of Directed Change:

You are hereby directed to make the following change(s) requiring the use of contingency funds as authorized in the Agreement with the Construction Manager (CM):

Proposed Adjustments

1. The Proposed adjustment to the Guaranteed Maximum Price Contingency is

☐ Lump Sum ☐ Increase ☐ Decrease of \$ _____
☐ Unit Price of \$ _____ per _____.

2. The Contract Time is proposed to ☐ be adjusted ☐ remain unchanged. The proposed adjustment, if any, is an

☐ increase of _____ days.
☐ decrease of _____ days.

| | | |
|---|---|---|
| When signed by the Project Consultant and the Owner and received by the Construction Manager, this document becomes effective immediately as a Contingency use Directive (CUD) and the CM shall proceed with the change(s) described above. CUD's above \$50,000 require Board Approval prior to disbursement to the CM. | | Signature by the CM indicates Agreement by the CM with the Proposed Adjustments to the GMP Contingency. |
| Project Consultant | Owner – Project Manager | Sr. Project Manager |
| By: _____ Date: _____ | By: _____ Date: _____ | By: _____ Date: _____ |
| Total Program Manager | Executive Director, Project Management | Deputy Superintendent |
| By: _____ Date: _____ | By: _____ Date: _____ | By: _____ Date: _____ |

☐ Construction Manager: Return Signed ☐ Project Consultant ☐ Owner ☐ Other

Copy to:

