BOCC CONTRACT	(S-22-082
APPROVAL FORM	CONTRACT TRACKING NO.
(Request for Contract Preparation)	CM2987-A2
GENERAL INFORMATION Requesting Department: Planning Department	
Contact Person:Holly Coyle	
Telephone: (904) 530-6300 Fax: () Emai	l: <u>hcoyle@nassaucountyfl.com</u>
CONTRACTOR INFORMATION Name: <u>Barth Associates, LLC-Professional Services Agreement</u>	
Address: <u>10030 SW 52<sup>nd</sup> Rd.</u> <u>Gainesville</u>	FL 32608 State Zip
Contractor's Administrator Name: <u>Denise Barth</u> Title: <u>Manage</u>	2 mm
Telephone: <u>(561) 308-9937</u> Fax: ( <u>)</u> Email: <u>denise</u>	a)barthassoc.com
IDENTIFY WHO WILL SIGN CONTRACT ON BEHALF OF CONTRACTOR (N Authorized Signatory Name: <u>Denise Barth</u> Authorized Signatory Email: <u>denise@barthassoc.com</u>	·
CONTRACT INFORMATION Contract Name: <u>Barth Associates</u> , LLC Professional Services Contract	ct
Description: <u>Amendment #2: to extend performance period for an a</u>	dditional year.
GOODS AND/OR SERVICES TO BE PROCURED, PHYSICAL LO	DCATION, ETC.
Total Amount of Contract: <u>NTE \$175,000.00 (\$4,593.05 left on con</u>	tract)
APPROXIMATE IF NECESSARY	_

Source of Funds: ⊠ County □State □Federal □ Other\_\_\_\_\_Account: 037523552-531000

Authorized Signatory: <u>Taco E. Pope, AICP</u>

IDENTIFY WHO WILL SIGN CONTRACT ON BEHALF OF BOCC

Contract Dates: From: Execution to: 4/5/2021 Termination/Cancellation: 12/31/2022

Status: □ New ⊠Renew □ Amend#2 □ WA/Task Order □ Supplemental Agreement

How Procured:  $\boxtimes$  Exemption  $\square$  Sole Source  $\square$  Single Source  $\square$  ITB  $\square$  RFP  $\square$  RFQ  $\square$  Coop  $\square$  Piggyback  $\square$  Quotes  $\square$  Other\_\_\_\_\_

#### If Processing an Amendment:

Contract #: CM2987 \_\_\_\_\_ Increased Amount to Existing Contract: No CostIncrease

New Contract Dates: <u>1/1/2023</u> to <u>12/31/23</u> Total or Amended Amount: <u>\$0.00</u> Continued on next page

BOCC CAF rv.12/8/22

Requirement	Description	Complete B	
Contract, Exhibits andAppendices	<ol> <li>The contract and all documents incorporated by reference in the contract, including exhibits and appendices are attached (including E-Verify, Pricing, Scope, etc.) and properly identified; and</li> <li>All such documents have been read and agreed to in their entirety by originating department and staff members who have obligations under this contract.</li> </ol>	Dept LG	
Name, Address, Contact Person	The full name, address, legal status (i.e., corporation, partnership, etc.) and contact person of other party are included.	Dept LG	
Understanding	Written contract matches the verbal understanding of all parties. All terms and conditions conform to the final negotiations/agreement of the parties.	Dept LG	
Competition/Conflicts and Existing Contracts/Compliance	This contract does not conflict with any other contracts, promises or obligations of the BOCC. The requesting department verifies the BOCC can comply with all terms and conditions.	Dept LG Cnty Atty	
Other Necessary Agreements	All other necessary agreements or waivers referred to in contract have been obtained and are attached and properly identified for reference.	Cnty Atty	
Indemnification	BOCC may not indemnify, hold harmless, be liable to, or reimburse any other party to the contract for claims, lawsuits, damages, attorney fees, or losses incurred by that party in connection with the contract.	Cnty Atty	
Term of Contract	Start and end dates of contract are included. Any renewals are included.	Cnty Atty	
Warranties/Guarantees	Warranties or guarantees give satisfactory protection.	Cnty Atty/Risk	
Insurance	Risk manager has or will approve insurance clauses. Levels confirmed in requirements	Dept LG	
Governing Law	The contract is governed under the laws of the State of Florida. The contract may be silent on this issue but in no event will another state's law govern the agreement.	Cnty Atty	
Confidentiality Agreements	All nondisclosure clauses include exceptions regarding disclosure as required by law. If not applicable, indicate "n/a."	Cnty Atty	
Printed/Typed Names	Names of all persons signing contracts are printed or typed below signatures.	Router	

