



May 12, 2025

Kim Arnold
Broaddus & Associates
2330 Bloomdale Rd
McKinney, TX 75071

Subject: Collin County Healthcare Facility, Parking Garage, and Medical Examiners
PCO No. 046; Weather Delays April 2025

Dear Kim:

Please find the attached revised Request for Change (PCO) No. 046. This proposal is submitted for a Zero Dollar Change (\$0.00), reflective of the following items:

- **This PCO is requesting a 5-day time extension associated with weather impact days in April 2025.**
- **Please reference the attached Notices of Inclement Weather Delay forms as backup.**
- ***This PCO will be a Zero dollar add to our contract.***

Please sign the attached request for change recap indicating approval of this change.

Sincerely,

Jim Terhune


Jim Terhune
Sr. Project Manager

CC: Bryan Smith , PGAL

Request for Change

Issue No. 046

☐ Collin County

☐ PGAL - Dallas (Addison)

☐ Project Manager

☐ Accounting

Project:

224057- Collin County Medical Campus
2300 Bloomdale Rd
McKinney, TX 75071

Owner :

Collin County
2300 Bloomdale Rd; Suite 3160
McKinney, TX 75071

From:

The Christman Company

Issue No. 046 - April 2025 Weather and Impact Days

Amount

Item: I April 2025 Weather and Impact Days

| Phase | Description | Abbreviation | Amount |
|-------|-------------|--------------|--------|
|-------|-------------|--------------|--------|

Subtotal Item

0.00

Request for Change Total:

\$0.00

Qualifications:

1. This Issue is ☒ Original ☐ Revised ☐ Budget Only ☐ Firm Quotation.

2. Contract time will be ☒ Increased by ☐ Decreased by () work days; ☐ Other: 5 Days

3. The Christman Company ☒ has ☐ has not proceeded with the work, and this Issue must be accepted within () work days.

4. Funded by ☒ Contract change ☐ Allowance ☐ Contingency ☐ Other: _____

Owner and/or Architect Action:

☐ Approved ☐ Proceed as described above (cost and schedule changes to be finalized under a revised Issue)

☐ Rejected ☐ Other: _____

Authorization:

The Owner and/or Architect hereby direct The Christman Company to proceed with the performance of the work as described above and/or in any additional documents referenced herein. It is understood that the amount of this Request for Change, if noted as "Budget Only" under Qualification I., will be revised as necessary upon determination of final costs and included in the next Owner Change Order accordingly. If noted as "Firm Quotation" under Qualification I., the amount of this Request will be included in the next Owner Change Order. In addition, all costs included herein may be included in the next payment application as if they had been included in an Owner Change Order or Construction Change Directive.

Authorized By Owner:

Collin County
2300 Bloomdale Rd; Suite 3160
McKinney, TX 75071

Accepted By Architect

PGAL - Dallas (Addison)
14135 Midway Road, Suite G-200
Addison TX 75001

Submitted By Contractor:

The Christman Company

By: _____

Date: _____

By: Tim Konganda

Date: _____

By: Jim Terhune

Date: _____

NOTICE OF INCLEMENT WEATHER DELAY

GENERAL CONTRACTOR: The Christman Company

PROJECT NAME : Collin County Medical Complex

DATE: 4/3-4/25 (3 cal days) TEMP A.M. 55 TEMP P.M. 64

REASON FOR DELAY

☒ RAIN

3.23" Fire lane prep work stopped. MEB foundation work could not progress.

☐ MUD

☐ ICE / SNOW / FREEZING

☐ WINDY

☐ OTHER

ACTIVITIES DELAYED / IMPACTED

| ACTIVITY NO. | ACTIVITY DESCRIPTION | TOTAL FLOAT |
|--------------|----------------------|-------------|
| | MEB foundations | |
| | Fire Lanes | |
| | | |
| | | |

SIGNED - Project Manager / Superintendent :



SIGNED - Owner Representative / Architect :

AGREE : _____

DISAGREE : _____

TOTAL ACCUMULATED WEATHER DAYS TO DATE : 31

NOTICE OF INCLEMENT WEATHER DELAY

GENERAL CONTRACTOR: The Christman Company

PROJECT NAME : Collin County Medical Complex

DATE: 4/24/25 (1 cal day) TEMP A.M. 66 TEMP P.M. 70

REASON FOR DELAY

- ☒ RAIN 1.03" All work stopped most of the day.
- ☐ MUD _____
- ☐ ICE / SNOW / FREEZING _____
- ☐ WINDY _____
- ☐ OTHER _____

ACTIVITIES DELAYED / IMPACTED

| ACTIVITY NO. | ACTIVITY DESCRIPTION | TOTAL FLOAT |
|--------------|----------------------|-------------|
| | MEB foundations | |
| | Fire Lanes | |
| | | |
| | | |

SIGNED - Project Manager / Superintendent : 

SIGNED - Owner Representative / Architect : _____

AGREE : _____ DISAGREE : _____

TOTAL ACCUMULATED WEATHER DAYS TO DATE : 32

NOTICE OF INCLEMENT WEATHER DELAY

GENERAL CONTRACTOR: The Christman Company

PROJECT NAME : Collin County Medical Complex

DATE: 4/30/25 (1 cal day) TEMP A.M. 61 · TEMP P.M. 73

REASON FOR DELAY

- ☒ RAIN 2.75" All work stopped most of the day.
- ☐ MUD _____
- ☐ ICE / SNOW / FREEZING _____
- ☐ WINDY _____
- ☐ OTHER _____

ACTIVITIES DELAYED / IMPACTED

| ACTIVITY NO. | ACTIVITY DESCRIPTION | TOTAL FLOAT |
|--------------|----------------------|-------------|
| | All activities | |
| | | |
| | | |
| | | |

SIGNED - Project Manager / Superintendent : 

SIGNED - Owner Representative / Architect : _____

AGREE : _____ DISAGREE : _____

TOTAL ACCUMULATED WEATHER DAYS TO DATE : 33