

**FIRST AMENDMENT TO TASK ORDER 2021-04**

**THIS AGREEMENT** (“Amendment”), is dated this \_\_\_\_\_ day of \_\_\_\_\_ 2023, and is entered into by and between:

**CITY OF COOPER CITY**, a municipal corporation organized and existing under the laws of the State of Florida and whose address is 9090 SW 50<sup>th</sup> Place, Cooper City, Florida 33328 ("City"),

and

**HAZEN AND SAWYER, PC**, an Engineering Firm as listed with the Florida Division of Corporations, authorized to do business in the State of Florida, and with a business address of 4000 Hollywood Blvd., Suite 750N, Hollywood' FL 33021 (hereinafter referred to as the "CONSULTANT"). City and CONSULTANT may hereinafter be referred to collectively as the "Parties".

**WITNESSETH:**

**WHEREAS**, pursuant to CONTINUING PROFESSIONAL SERVICES AGREEMENT dated June 8, 2021, the CONSULTANT was awarded Task Order 2021-04 for engineering services associated with the replacement of one treated sewage effluent pump # 3 and associated electrical gear on February 8, 2022 in the amount of \$107,287; and

**WHEREAS**, the Original Agreement provides the parties City or CONSULTANT may request changes that would increase, decrease, or otherwise modify the Scope of Work, subject to the mutual written consent of the Parties; and

**WHEREAS**, the City wishes to amend Task Order No. 2021-04 issued to CONSULTANT to add permitting services associated with the replacement of effluent pump # 3 and related electrical setup in the amount of \$19,525; and

**WHEREAS**, the City is satisfied with the CONSULTANT's performance and considers them to be most knowledgeable to obtain permits from various regulatory agencies; and

**WHEREAS**, the Parties agree that all remaining provisions of the Original Agreement shall remain in full force of effect.

**NOW, THEREFORE**, in consideration of the mutual promises and covenants contained herein, and other good and valuable consideration, the receipt and adequacy of which are acknowledged, the parties agree as follows:

**Section 1.** The foregoing recitals are true and correct and are hereby incorporated into this Agreement.

**Section 2.** The Original Task Order 2021-04 is hereby amended to add permitting services associated with the replacement of effluent pump # 3 and related electrical setup in the amount of \$19,525.

**Section 3. Scrutinized Companies.** CONSULTANT, its principals or owners, certify that they are not listed on the Scrutinized Companies that Boycott Israel List, Scrutinized Companies with Activities in Sudan List, Scrutinized Companies with Activities in the Iran

Petroleum Energy Sector List, or are engaged in business operations with Syria. In accordance with Section 287.135, Florida Statutes, as amended, a company is ineligible to, and may not, bid on, submit a proposal for, or enter into or renew a contract with any agency or local governmental entity for goods or services of:

3.1 Any amount if, at the time bidding on, submitting a proposal for, or entering into or renewing such contract, the company is on the Scrutinized Companies that Boycott Israel List, created pursuant to Section 215.4725, Florida Statutes, or is engaged in a boycott of Israel; or

3.2 One million dollars or more if, at the time of bidding on, submitting a proposal for, or entering into or renewing such contract, the company:

3.2.1 Is on the Scrutinized Companies with Activities in Sudan List or the Scrutinized Companies with Activities in the Iran Petroleum Energy Sector List, created pursuant to Section 215.473, Florida Statutes; or

3.2.2 Is engaged in business operations in Syria.

**Section 4. E-Verify.** CONTRACTOR certifies that it is aware of and complies with the requirements of Section 448.095, Florida Statutes, as may be amended from time to time and briefly described herein below.

4.1 Definitions for this Section:

4.1.1 "Contractor" means a person or entity that has entered or is attempting to enter into a contract with a public employer to provide labor, supplies, or services to such employer in exchange for salary, wages, or other remuneration. "Contractor" includes, but is not limited to, CONTRACTOR or CONSULTANT.

4.1.2 "Subcontractor" means a person or entity that provides labor, supplies, or services to or for a contractor or another subcontractor in exchange for salary, wages, or other remuneration.

4.1.3 "E-Verify system" means an Internet-based system operated by the United States Department of Homeland Security that allows participating employers to electronically verify the employment eligibility of newly hired employees.

4.2 Registration Requirement; Termination:

Pursuant to Section 448.095, Florida Statutes, effective January 1, 2021, Contractors, shall register with and use the E-verify system in order to verify the work authorization status of all newly hired employees. Contractor shall register for and utilize the U.S. Department of Homeland Security's E-Verify System to verify the employment eligibility of:

4.2.1 All persons employed by a Contractor to perform employment duties within Florida during the term of the contract;

4.2.2 All persons (including sub consultants / subcontractors) assigned by Contractor to perform work pursuant to the contract with the City of Cooper City. The Contractor acknowledges and agrees that registration and use of the U.S. Department of Homeland Security's E-Verify System during the term of the contract is a condition of the contract with the City of Cooper City; and

4.2.3 The Contractor shall comply with the provisions of Section 448.095, Fla. Stat., "Employment Eligibility," as amended from time to time. This includes, but is not limited to registration and utilization of the E-Verify System to verify the work authorization status of all newly hired employees. Contractor shall also require all subcontractors to provide an affidavit attesting that the subcontractor does not employ, contract with, or subcontract with, an unauthorized alien. The Contractor shall maintain a copy of such affidavit for the duration of the contract. Failure to comply will lead to termination of this Contract, or if a subcontractor knowingly violates the statute, the subcontract must be terminated immediately. Any challenge to termination under this provision must be filed in the Circuit Court no later than twenty (20) calendar days after the date of termination. Termination of this Contract under this Section is not a breach of contract and may not be considered as such. If this contract is terminated for a violation of the statute by the Contractor, the Contractor may not be awarded a public contract for a period of one (1) year after the date of termination.

