



BOARD OF COUNTY COMMISSIONERS, BROWARD COUNTY, FLORIDA
AGREEMENT SUMMARY

EXHIBIT 1

1. Other Contracting Party:

Leo A. Daly Company

2. Proposed Action:

New Contract Amendment, Number Renewal Extension

3. Document Type (select one):

Design Consultant Contract

4. Purpose/Description: Consultant to provide pre-design services, including programming, site analysis, and public outreach services for the Broward County's Medical Examiner's Office and BSO's Crime Lab Combined Facility Project. This is a deliberately phased agreement. Further design consulting services will occur in later phases by amendment to this Agreement.

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 checked="" type="checkbox"/> CBE Program | <input type="checkbox"/> Cash Match Required: \$ _____ or _____ % |

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

Start: Upon Execution & Notice-To-Proceed
End: Based on Activities/Phases (Exhibit A, Attachment 1)

6.b. Effective Dates (amendments only):

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

7. Contract Administrator:

Name: Ariadna Musarra, Director/ County Architect, Construction Management Division
Phone: 954-357-6419

8. Contract Type:

- | | |
|--|---|
| <input type="checkbox"/> Cost reimbursement | <input type="checkbox"/> Open-end |
| <input checked="" 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)

<input checked="" type="checkbox"/> Actual	<input type="checkbox"/> Estimated
Base amount	\$597,361
Reimbursables	\$5,000.00
Optional Services	\$50,000.00
<i>Total contract value</i>	<i>\$652,361</i>

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

11. Payment Terms

County shall pay Consultant(s) within thirty (30) calendar days from receipt of contractor's proper statement as defined by County's prompt payment ordinance.

12. Cost Adjustment

- Not Applicable Fixed Percentage - ___% Actual Cost
 CPI or other Index Fixed Amount - \$ _____ Other:

13. Equity Program Participation Summary

- a. County established CBE participation goal for this action or project: 25%
b. Contractor-committed CBE participation goal planned for this action or project: 25%
c. CBE participation to date: N/A

14. Renewal or Extension Terms:

Not applicable.

15. Termination and Cancellation Provisions

For Cause: Section 10.2 of the Agreement
For Convenience: Section 10.2 of the Agreement

16. Deliverables, milestones or scope of this action:

Pre-design services in accordance with phases in Exhibit A

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

None