

CS-21-241

BOCC CONTRACT APPROVAL FORM

(Contract Management Use only)
CONTRACT TRACKING NO.
CM3118-A1

GENERAL INFORMATION

Requesting Department Engineering Services

Contact Person: Robert T. Companion

Telephone: (904) 530-6225 Fax: () _____ Email: rcompanion@nassaucountyfl.com

CONTRACTOR INFORMATION

Name: Florida Department of Transportation

Address: 1109 South Marion Ave., Lake City, FL 32025

City State Zip

Contractor's Administrator Name: Kim Evans Title: Programs Manager

Telephone: (386) 961-7402 Fax: () _____ Email: Kimberly.evans@dot.state.fl.us

IDENTIFY WHO WILL SIGN CONTRACT ON BEHALF OF CONTRACTOR (NAME AND EMAIL ADDRESS)

Authorized Signatory Name: Greg Evans

Authorized Signatory Email: G.evans@dot.state.fl.us

CONTRACT INFORMATION

Contract Name: Supplemental Agreement # 1 LAP Agreement CR 108 Bay to Middle

Description: Increase funding for CR 108 Bay to Middle Post Design

GOODS AND/OR SERVICES TO BE PROCURED, PHYSICAL LOCATION, ETC

Terms: Payment Period: _____ Amount per Period: _____

Total Amount of Contract: \$50,000.00

APPROXIMATE IF NECESSARY

Source of Funds: To be reimbursed by FDOT Termination/Cancellation: _____

Authorized Signatory: Aaron C. Bell

IDENTIFY WHO WILL SIGN CONTRACT ON BEHALF OF BOCC

Contract Dates: From: 4/25/2022 to: 12/31/23

Status: ___ New ___ Renew ___ Amend# X ___ WA/Task Order

How Procured: ___ Sole Source ___ Single Source ___ ITB ___ RFP ___ RFQ ___ Coop. ___ Other Grant

If Processing an Amendment:

Contract #: CM 3118-A1 Increased Amount of Existing Contract: 50,000.00

New Contract Dates: 4/25/2022 to 12/31/2023 Total or Amendment Amount: \$3,096,053.00

Continued on next page

CHECKLIST		
<i>Complete and attach before sending contract for final signature</i>		
Requirement	Description	Certified Complete By
Contract, Exhibits and Appendices	1) 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 2) All such documents have been read and agreed to in their entirety by originating department and any faculty and staff members who have obligations under this contract.	
Name, Address, Contact Person	The full name, address, legal status (i.e., corporation, partnership, etc.) and contact person of other party are included.	SC
Understanding	Written contract matches the verbal understanding of all parties. All terms and conditions conform to the final negotiations/agreement of the parties.	
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.	
Other Necessary Agreements	All other necessary agreements or waivers referred to in contract have been obtained and are attached and properly identified for reference.	
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.	
Term of Contract	Start and end dates of contract are included. Any renewals are included.	sc
Warranties/Guarantees	Warranties or guarantees give satisfactory protection.	
Insurance	Risk manager _____ has or _____ will approve insurance clauses. Levels confirmed ins requirements	SC
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.	
Confidentiality Agreements	All nondisclosure clauses include exceptions regarding disclosure as required by law. If not applicable, indicate "n/a."	
Printed/Typed Names	Names of all persons signing contracts are printed or typed below signatures.	sc

APPROVALS PURSUANT TO NASSAU COUNTY PURCHASING POLICY

1. Robert Companion 5/16/2022
Robert T. Companion, PE, Deputy Cty Mgr/Cty Engineer Date Engineering Services
2. Lanae Gilmore 5/17/2022 63470541-563365 I.APSI
Lanae Gilmore, Procurement Director Date Funding Source/Acct #
3. Chris Lacambra 5/17/2022
Chris Lacambra, OMB Director Date
4. Denise C. May 5/17/2022
Denise C. May, Esq., B.C.S., County Attorney Date

