



## AGREEMENT SUMMARY

EXHIBIT 1

1. NAME OF OTHER CONTRACTING PARTY: Florida Department of Juvenile Justice		
2. PROPOSED ACTION: <input checked="" type="checkbox"/> NEW <input type="checkbox"/> AMENDMENT, NUMBER <input type="checkbox"/> RENEWAL <input type="checkbox"/> EXTENSION		
3. DOCUMENT: GRANT AGREEMENT		
4. PURPOSE: To provide assessment services for youth who have received a Civil Citation from a law enforcement agency in Broward County, Circuit 17 in accordance with the Broward County Ordinance and the Florida State Statutes.		
5. SPECIAL PROVISIONS (select if applicable) <input type="checkbox"/> LIVING WAGE COVERED SERVICE: <input type="checkbox"/> M/WBE PROGRAM COVERED CONTRACT <input type="checkbox"/> SBE SHELTERED MARKET PROGRAM COVERED CONTRACT <input type="checkbox"/> IN-KIND MATCH OF \$ OR % REQUIRED <input type="checkbox"/> FEDERAL DBE PROGRAM COVERED CONTRACT <input type="checkbox"/> CASH MATCH OF \$ OR % REQUIRED.		
6. EFFECTIVE DATE (new) <input type="checkbox"/> UPON EXECUTION <input checked="" type="checkbox"/> DATE: 5/07/2014 <input type="checkbox"/> SPECIFIC EVENT:	7. END DATE (new) <input checked="" type="checkbox"/> DATE: 4/30/2017 <input type="checkbox"/> SPECIFIC EVENT:	8. EFFECTIVE DATES (amendments only) <input type="checkbox"/> NO CHANGE <input type="checkbox"/> END DATE HAS CHANGED FROM TO <input type="checkbox"/> TERM FROM TO
9. CONTRACT ADMINISTRATOR NAME: REGENIA H. WALKER PHONE: 954-357-7538		10. CONTRACT TYPE <input type="checkbox"/> COST REIMBURSEMENT <input type="checkbox"/> OPEN-END <input checked="" type="checkbox"/> FIRM FIXED PRICE <input type="checkbox"/> TIME AND MATERIALS <input type="checkbox"/> INCENTIVE/PERFORMANCE <input type="checkbox"/> OTHER
11. CONTRACT VALUE (new contracts) <input checked="" type="checkbox"/> ACTUAL <input type="checkbox"/> ESTIMATED Base amount 569,992.50 Reimbursable x Optional Services Total contract value \$569,992.50		12. CONTRACT VALUE (amendments only) <input type="checkbox"/> ACTUAL <input type="checkbox"/> ESTIMATED Original approved contract value Approved previous adjustments Value of this action Amended total contract value
13. PAYMENT METHOD <input type="checkbox"/> ADVANCE PAYMENT <input checked="" type="checkbox"/> SCHEDULED OR TIME-BASED <input type="checkbox"/> LUMP SUM PAYMENT <input type="checkbox"/> OTHER <input type="checkbox"/> MILESTONE / PROGRESS BASED		14. PAYMENT TERMS --\$253.33 per assessment 5/7/14 - 6/30/14 not to exceed \$31,666.25 7/1/14 - 6/30/15 not to exceed \$189,997.50 7/1-15 - 6/30/16 not to exceed \$189,997.50 7/1/16 - 4/30/17 not to exceed \$158,331.25
15. COST ADJUSTMENT <input checked="" type="checkbox"/> NOT APPLICABLE <input type="checkbox"/> FIXED PERCENTAGE % <input type="checkbox"/> ACTUAL COST <input type="checkbox"/> CPI OR OTHER INDEX <input type="checkbox"/> FIXED COST \$ <input type="checkbox"/> OTHER		
16. MINORITY/WOMEN BUSINESS ENTERPRISE / DISADVANTAGED BUSINESS ENTERPRISE PARTICIPATION SUMMARY Total County established M/WBE or DBE participation goal for this action or project: N/A Total contractor-committed M/WBE or DBE participation goal planned for this action or project: N/A M/WBE or DBE participation to date: N/A		
17. RENEWAL OR EXTENSION TERMS	THIS IS A CONTRACT FOR A PERIOD OF THREE (3) YEARS THAT MAY BE RENEWED UPON THE SAME TERMS AND CONDITIONS, THE DURATION(S) OF WHICH MAY NOT EXCEED THE TERM OF THE ORIGINAL CONTRACT, OR THREE YEARS, WHICHEVER IS LONGER AND TO BE AUTHORIZED BY THE COUNTY ADMINISTRATOR SUBJECT TO FUNDING AVAILABILITY.	
18. TERMINATION AND CANCELLATION PROVISIONS	FOR CAUSE: By the Department of Juvenile Justice (DJJ) by giving no less than 30 days written notice to County. FOR CONVENIENCE: Upon thirty (30) calendar days written notice by either party.	
19. DELIVERABLES, MILESTONES OR SCOPE OF THIS ACTION	One Civil Citation Assessment conducted on eligible youth as evidenced by Reports and Packets.	
20. LIST TERMS, CONSIDERATIONS OR DEVIATIONS FROM STANDARD COUNTY FORM.	N/A	