



AGREEMENT SUMMARY

1. Other Contracting Party:

ATKINS NORTH AMERICA, INC.

2. Proposed Action:

New Contract Amendment, Number 1 Renewal Extension

3. Document Type (select one):

Amendment 1

4. Purpose/Description:

To continue to provide Capital Projects Manager (CPM) services for the Port Everglades Seaport Engineering and Construction Division to serve as an extension of the County staff for the construction of the Marine Infrastructure Program (MIP).

5. Special Provisions (select if applicable):

Living Wage Program SBE Sheltered Market Program
 Workforce Investment Pilot Program M/WBE Program
 Federal DBE/ACDBE program In-Kind Match Required: \$ _____ or _____ %
 CBE Program Cash Match Required: \$ _____ or _____ %

6.a. Effective Dates (for new agreements only):

6.b. Effective Dates (amendments only):

No Change
 End date has changed from _____ to _____.
 Term has from _____ to _____.

7. Contract Administrator:

Name: John C. Foglesong, P.E., Enterprise Director, Capital Projects, Port Everglades Department, Seaport Engineering and Construction Division
Phone: 954-468-0142

8. Contract Type:

Cost reimbursement Open-end
 Firm fixed price Time and materials
 Performance-based Other NTE

9.a. Contract Value (new contracts)

Table with 2 columns: Description, Value. Rows: Actual/Estimated, Base amount, Reimbursables, Optional Services, Total contract value.

9.b. Contract Value (amendments only)

Table with 2 columns: Description, Value. Rows: No change/Actual/Estimated, Original approved contract value (\$2,923,500), Approved previous adjustments (0), Value of this action (\$2,910,265), Amended total contract value (\$5,833,765).

10. Payment Method

Lump Sum Payment
 Milestone or Progress-Based
 Scheduled or Time-Based
 Other Monthly, Max. Not-to-Exceed Compensation

11. Payment Terms

Maximum not-to-exceed based upon the salary costs as described in Section 5.2 up to a maximum not-to-exceed of \$2,613,525.
Reimbursables: The County has established a maximum not-to-exceed amount of \$296,740.

12. Cost Adjustment

Not Applicable Fixed Percentage - ___% Actual Cost
 CPI or other Index Fixed Amount - \$_____ Other:

13. Equity Program Participation Summary

- a. County established M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal for this action or project: 25%
b. Contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: 27%
c. M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: 18.6%

14. Renewal or Extension Terms:

AMENDMENT 1 TO THE AGREEMENT SHALL COMMENCE UPON THE DATE OF THE FIRST ANNIVERSARY OF THE CONTRACT AND RUN FOR THE REMAINING AGREEMENT PERIOD OF SIX (6) YEARS UNLESS SOONER TERMINATED AS PROVIDED HEREIN.

15. Termination and Cancellation Provisions

For Cause: 10 DAYS UPON WRITTEN NOTICE PER SECTION 10.2.1
For Convenience: 30 DAYS UPON WRITTEN NOTICE PER SECTION 10.2.1

16. Deliverables, milestones or scope of this action:

N/A

17. List terms, considerations or deviations from standard county form.

N/A