COUNTY MANAGER – FINAL SIGNATURE APPROVAL

5. Taco E. Pope AICP 5/17/2022
Taco E. Pope, AICP, County Manager Date

RETURN ORIGINAL(S) TO CONTRACT MANAGEMENT FOR DISTRIBUTION AS FOLLOWS:

Original: Clerk’s Services; Contractor (original or certified copy)
Copies: Department: Procurement: Office of Management & Budget: County Attorney: Contract Management: Clerk Finance

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
**LOCAL AGENCY PROGRAM
SUPPLEMENTAL AGREEMENT**

CM3118-A1

525-010-32
PROGRAM MANAGEMENT
03/22

Page 1 of _

SUPPLEMENTAL NO.
1

FEDERAL ID NO. (FAIN)
D220-086-B

CONTRACT NO.
G2819

FEDERAL AWARD DATE
4-22-2022

FPN
441214-1-88-40

RECIPIENT UNIQUE ENTITY ID SAM NO.
Z1QNT7ZY7272

Recipient, Nassau County desires to supplement the original Agreement entered into and executed on 4/25/2022 as identified above. All provisions in the original Agreement and supplements, if any, remain in effect except as expressly modified by this supplement.

The changes to the Agreement and supplements, if any, are described as follows:

PROJECT DESCRIPTION

Name Construction for safety improvements on CR 108 Length approx. 7.8 miles

Termini from CR 115 to CR 121A

Description of Work:
Post Design

Reason for Supplement and supporting engineering and/or cost analysis:
Add post design services in the amount of \$50,000

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
**LOCAL AGENCY PROGRAM
 SUPPLEMENTAL AGREEMENT**
 ADJUSTED EXHIBIT "B" SCHEDULE OF FINANCIAL ASSISTANCE

525-010-32
 PROGRAM
 MANAGEMENT
 02/22

CM3118-A1

RECIPIENT NAME & BILLING ADDRESS:

FINANCIAL PROJECT NUMBER:

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PHASE OF WORK By Fiscal Year	FUNDING					
	(1) PREVIOUS TOTAL PROJECT FUNDS	(2) ADDITIONAL PROJECT FUNDS	(3) CURRENT TOTAL PROJECT FUNDS	(4) TOTAL LOCAL FUNDS	(5) TOTAL STATE FUNDS	(6) TOTAL FEDERAL FUNDS
Design						
FY: 2021-2022 (ACSS-Construction)	\$3,001,037.00		\$3,001,037.00			\$3,001,037.00
FY: 2021-2022 (ACSS- CEI)	\$45,016.00		\$45,016.00			\$45,016.00
FY: 2021-2022 (ACSS- Post Design)		\$50,000.00				\$50,000.00
Total Design Cost	\$3,046,053.00	\$50,000.00	\$3,046,053.00	\$ 0.00	\$ 0.00	\$3,096,053.00
Right-of-Way						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total Right-of-Way Cost	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Construction						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total Construction Cost	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Construction Engineering and Inspection (CEI)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total CEI Cost	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
(Insert Phase)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total Phase Costs	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
TOTAL COST OF THE PROJECT	\$3,046,053.00	\$50,000.00	\$3,046,053.00	\$ 0.00	\$ 0.00	\$3,096,053.00

COST ANALYSIS CERTIFICATION AS REQUIRED BY SECTION 216.3475, FLORIDA STATUTES:

I certify that the cost for each line item budget category has been evaluated and determined to be allowable, reasonable, and necessary as required by Section 216.3475, F.S. Documentation is on file evidencing the methodology used and the conclusions reached.

Kim Evans
 District Grant Manager Name

 Signature Date

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
**LOCAL AGENCY PROGRAM
SUPPLEMENTAL AGREEMENT**

CM3118-A1

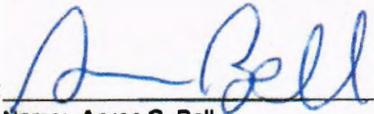
525-010-32
PROGRAM MANAGEMENT
08/19

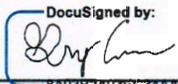
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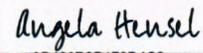
IN WITNESS WHEREOF, the parties have executed this Agreement on the date last ascribed herein.

