## BROWARD COUNTY

## ${\bf BOARD\ OF\ COUNTY\ COMMISSIONERS,\ BROWARD\ COUNTY,\ FLORIDA}$

## **AGREEMENT SUMMARY**

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4. Other Contracting Party.									
1. Other Contracting Party: ATKINS NORTH AMERICA, INC.									
2. Proposed Action:			3. Document Type (select one)	<u> </u>					
☐ New Contract ☐ Amendment, Number 2 ☐ Renewal		Extension	Amendment 2						
4. Purpose/Description:									
To provide Capital Projects Manager (CPM) services for the Port Everglades Seaport Engineering & Facilities Maintenance Division									
to serve as an extension of the County staff for the construction of the Marine Infrastructure Program (MIP).									
5. Special Provisions (select if applicable):									
Living Wage Program		SBE Sheltered	SBE Sheltered Market Program						
Workforce Investment Pilot Program		M/WBE Program							
Federal DBE/ACDBE program	In-Kind Match Required: \$ or%								
CBE Program		Cash Match I	Cash Match Required: \$ or %						
6.a. Effective Dates (for new agreements only):		6.b. Effective Date	6.b. Effective Dates (amendments only):						
Start :	No Change	No Change     ■ No Change     No Ch							
End:	End date has	End date has changed from to							
<del></del>	Term has	Term has from to .							
7. Contract Administrator:	8. Contract Type:								
Name: John C. Foglesong, P.E., Enter		Cost reimbursement Open-end							
Projects, Port Everglades Department, S	•		Firm fixed price Time and materials						
Facilities Maintenance Division		Performance							
Phone: 954- <u>468-0142</u>									
9.a. Contract Value (new contracts)		9.b. Contract Value	9.b. Contract Value (amendments only)						
Actual Estimated		No change	☐ No change ☐ Actual ☐ Estimated						
Base amount			Original approved contract value	\$2,923,500					
Reimbursables			Approved previous adjustments	\$2,910,265					
Optional Services			Value of this action	\$3,100,000					
Total contract value			Amended total contract value	\$8,933,765					
10. Payment Method	11. Payment Terms								
Lump Sum Payment	Maximum not-to-exceed based upon the salary costs as described in Section 5.2 up to a								
Milestone or Progress-Based	1 0000000								
Scheduled or Time-Based	Reimbursables: The County has established a maximum not-to-exceed amount of \$200,000.								
Other Monthly, Max. Not-to-Exceed									
12. Cost Adjustment									
Not Applicable	e%	% 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: $25\%$									
b. Contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: 27%									
c. M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: $28.56\%$									
THE AGREEMENT SHALL COMMENCE U	5. Termination and Cancellation Provisions								
COUNTY'S EXECUTION AND RUN FOR A	For Cause: 10 DAYS UPON WRITTEN NOTICE PER SECTION 10.2.1.								
(7) YEARS UNLESS SOONER TERMINATE HEREIN.	For Convenience: 30 DAYS UPON WRITTEN NOTICE PER SECTION 10.2.1.								
16. Deliverables, milestones or scope of this action:  N/A									
17. List terms, considerations or deviations from standard county form.  N/A									

Rev. 1/1/15