## APPROVALS PURSUANT TO NASSAU COUNTY PURCHASING POLICY

Holly Coule	12/29/2022		
Department Head/Contract Manager	Date		
henere Alman	12/29/2022		
Procurement	Date		
divis to compre	12/29/2022		
Office of Mgmt & Budget	Date		
Derise C. May	12/29/2022		
County Attorney	Date	as	12/29/2022

## 5. Two E. Popy AICP 12/29/2022 County Manager Date

#### SECOND AMENDMENT TO PROFESSIONAL SERVICES AGREEMENT FOR NASSAU COUNTY FLORIDA

THIS AMENDMENT made and entered into this \_\_\_\_\_day of \_\_\_\_\_\_, 2022 by and between the Board of County Commissioners of Nassau County, Florida, a political subdivision of the State of Florida, hereinafter referred to as the "County", and Barth Associates, LLC, a Florida Limited Liability Company, whose Florida office address is located at 10030 SW 52<sup>nd</sup> Road, Gainesville, Florida 32608, hereinafter referred to as "Consultant".

WHEREAS, the parties entered into an Agreement dated April 5, 2021 for professional services to develop a plan to enhance the American Beach Cultural Heritage Experience; and

WHEREAS, the Agreement allowed for an initial term beginning on April 5, 2021 and ending on December 31, 2021 with the option to extend the performance period upon mutual agreement of the parties; and

WHEREAS, the County Manager's Office determined that it was necessary to extend the performance period beyond December 31, 2021 and provide clarification as to Article 5-Compensation; and

1

WHEREAS, on or about November 12, 2021, the parties mutually agreed to amend the Agreement to extend the performance period for an additional one (1) year period beginning on January 1, 2022 and ending on December 31, 2022 and to provide additional clarification to Article 5 - Compensation; and

WHEREAS, the parties desire to further amend the Agreement to extend the term of the Agreement for an additional one (1) year period beginning on January 1, 2023 and ending on December 31, 2023.

NOW, THEREFORE, FOR AND IN CONSIDERATION of the promises and mutual covenants and understanding contained herein, the parties hereto do mutually agree as follows:

- The Agreement shall be amended to extend the term for an additional one (1) year period beginning on January 1, 2023 and ending on December 31, 2023.
- All other provisions of the Agreement not in conflict with this Amendment shall remain in full force and effect.

2

Contract Tracking No.: CM2987-A2

BOARD OF COUNTY COMMISSIONERS NASSAU COUNTY, FLORIDA

## Two E. Popy AICP 12/29/2022 By: Taco E. Pope, AICP

By: Taco E. Pope, AICP Its: Designee

Approved as to form and legality by the Nassau County Attorney

Denise C. May 12/29/2022

BARTH ASSOCIATES, LLC

	Denise & Barth	
By:	Denise L Barth	
Its:	Manager	
Date:	12/29/2022	

DAVILBA-01

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### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/16/2022

