



AGREEMENT SUMMARY

1. Other Contracting Party:
SOFI CORPORATION

2. Proposed Action:
New Contract [ ] Amendment, Number 1 [X] Renewal [ ] Extension [ ]

3. Document Type (select one):
Reinstatement and Amendment

4. Purpose/Description:
Reinstate expired original Agreement, and amend such agreement to exercise the option to renew the term for two (2) years, and provide compensation for up to a maximum amount not to exceed \$90,000 for services to be provided during the renewal term.

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):
No Change [ ]
End date has changed from 10/14/2017 to 10/14/2019. [X]
Term has from to . [ ]

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

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

9.a. Contract Value (new contracts)
Actual [ ] Estimated [ ]
Table with columns for Base amount, Reimbursables, Optional Services, Total contract value.

9.b. Contract Value (amendments only)
No change [ ] Actual [X] Estimated [ ]
Table with columns for 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
Payment when completed work is invoiced.

12. Cost Adjustment
Not Applicable [X] 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:
None

15. Termination and Cancellation Provisions
For Cause: [X]
For Convenience: [ ]

16. Deliverables, milestones or scope of this action:
Provide inspection and project advisory services as needed and requested by the Division.

17. List terms, considerations or deviations from standard county form.
None