



AGREEMENT SUMMARY

1. Other Contracting Party:

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION (FDOT)

2. Proposed Action:

[X] New Contract [] Amendment, Number [] Renewal [] Extension

3. Document Type (select one):

4. Purpose/Description:

Ensure the County and FDOT continue to meet State and Federal NPDES permitting requirements

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 : Upon Execution
End: January 4, 2022

6.b. Effective Dates (amendments only):

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

7. Contract Administrator:

Name: Ashok Raichoudhury
Phone: 954-519-1490

8. Contract Type:

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

9.a. Contract Value (new contracts)

Table with 2 columns: Description, Amount. Rows: Actual/Estimated, Base amount (\$99,904.00), Reimbursables, Optional Services, Total contract value (\$99,904.00)

9.b. Contract Value (amendments only)

Table with 2 columns: Description, Amount. Rows: No change/Actual/Estimated, Original approved contract value, Approved previous adjustments, Value of this action, Amended total contract value

10. Payment Method

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

11. Payment Terms

Annual reimbursement in an amount equal to the appropriation by the Florida Legislature

12. Cost Adjustment

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

14. Renewal or Extension Terms:

15. Termination and Cancellation Provisions

For Cause:
For Convenience:

16. Deliverables, milestones or scope of this action:

Scope of Services outlined in the Joint Participation Agreement

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

This JPA has been reviewed by the Office of the County Attorney and approved as to form. However, this JPA does not include the County's standard agreement provisions because FDOT requires the County to use FDOT form agreement.