THIS CERTIFICATE IS ISSUED AS CERTIFICATE DOES NOT AFFIRM BELOW. THIS CERTIFICATE OF REPRESENTATIVE OR PRODUCER	NSURA	Y OF	R NEGATIVELY AMEND	, EXTEND OR	ALTER THE C	OVERAGE AFFORDED BY T	HE POLICIES
IMPORTANT: If the certificate ho If SUBROGATION IS WAIVED, sul this certificate does not confer right	ject to	the	terms and conditions of	the policy, certa	in policies ma	DNAL INSURED provisions or y require an endorsement. A	be endorsed. statement on
<b>,</b>	s to the	cert	incate noider in neu or si		u(s).		
PRODUCER Hub International Florida				CONTACT NAME: PHONE		FAX (oro	
2811 NW 41st Street				(A/C, No, Ext): (33	2) 377-2002	FAX (A/C, No):(352	) 376-8393
Gainesville, FL 32606				E-MAIL ADDRESS:			
					INSURER(S) AFFC	RDING COVERAGE	NAIC #
				INSURER A : Unit	ed States Lia	bility Insurance	25895
INSURED				INSURER B :			
Barth Associates, LLC				INSURER C :			
10030 SW 52 Road				INSURER D :			
Gainesville, FL 32608				INSURER E :			
				INSURER F :			
001/554.050				INSURER F .			
			NUMBER:			REVISION NUMBER:	
THIS IS TO CERTIFY THAT THE POL INDICATED. NOTWITHSTANDING AN CERTIFICATE MAY BE ISSUED OR M EXCLUSIONS AND CONDITIONS OF SU	REQUI	REME TAIN, CIES.	ENT, TERM OR CONDITIO THE INSURANCE AFFOR LIMITS SHOWN MAY HAVE	N OF ANY CONT DED BY THE PC BEEN REDUCED	RACT OR OTHE LICIES DESCRI BY PAID CLAIMS	R DOCUMENT WITH RESPECT T BED HEREIN IS SUBJECT TO AL S.	O WHICH THIS
NSR TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY E (MM/DD/YY	FF POLICY EXP YY) (MM/DD/YYYY	LIMITS	
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CLAIMS-MADE X OCCUR	x	x	SP1576751	1/13/20	1/13/2023	DAMAGE TO RENTED PREMISES (Ea occurrence) \$	300,00
						MED EXP (Any one person) \$	10,00
	-					PERSONAL & ADV INJURY \$	1,000,00
	-						2,000,00
						GENERAL AGGREGATE \$	2,000,00
						PRODUCTS - COMP/OP AGG \$	1,000,00
X OTHER:						COMBINED SINGLE LIMIT	1,000,00
AUTOMOBILE LIABILITY						(Ea accident) \$	
						BODILY INJURY (Per person) \$	
OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident) \$	
HIRED NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$	
						s	
UMBRELLA LIAB OCCUR						EACH OCCURRENCE \$	
EXCESS LIAB CLAIMS-MA	DE					AGGREGATE \$	
DED RETENTION \$						s	
WORKERS COMPENSATION						PER OTH- STATUTE ER	
AND EMPLOYERS' LIABILITY Y	N						
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT \$	
(Mandatory in NH) If yes, describe under	-					E.L. DISEASE - EA EMPLOYEE \$	
DESCRIPTION OF OPERATIONS below	_					E.L. DISEASE - POLICY LIMIT \$	
DESCRIPTION OF OPERATIONS / LOCATIONS / VE lassau County Board of County Commis Professional Liability and Auto.	HCLES (A sioners	as A	101, Additional Remarks Schedu dditional Insured includin	ule, may be attached if ig completed ope	more space is requ rations with Wa	<sup>ired)</sup> iver of Subrogation for Genera	l Liability,
rolessional Liability and Auto.							
CERTIFICATE HOLDER				CANCELLATIO	DN		
Nassau County Board of		Com	missioners	THE EXPIRA	TION DATE T	DESCRIBED POLICIES BE CANCE HEREOF, NOTICE WILL BE [ CY PROVISIONS.	
96135 Nassau Place, Suit	;#1,						
	;#1,			AUTHORIZED REPR	ESENTATIVE		
96135 Nassau Place, Suit	; #1,			AUTHORIZED REPR			

