



AGREEMENT SUMMARY

EXHIBIT 1

1. Other Contracting Party:

VERIZON WIRELESS PERSONAL COMMUNICATIONS LP.

2. Proposed Action:

☒ New Contract ☐ Amendment, Number ☐ Renewal ☐ Extension

3. Document Type (select one):

Wireless Agreement

4. Purpose/Description:

Grants the Licensee the license, privilege, and right to occupy certain portions of the Airport property for the installation, operation and maintenance of wireless communications equipment.

5. Special Provisions (select if applicable):

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

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

Start : The Date that Agreement is Fully Executed
End: Continued for Two Years after Effective Date

6.b. Effective Dates (amendments only):

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

7. Contract Administrator:

Name: Desmond Wilson
Phone: 954-359-2357

8. Contract Type:

☐ Cost reimbursement ☐ Open-end
☐ Firm fixed price ☐ Time and materials
☒ Performance-based ☐ Other _____

9.a. Contract Value (new contracts)

<input type="checkbox"/> Actual <input checked="" type="checkbox"/> Estimated	
Base amount	\$80,761
Reimbursables	
Optional Services	
Total contract value	\$163,945

9.b. Contract Value (amendments only)

<input type="checkbox"/> No change <input type="checkbox"/> Actual <input type="checkbox"/> 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
☐ Scheduled or Time-Based
☒ Other Monthly Payments

11. Payment Terms

LICENSEE SHALL PAY THE COUNTY A "PRIVILEGE FEE" WHICH SHALL BE GREATER OF (1) THE DEPLANED PASSENGER FEE OR (2) THE MINIMUM ANNUAL GUARANTEE.

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:

NONE

15. Termination and Cancellation Provisions

For Cause: UPON THIRTY DAYS WRITTEN NOTICE IN ACCORDANCE WITH SECTIONS 14 AND 17 OF THE LICENSE AGREEMENT.
For Convenience: NONE.

16. Deliverables, milestones or scope of this action:

N/A

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

N/A