STATE OF CALIFORNIA • DEPARTMENT OF TRANSPORTATION CHANGE ORDER DOT CEM-4900 (REV 09/2025)		Lock Form		Page 1 of			
		Change Requested By: Contractor Engineer					
ТО		, Contractor	CONTR	RACT NUMBER			
5004		, Contractor	COUN	ITY - ROUTE - Begin Postmile / End Postmile			
FROM			DDO IE	ECT IDENTIFIER NUMBER			
RESIDENT ENGINEER			FIXO3E	ECT IDENTIFIER NOWIBER			
CHANGE ORDER NUMBER	SUPPLEMENT NUMBER		FEDER	RAL NUMBER			
You are directed to make the following chang and specifications for this contract.	les from the plans and spe	cifications or do the	e followii	ring described work not included in the plans			
In accordance with Section 4-1.05, "Char Department of Transportation's interim Enterprise (DBE) program (49 CFR 26 Standard Specifications and Special Pro Section 2-1.12, "Disadvantaged Section 5-1.13B, "Disadvantaged The Notice to Bidders is revised	final rule (IFR) effective), the following modifica visions: Business Enterprises," is I Business Enterprises,"	October 3,2025 tions are made: s deleted in its er is deleted in its e	modify	ying the Disadvantaged Business			
There will be no additional payment to you or credit to the Department as a result of the work described.							
No time adjustment will be made, since the work described in this change order will not result in a critical delay.							

STATE OF CALIFORNIA • DEPARTMENT CHANGE ORDER	OF TRANSPORTATION		Page 2 of						
DOT CEM-4900 (REV 09/2025)				Change Requested By: Contractor Engineer					
ТО				CONTRACT NUMBER					
			, Contractor	COUNTY DOUTE Davis	Destroite / Ford Destroite				
FROM				COUNTY - ROUTE - Begin Postmile / End Postmile					
				PROJECT IDENTIFIER NUMBER					
RESIDENT ENGINEER									
CHANGE ORDER NUMBER	R NUMBER SUPPLEMENT NUMBER			FEDERAL NUMBER					
CHANGE ORDER SUMMARY									
Estimated Cost: \$ Increase Decrease No Cost			For this order, the	r this order, the time of completion will be adjusted as follows:					
			days	☐ Increase ☐ Decrease					
			No Time Adjustment Time Adjustment Deferred						
	REQUIR	ED FOR ALI	L CHANGE ORDE	RS					
I agree that by providing my electronic signature is the legal binding equivale authentication of this form, and my into	nt to my handwritten s								
SUBMITTED BY									
SIGNATURE		PRINT NAME AND TITLE			DATE				
RECOMMENDED APPROVAL BY									
SIGNATURE		PRINT NAME AND TITLE			DATE				
CONTRACTOR ACCEPTANCE BY					·				
We, the undersigned Contractor, have perform the work specified above, and					nt, furnish materials, and				
SIGNATURE		PRINT NAME AND TITLE			DATE				
This change order is not effective u	intil approved by the	Engineer. I	f you do not sign	this order and you receive	an approved change				

order, you are directed to proceed with the ordered work. You may file a Request for Information within the time specified.

CHANGE ORDER APPROVAL

ENGINEER APPROVAL BY SIGNATURE PRINT NAME AND TITLE DATE