COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

NOTICE OF CONTRACT EXTENSION

# CONTRACT INFORMATION

This notice of extension is in reference to contract [CONTRACT NUMBER AND INFORMATION]. The contract is between the [DEPARTMENT NAME], a department of the Commonwealth of the Northern Mariana Islands and referred to herein as “the Commonwealth,” and [CONTRACTOR NAME]. [CONTRACTOR NAME] is referred to in this contract as the “Contractor.”

# NOTICE OF EXTENSION

Take Notice, The Commonwealth of the Northern Mariana Islands hereby gives notice to [CONTRACTOR NAME] that it wishes to exercise the option to extend the term of the contract for [ENTER AMOUNT OF TIME]. Therefore, the contract will terminate on [ENTER DATE THAT THE CONTRACT WILL END NOW THAT IT IS BEING EXTENDED]. This notice of extension is made pursuant to [ENTER CLAUSE NUMBER IN ORIGINAL CONTRACT THAT ALLOWS FOR EXTENSION] of the Contract.

# GENERAL PURPOSE

The purpose of this extension is for the parties to continue their performance in accordance with the terms and conditions provided for by [CONTRACT NUMBER].

# CONSIDERATION AND SCOPE OF WORK

Contractor agrees to deliver the goods and all other services described in this contract and the documents attached and incorporated into this contract. The Commonwealth agrees to pay the Contractor in accordance with the terms and conditions of the contract and in the amount as follows:

|  |  |
| --- | --- |
| Total cost of Original Contract | $[PLACE THE TOTAL COST OF THE ORIGINAL CONTRACT ] |
| Total cost of Extension of Contract | $[PLACE THE TOTAL COST OF THE NEW EXTENSION. DO NOT INCLUDE THE COST OF THE ORIGINAL CONTRACT IN THIS FIGURE, THIS IS JUST THE COST OF THE EXTENSION]. |

# SIGNATURE REQUIREMENTS

This extension will not be effective until it has been approved by all required signatories, as evidenced by the signature affixed below of each of them, made in the order listed. The extension shall become effective upon receipt of a Notice to Proceed issued by the Commonwealth.

# SIGNATURES

### Expenditure Authority

I declare that I have complied with the Commonwealth procurement regulations; that this extension is for a public purpose; and that the extension does not waste or abuse public funds. I declare that I, personally, have the authority to obligate the expenditure of funds for this extension. I declare under penalty of perjury that the foregoing is true and correct and that this declaration was executed this day on Saipan.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

[EXPENDITURE AUTHORITY NAME] Date:

Expenditure Authority

### Procurement Services

I hereby certify that to the best of my information and belief this contract is in compliance with the CNMI Procurement Regulations, is for a public purpose, the contractor is a responsible contractor, and the contract does not waste or abuse public funds.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brien S. Nicholas Jr. Date

Acting Director of Procurement Services

### Secretary of Finance

I hereby certify that the funds identified below are available and have been committed for funding of this extension to the contract:

Account: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Amount: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Tracy B. Norita Date

Secretary of the Department of Finance

### Attorney General

I hereby certify that this extension to the contract has been reviewed and approved as to form and legal capacity.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Edward Manibusan Date

Attorney General

### Governor

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Arnold I. Palacios Date

Governor

### Contractor – [NAME OF CONTRACTOR]:

On behalf of the Contractor, I represent that I am authorized to bind the Contractor to the terms of this extension to the contract, and by my signature I do hereby accept and bind the Contractor to the terms of this extension to the contract. I further represent for the Contractor that no person associated with the Contractor has retained any person in violation of the Commonwealth Procurement Regulations.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRINTED NAME OF SIGNING AUTHORITY TITLE

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE OF SIGNING AUTHORITY Date

### CERTIFICATION OF CONTRACT COMPLETION

I hereby certify that this contract bears all signatures and is therefore complete.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Brien S. Nicholas Jr. Date

Acting Director of Procurement Services

# END OF EXTENSION DOCUMENT

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Government contract numbers of all related contracts with the Vendor:

Insert Contract Numbers, or NONE

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