



AGREEMENT SUMMARY

1. Other Contracting Party:

U.S. ENVIRONMENTAL PROTECTION AGENCY

2. Proposed Action:

☐ New Contract ☒ Amendment, Number 4 ☐ Renewal ☐ Extension

3. Document Type (select one):

Grant Agreement

4. Purpose/Description:

Accept U.S. EPA 103 grant award PM-96495815-4. The award provides funding to operate and maintain the fine particulate monitoring network in Broward County.

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 : _____

End: _____

6.b. Effective Dates (amendments only):

☐ No Change
☒ End date has changed from 3/31/2018 to 3/31/2020.
☐ Term has from to .

7. Contract Administrator:

Name: Lorenzo Fernandez, P.E.Phone: 954-519-1249

8. Contract Type:

<input checked="" type="checkbox"/> Cost reimbursement	<input type="checkbox"/> Open-end
<input type="checkbox"/> Firm fixed price	<input type="checkbox"/> Time and materials
<input type="checkbox"/> Performance-based	<input type="checkbox"/> Other _____

9.a. Contract Value (new contracts)

☐ Actual ☐ Estimated

Base amount	
Reimbursables	
Optional Services	
Total contract value	

9.b. Contract Value (amendments only)

☐ No change ☒ Actual ☐ Estimated

Original approved contract value	\$89,175.00
Approved previous adjustments	\$180,000.00
Value of this action	\$35,274.00
Amended total contract value	\$304,449.00

10. Payment Method

☐ Lump Sum Payment
☐ Milestone or Progress-Based
☐ Scheduled or Time-Based
☒ Other Cost Reimbursement

11. Payment Terms

12. Cost Adjustment

<input checked="" type="checkbox"/> Not Applicable	<input type="checkbox"/> Fixed Percentage - ____%	<input type="checkbox"/> Actual Cost
<input type="checkbox"/> CPI or other Index	<input type="checkbox"/> Fixed Amount - \$ _____	<input type="checkbox"/> 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/Ab. Contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: N/Ac. M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: N/A

14. Renewal or Extension Terms:

N/A

15. Termination and Cancellation Provisions

For Cause:

For Convenience:

16. Deliverables, milestones or scope of this action:

As a recipient of an EPA fine particulate matter (PM2.5) monitoring grant, Broward County will:

1. Operate and maintain the PM2.5 monitoring network in accordance with EPA regulatory requirements.
2. Report PM2.5 quality assurance data to EPA.
3. Meet 75% minimum data recovery rate.

4. Submit a PM2.5 network design noting the monitoring to be conducted and the sampling frequency.
5. Participate in the Air Quality Index forecasting for PM2.5.

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

Because this is a grant agreement under which the County is a recipient of funds from a federal agency, the County's standard form agreement provisions are not included. However, this grant was approved as to form by the County Attorney's Office