



AGREEMENT SUMMARY

1. Other Contracting Party:
REBUILDING TOGETHER BROWARD, INC.

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

3. Document Type (select one):
Agreement

4. Purpose/Description:
PROVIDE MINOR HOME REPAIRS AND A VOLUNTEER SERVICE DAY IN THE BROWARD MUNICIPAL SERVICES DISTRICT.

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 : Effective Date of Agreement
End: December 31, 2018

6.b. Effective Dates (amendments only):
[] No Change
[] End date has changed from ___ to ___.
[] Term has from to .

7. Contract Administrator:
Name: Suzanne Fejes
Phone: 954-357-4912

8. Contract Type:
[] Cost reimbursement [] Open-end
[X] Firm fixed price [] Time and materials
[] Performance-based [] Other ___

9.a. Contract Value (new contracts)
[X] Actual [] Estimated
Table with columns for Base amount, Reimbursables, Optional Services, Total contract value. Values: \$10,000.00, \$10,000.00.

9.b. Contract Value (amendments only)
[] No change [] Actual [] Estimated
Table with columns for Original approved contract value, Approved previous adjustments, Value of this action, Amended total contract value.

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

11. Payment Terms
ADVANCE PAYMENT

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:
NOT APPLICABLE

15. Termination and Cancellation Provisions
For Cause: x
For Convenience:

16. Deliverables, milestones or scope of this action:
IN CALENDAR YEAR 2018, PROVIDE MINOR HOME REPAIRS AND VOLUNTEER SERVICE DAY IN BMSD.

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