Contract No. CM2987-A2

# **DocuSign**

hotoyle@nassaucountyfl.com       Hdly (ufu       Viewed: 12/29/2022 12:37:05 f         Security Level: Email, Account Authentication       Signature Adoption: Pre-selected Style       Signed: 12/29/2022 12:37:05 f         Electronic Record and Signature Disclosure:       Accepted: 6/11/2021 9:00:57 AM       Signature Adoption: Pre-selected Style         Dis: 506057-a125-426b-8c78-804094a03568       clasambra       Security Level: Email, Account Authentication         OMB Director       Nassau County BOCC       Signature Adoption: Pre-selected Style       Signed: 12/29/2022 2:43:55 PI         Signature Adoption: Pre-selected Style       Using IP Address: 50.238.237.26       Signed: 12/29/2022 2:44:04 Pi         Electronic Record and Signature Disclosure:       Not Offered via DocuSign       Signature Adoption: Pre-selected Style       Signed: 12/29/2022 2:44:04 Pi         Lanase Gilmore       Signature Adoption: Pre-selected Style       Signed: 12/29/2022 2:44:04 Pi       Signed: 12/29/2022 2:44:04 Pi         Not Offered via DocuSign       Auser Adoption: Pre-selected Style       Signed: 12/29/2022 2:44:04 Pi         Nassau County BOCC       Signature Adoption: Pre-selected Style       Signed: 12/29/2022 2:48:45 Pi         Not Offered via DocuSign       Signature Adoption: Pre-selected Style       Signed: 12/29/2022 2:48:45 Pi         Nassau County BOCC       Signature Adoption: Pre-selected Style       Sent: 12/29/2022 2:48:45 Pi <t< th=""><th></th><th></th><th></th></t<>			
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**Signer Events** Signature Timestamp Denise L Barth Sent: 12/29/2022 3:49:15 PM Denise L Barth Viewed: 12/29/2022 4:02:05 PM denise@barthassoc.com Signed: 12/29/2022 4:02:37 PM Manager Security Level: Email, Account Authentication Signature Adoption: Pre-selected Style (None) Using IP Address: 174.70.72.35 Electronic Record and Signature Disclosure: Accepted: 12/15/2022 4:34:11 PM ID: 0dddd2bc-26b7-4712-92ee-edfe38ed8f1a Denise C. May Sent: 12/29/2022 4:02:40 PM Denise C. May dmay@nassaucountyfl.com Viewed: 12/29/2022 4:17:44 PM Assistant County Attorney Signed: 12/29/2022 4:18:12 PM Nassau County BOCC Signature Adoption: Pre-selected Style Security Level: Email, Account Authentication Using IP Address: 174.239.83.52 (None) Signed using mobile **Electronic Record and Signature Disclosure:** Not Offered via DocuSign Taco E. Pope, AICP Sent: 12/29/2022 4:18:15 PM Two E. Popy AICP tpope@nassaucountyfl.com Viewed: 12/29/2022 5:06:00 PM **County Manager** Signed: 12/29/2022 5:06:11 PM Nassau County BOCC Signature Adoption: Pre-selected Style Security Level: Email, Account Authentication Using IP Address: 166.198.157.65 (None) Signed using mobile **Electronic Record and Signature Disclosure:** Not Offered via DocuSign Signature In Person Signer Events Timestamp **Editor Delivery Events** Status Timestamp **Agent Delivery Events Status** Timestamp Intermediary Delivery Events Status Timestamp **Certified Delivery Events** Status Timestamp **Carbon Copy Events** Status Timestamp Sent: 12/29/2022 5:06:14 PM Clerk Admin COPIED clerkservices@nassaucountyfl.com Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via DocuSign Procurement Staff Sent: 12/29/2022 5:06:16 PM COPIED BOCCProcurement@nassaucountyfl.com Security Level: Email, Account Authentication (None) **Electronic Record and Signature Disclosure:** Not Offered via DocuSign Witness Events Signature Timestamp **Notary Events** 

Signature

Contract No. CM2987-A2

Timestamp

Contract No. CM2987-A2

Envelope Summary Events	Status	Timestamps
Envelope Sent	Hashed/Encrypted	12/29/2022 12:34:57 PM
Envelope Updated	Security Checked	12/29/2022 1:59:21 PM
Certified Delivered	Security Checked	12/29/2022 5:06:00 PM
Signing Complete	Security Checked	12/29/2022 5:06:11 PM
Completed	Security Checked	12/29/2022 5:06:16 PM
Payment Events	Status	Timestamps

Electronic Record and Signature Disclosure

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If you decide to receive notices and disclosures from us electronically, you may at any time change your mind and tell us that thereafter you want to receive required notices and disclosures only in paper format. How you must inform us of your decision to receive future notices and disclosure in paper format and withdraw your consent to receive notices and disclosures electronically is described below.

#### Consequences of changing your mind

If you elect to receive required notices and disclosures only in paper format, it will slow the speed at which we can complete certain steps in transactions with you and delivering services to you because we will need first to send the required notices or disclosures to you in paper format, and then wait until we receive back from you your acknowledgment of your receipt of such paper notices or disclosures. Further, you will no longer be able to use the DocuSign system to receive required notices and consents electronically from us or to sign electronically documents from us.

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Unless you tell us otherwise in accordance with the procedures described herein, we will provide electronically to you through the DocuSign system all required notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you during the course of our relationship with you. To reduce the chance of you inadvertently not receiving any notice or disclosure, we prefer to provide all of the required notices and disclosures to you by the same method and to the same address that you have given us. Thus, you can receive all the disclosures and notices electronically or in paper format through the paper mail delivery system. If you do not agree with this process, please let us know as described below. Please also see the paragraph immediately above that describes the consequences of your electing not to receive delivery of the notices and disclosures electronically from us.

