



AGREEMENT SUMMARY

1. Other Contracting Party: DEPARTMENT OF CHILDREN AND FAMILIES (DCF)

2. Proposed Action: [] New Contract [x] Amendment, Number 2 [] Renewal [] Extension

3. Document Type (select one): Amendment

4. Purpose/Description: Amendment 0002 to Agreement No. JP002 consolidates all homelessness related services under one Unified Homeless Contractual Agreement: LocalHomeless Coalition, Emergency Solutions Grant (ESG), Temporary Assistance for Needy Families (TANF), and the Challenge Grant.

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):

Start : _____
End: _____

6.b. Effective Dates (amendments only):

- [x] No Change
[] End date has changed from ___ to _____.
[] Term has from to .

7. Contract Administrator:

Name: Susan Batchelder, CGA Supv
Phone: 954-357-7841

8. Contract Type:

- [] Cost reimbursement [] Open-end
[x] Firm fixed price [] Time and materials
[] Performance-based [] Other _____

9.a. Contract Value (new contracts)

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

9.b. Contract Value (amendments only)

Table with 2 columns: Description, Value. Rows include No change/Actual/Estimated selection, Original approved contract value (\$1,174,000.00), Approved previous adjustments, Value of this action, Amended total contract value (\$1,174,000.00).

10. Payment Method

- [] Lump Sum Payment
[x] Milestone or Progress-Based
[] Scheduled or Time-Based
[] Other

11. Payment Terms

Funds shall be distributed to the County on a quarterly basis during the term of this Agreement.

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: N/A
b. Contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: N/A
c. M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: N/A

14. Renewal or Extension Terms:

15. Termination and Cancellation Provisions

FOR CAUSE: DCF may terminate the contract upon no less than twenty-four (24) hours for noncompliance within the time specified in a written notice of Noncompliance, specifying the actions required to cure such noncompliance.
FOR CONVENIENCE: agreement may be terminated without cause upon no less than thirty (30) calendar days unless a sooner time is mutually agreed upon in writing.

16. Deliverables, milestones or scope of this action:

As provided in Attachment E of the Unified Homeless Contract

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

None