



BOARD OF COUNTY COMMISSIONERS, BROWARD COUNTY, FLORIDA

AGREEMENT SUMMARY

EXHIBIT 1

1. Other Contracting Party:

ATKINS NORTH AMERICA, INC.

2. Proposed Action:

☐ New Contract ☒ Amendment, Number 4 ☐ Renewal ☐ Extension

3. Document Type (select one):

Amendment 4

4. Purpose/Description:

To continue 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):

<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 :

End:

6.b. Effective Dates (amendments only):

☒ No Change
☐ End date has changed from _____ to _____.
☐ Term has _____ from _____ to _____.

7. Contract Administrator:

Name: John C. Foglesong, P.E., Enterprise Director, Capital Projects, Port Everglades Department, Seaport Engineering & Facilities Maintenance Division

Phone: 954-468-0142

8. Contract Type:

<input type="checkbox"/> Cost reimbursement	<input type="checkbox"/> Open-end
<input type="checkbox"/> Firm fixed price	<input type="checkbox"/> Time and materials
<input type="checkbox"/> Performance-based	<input checked="" type="checkbox"/> OtherNTE

9.a. Contract Value (new contracts)

☐ Actual ☐ Estimated

Base amount	
Reimbursables	
Optional Services	
Total contract value	

9.b. Contract Value (amendments only)

☐ No change ☐ Actual ☒ Estimated

Original approved contract value	\$2,923,500.00
Approved previous adjustments	\$9,110,265.00
Value of this action	\$2,718,960.00
Amended total contract value	\$14,752,725.00

10. Payment Method

☐ Lump Sum Payment
☐ Milestone or Progress-Based
☐ Scheduled or Time-Based
☒ OtherNot-To-Exceed – Section 5.1.1

11. Payment Terms

IN ACCORDANCE WITH ARTICLE 5 COMPENSATION AND METHOD OF PAYMENT

12. Cost Adjustment

<input checked="" type="checkbox"/> Not Applicable	<input type="checkbox"/> Fixed Percentage - ____%	<input type="checkbox"/> Actual Cost
<input type="checkbox"/> CPI or other Index	<input type="checkbox"/> Fixed Amount - \$_____	<input type="checkbox"/> 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: 27.42%

14. Renewal or Extension Terms: NONE

15. Termination and Cancellation Provisions

For Cause: 10 DAYS UPON WRITTEN NOTICE BY EITHER PARTY PER SECTION 10.2.1.
For Convenience: 30 DAYS UPON WRITTEN NOTICE BY COUNTY 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