RECIPIENT Nassau County

STATE OF FLORIDA
DEPARTMENT OF TRANSPORTATION

By: 
Name: Aaron C. Bell
Title: Chair

DocuSigned by:

By: _____
Name: Greg Evans
Title: District Secretary
Date: 6/10/2022 | 9:32 AM EDT

Legal Review:
DocuSigned by:


RESOLUTION NO. 2022- 110

A RESOLUTION AUTHORIZING THE EXECUTION OF THE SUPPLEMENTAL AGREEMENT #1 BETWEEN THE STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION AND THE BOARD OF COUNTY COMMISSIONERS OF NASSAU COUNTY, FLORIDA

WHEREAS, the County Engineer has recommended that the Board of County Commissioners of Nassau County, Florida, execute Supplemental Agreement #1 between the State of Florida Department of Transportation and Nassau County, Florida regarding construction of safety improvements on CR 108 from Bay to Middle Roads in Nassau County, Florida (Financial Project ID No. 441214-1-68-40).

NOW, THEREFORE, BE IT RESOLVED, this 23rd day of May, 2022, by the Board of County Commissioners of Nassau County, Florida as follows:

1. The Local Agency Program Supplemental Agreement #1 between the State of Florida Department of Transportation and Nassau County is hereby approved and the Chairman is authorized to execute said agreement.

**BOARD OF COUNTY COMMISSIONERS
NASSAU COUNTY, FLORIDA**



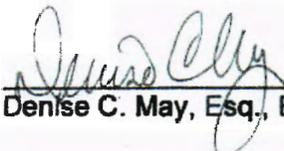
Aaron C. Bell, Chairman

Attest as to Chairman's signature:

Approved as to form by the
Nassau County Attorney:



John A. Crawford
Its: Ex-Officio Clerk



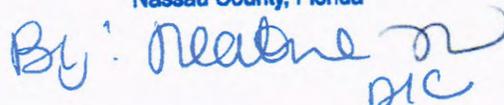
Denise C. May, Esq., B.C.S.



A CERTIFIED TRUE COPY



EX-OFFICIO, Clerk of the Board of County Comm.
Nassau County, Florida

By: 
D.C.

To: kimberly.evans@dot.state.fl.us

**FLORIDA DEPARTMENT OF TRANSPORTATION
FUNDS APPROVAL**

G2819

6/3/2022

CONTRACT INFORMATION

Contract:	G2819
Contract Type:	GD - GRANT DISBURSEMENT (GRANT)
Method of Procurement:	G - GOVERNMENTAL AGENCY (287.057,F.S.)
Vendor Name:	NASSAU COUNTY BOARD OF COUNTY C
Vendor ID:	F591863042053
Beginning Date of This Agreement:	04/25/2022
Ending Date of This Agreement:	12/31/2023
Contract Total/Budgetary Ceiling:	ct = \$3,096,053.00
Description:	Construction and CEI project management of safety improvements on CR 108 from Bay to Middle Road

FUNDS APPROVAL INFORMATION

FUNDS APPROVED/REVIEWED FOR ROBIN M. NAITOVE, CPA, COMPTROLLER ON 6/3/2022

Action:	Supplemental
Reviewed or Approved:	APPROVED
Organization Code:	55024010206
Expansion Option:	AM
Object Code:	780000
Amount:	\$50,000.00
Financial Project:	44121416840
Work Activity (FCT):	215
CFDA:	20.205
Fiscal Year:	2022
Budget Entity:	55100100
Category/Category Year:	088849/22
Amendment ID:	S001
Sequence:	00
User Assigned ID:	1
Enc Line (6s)/Status:	0004/04

Total Amount: \$50,000.00