#### How to contact County of Nassau:

You may contact us to let us know of your changes as to how we may contact you electronically, to request paper copies of certain information from us, and to withdraw your prior consent to receive notices and disclosures electronically as follows: To contact us by email send messages to: bsimmons@nassaucountyfl.com

#### To advise County of Nassau of your new email address

To let us know of a change in your email address where we should send notices and disclosures electronically to you, you must send an email message to us at bsimmons@nassaucountyfl.com and in the body of such request you must state: your previous email address, your new email address. We do not require any other information from you to change your email address.

If you created a DocuSign account, you may update it with your new email address through your account preferences.

#### To request paper copies from County of Nassau

To request delivery from us of paper copies of the notices and disclosures previously provided by us to you electronically, you must send us an email to bsimmons@nassaucountyfl.com and in the body of such request you must state your email address, full name, mailing address, and telephone number. We will bill you for any fees at that time, if any.

#### To withdraw your consent with County of Nassau

To inform us that you no longer wish to receive future notices and disclosures in electronic format you may:

i. decline to sign a document from within your signing session, and on the subsequent page, select the check-box indicating you wish to withdraw your consent, or you may;

ii. send us an email to bsimmons@nassaucountyfl.com and in the body of such request you must state your email, full name, mailing address, and telephone number. We do not need any other information from you to withdraw consent. The consequences of your withdrawing consent for online documents will be that transactions may take a longer time to process.

#### Required hardware and software

The minimum system requirements for using the DocuSign system may change over time. The current system requirements are found here: <u>https://support.docusign.com/guides/signer-guide-signing-system-requirements</u>.

#### Acknowledging your access and consent to receive and sign documents electronically

To confirm to us that you can access this information electronically, which will be similar to other electronic notices and disclosures that we will provide to you, please confirm that you have read this ERSD, and (i) that you are able to print on paper or electronically save this ERSD for your future reference and access; or (ii) that you are able to email this ERSD to an email address where you will be able to print on paper or save it for your future reference and access. Further, if you consent to receiving notices and disclosures exclusively in electronic format as described herein, then select the check-box next to 'I agree to use electronic records and signatures' before clicking 'CONTINUE' within the DocuSign system.

By selecting the check-box next to 'I agree to use electronic records and signatures', you confirm that:

- You can access and read this Electronic Record and Signature Disclosure; and
- You can print on paper this Electronic Record and Signature Disclosure, or save or send this Electronic Record and Disclosure to a location where you can print it, for future reference and access; and
- Until or unless you notify County of Nassau as described above, you consent to receive exclusively through electronic means all notices, disclosures, authorizations, acknowledgements, and other documents that are required to be provided or made available to you by County of Nassau during the course of your relationship with County of Nassau.

DocuSign Envelope ID: E7FAFF32-E51E-4EC9-B888-FD7B4052FD09

**VENDOR NAME/ADDRESS** 

Barth Associates, LLC 10030 SW 52nd Road Contract No. CM2987-A2



#### **Requisition Form**

#### NASSAU COUNTY BOARD OF COUNTY COMMISSIONERS 96135 Nassau Place Suite 1

Yulee, FL 32097

DEPARTMENT Planning Department

NDOR NUMBER	PROJECT NAME	FUNDING SOURCE		AMOUNT AVAILABLE	STANDARI	PO OR ENCLIMBER ON	ie Goltry LY CONTRACT NO
	Pro., Svs., Agreement	37523552/53100		\$ 4,593.05		er Contract	CM2987
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I attest that, to the best of my knowledge, this requisition reflects accurate information, has been reviewed, budgeted for and follows the Nassau County Purchasing Policy.

Holly Loyle

12/29/2022

Office of Management and Budget (signature required if over Department Head signature authority or \$5,000, whichever is less.) I attest that, to the best of my knowledge, funds are available for payment. 12/29/2022

Procurement Director (signature required if over Department Head signature authority or \$5,000, whichever is less.) I affect that, to be lest of my knowledge, this requisition is accurate and necessary and is consistent with the Nassau County Purchasing Policy. 12/29/2022

County Manager (signature required if over Department Head signature authority or \$5,000, whichever is less.) I attest that, to the best of my knowledge, the appropriate staff have reviewed and approved this Requisition and no other conditions would prevent approval. 12/29/2022

Clerk:	
Date:	