



AGREEMENT SUMMARY

1. Other Contracting Party:
KEOLIS TRANSIT SERVICES, LLC

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

3. Document Type (select one): Airport Shuttle Bus and Other Transportation Services Concession Contract

4. Purpose/Description:
Agreement between Broward County and Keolis Transit Services, LLC, for Shuttle Bus and Other Transportation Services at Broward County's Fort Lauderdale-Hollywood International Airport ("FLL").

5. Special Provisions (select if applicable):
[X] Living Wage Program [] SBE Sheltered Market Program
[] Workforce Investment Pilot Program [] M/WBE Program
[X] Federal DBE/ACDBE program [] In-Kind Match Required: \$ ____ or ____ %
[] CBE Program [] Cash Match Required: \$ ____ or ____ %

6.a. Effective Dates (for new agreements only):
Effective upon signature. Term Dates:
Start : June 12, 2019
End: June 11, 2024

6.b. Effective Dates (amendments only):
[] No Change
[] End date has changed from ____ to ____
[] Term has from to

7. Contract Administrator:
Name: Karolynn Willman
Phone: 954-359-2318

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

9.a. Contract Value (new contracts)
Table with 2 columns: Description, Amount. Rows include Fixed Fee (\$10,619,020), In-Service Hourly Fee (\$106,164,572), Reimbursables (\$44,228,955), Optional Services, and Total contract value (\$161,012,547).

9.b. Contract Value (amendments only)
Table with 2 columns: Description, Amount. Rows include Original approved contract value, Approved previous adjustments, Value of this action, and Amended total contract value.

10. Payment Method
[] Lump Sum Payment
[] Milestone or Progress-Based
[X] Scheduled or Time-Based
[X] Other Monthly Reimbursables

11. Payment Terms
Monthly Management Fee, plus hourly rate for in service shuttle hours and reimbursables for actual approved expenses such as supplies, facility, etc.

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: 12%
b. Contractor-committed M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation goal planned for this action or project: 12.03%
c. M/WBE, SBE, CDBE, CBE, DBE or ACDBE participation to date: N/A

14. Renewal or Extension Terms:
FIVE ONE YEAR EXTENSIONS AVAILABLE

15. Termination and Cancellation Provisions
For Cause: This Agreement may be terminated for cause by the aggrieved party if the party in breach has not corrected the breach within ten (10) days after receipt of written notice from the aggrieved party identifying the breach ("Cure Period"), except that no Cure Period shall apply and this Agreement may be terminated by County immediately if Contractor fails to provide Shuttle Bus Services.
For Convenience: This Agreement may also be terminated for convenience by the Board. Termination for convenience by the Board shall be effective on the termination date stated in written notice provided by County, which termination date shall be not less than thirty (30) days after the date of such written notice.

16. Deliverables, milestones or scope of this action:
Operations and Concession Management Services for Airport Shuttle Bus and Other Transportation Services.

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