

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
SUPPLEMENTAL AGREEMENT

700-010-45
CONSTRUCTION
04/25

Page _____ of _____

Contract _____ SA No. _____ Road No(s). _____

Financial Project ID(s) _____ Federal Aid Project No(s). _____

This Supplemental Agreement entered into on _____, such Agreement to be effective on the last date of execution by a party hereto, by and between the State of Florida Department of Transportation (Department) and _____ (Contractor), and _____ (Surety) the same being supplementary to Contract _____ (Contract) by and between the parties aforesaid, dated _____, for the construction or improvement of the road(s), bridge(s), and/or transportation facilities assigned the project number(s) shown above, in _____ County(ies), Florida.

(1)

Revised Plan Sheet No(s). _____, dated _____, prepared by _____.

- (2) The quantities to be paid shall be determined as provided in the Standard Specification, Edition of _____. The quantities so determined shall be paid at the unit prices stated on the attached sheet.
- (3) It is further agreed that this Supplemental Agreement shall not alter or change in any manner the force and effect of the original Contract, including any previous amendments thereto, except insofar as the same is altered and amended by this Supplemental Agreement.
- (4) The Department and the Contractor agree that the Contract Time adjustment and sum agreed to in this Supplemental Agreement constitute a full and complete settlement of the matters set forth herein, including all direct and indirect costs for equipment, manpower, materials, overhead, profit and delay relating to the issues set forth in the Supplemental Agreement. This settlement is limited to and applies to any claims arising out of or on account of the matters described and set forth in this Supplemental Agreement.

Granted Time this Agreement _____ Days

Net Change in Contract this Agreement: Increase \$ _____ Decrease \$ _____
No Change ☐

Approved By: Secretary or Designee Signature and Date

Executed By: Contractor Signature (SEAL)* and Date

Executed By: Secretary or Designee Signature and Date

Attest: Secretary Signature

Attorney Signature, Department of Transportation, Legal Review

Surety Signature (per 337.11(9)(a), F.S.) (SEAL)* and Date

Signed by Florida Licensed Insurance Agent**

**Seal not required if digitally signed*

***Not required if digitally signed*

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Contract _____ SA No. _____ Road No(s). _____

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(1) (continued):

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(1) (continued):