**Section 5.** The parties agree that in all other respects the Original Agreement shall remain in full force and effect except as specifically amended herein.

**Section 6.** In the event of any conflict or ambiguity by and between the terms and provisions of this First Amendment, and the Original Task Order, the terms and provisions of

this First Amendment shall control to the extent of any such conflict or ambiguity.

**Section 7.** Each person signing this First Amendment on behalf of either party individually warrants that he or she has full legal power to execute this First Amendment on behalf of the party for whom he or she is signing, and to bind and obligate such party with respect to all provisions contained in this First and Amendment.

**Section 8.** This First Amendment may be executed by hand or electronically in multiple originals or counterparts, each of which shall be deemed to be an original and together shall constitute one and the same agreement. Execution and delivery of this First Amendment by the Parties shall be legally binding, valid and effective upon delivery of the executed documents to the other Party through facsimile transmission, email, or other electronic delivery.

(REMAINDER INTENTIONALLY LEFT BLANK)

IN WITNESS OF THE FOREGOING, the parties have hereunto set their hands and seals on the dates written below.

CITY OF COOPER CITY, a Florida Municipal Corporation

BY: \_\_\_\_\_  
JOSEPH NAPOLI, CITY MANAGER

ATTEST:

BY: \_\_\_\_\_  
CITY CLERK

BY: \_\_\_\_\_  
GREG ROSS, MAYOR

APPROVED AS TO LEGAL FORM:

BY: \_\_\_\_\_  
CITY ATTORNEY

WITNESSED BY:

CONSULTANT  
HAZEN AND SAWYER, PC



Signature

By: 

Name: Janeen M Wietgreffe, PE, PMP

George A. Brown  
Print Name

Title: \_Vice President\_\_\_\_\_

(REMAINDER INTENTIONALLY LEFT BLANK)

STATE OF Florida  
COUNTY OF Broward

BEFORE ME, an officer duly authorized by law to administer oaths and take acknowledgements, personally appeared Janeen Wietgrebe, as Vice President of HAZEN AND SAWYER, P.C., and acknowledged that he has executed the foregoing instrument for the use and purposes mentioned in it and that the instrument is the act and deed of Janeen Wietgrebe as Vice President of HAZEN AND SAWYER, P.C., and who is personally known to me or has produced \_\_\_\_\_ as identification.

IN WITNESS WHEREOF, I have set my hand and seal in the State and County aforesaid this 30 day of December, 20 22.



Mary Perez  
NOTARY PUBLIC

Mary Perez  
Print or Type Name

My Commission Expires: February 22, 2026

IN WITNESS OF THE FOREGOING, the parties have hereunto set their hands and seals on the dates written below.

CITY OF COOPER CITY, a Florida Municipal Corporation

BY: \_\_\_\_\_  
JOSEPH NAPOLI, CITY MANAGER

ATTEST:

BY: \_\_\_\_\_  
CITY CLERK

BY: \_\_\_\_\_  
GREG ROSS, MAYOR

APPROVED AS TO LEGAL FORM:

BY: \_\_\_\_\_  
CITY ATTORNEY

CONSULTANT  
HAZEN AND SAWYER, PC

WITNESSED BY:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

(REMAINDER INTENTIONALLY LEFT BLANK)



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/25/2022

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> <b>Ames &amp; Gough</b> 8300 Greensboro Drive Suite 980 McLean, VA 22102	<b>CONTACT NAME:</b> PHONE (A/C, No, Ext): <b>(703) 827-2277</b>   FAX (A/C, No): <b>(703) 827-2279</b> E-MAIL ADDRESS: <b>admin@amesgough.com</b>												
<b>INSURER(S) AFFORDING COVERAGE</b>													
<b>INSURED</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">INSURER A : <b>Twin City Fire Insurance Company A+ (XV)</b></td> <td style="width: 20%; text-align: right;"><b>29459</b></td> </tr> <tr> <td>INSURER B : <b>Hartford Fire Insurance Company A+ (XV)</b></td> <td style="text-align: right;"><b>19682</b></td> </tr> <tr> <td>INSURER C : <b>Travelers Indemnity Company of Connecticut A++ (Superior)</b></td> <td style="text-align: right;"><b>25682</b></td> </tr> <tr> <td>INSURER D : <b>Continental Casualty Company (CNA) A, XV</b></td> <td style="text-align: right;"><b>20443</b></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER A : <b>Twin City Fire Insurance Company A+ (XV)</b>	<b>29459</b>	INSURER B : <b>Hartford Fire Insurance Company A+ (XV)</b>	<b>19682</b>	INSURER C : <b>Travelers Indemnity Company of Connecticut A++ (Superior)</b>	<b>25682</b>	INSURER D : <b>Continental Casualty Company (CNA) A, XV</b>	<b>20443</b>	INSURER E :		INSURER F :	
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INSURER E :													
INSURER F :													

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS			
<b>A</b>	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> <b>Contractual Liab.</b>  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			42UUNOL5499	3/29/2022	3/29/2023	EACH OCCURRENCE \$ <b>1,000,000</b> DAMAGE TO RENTED PREMISES (Ea occurrence) \$ <b>1,000,000</b> MED EXP (Any one person) \$ <b>10,000</b> PERSONAL & ADV INJURY \$ <b>1,000,000</b> GENERAL AGGREGATE \$ <b>2,000,000</b> PRODUCTS - COMP/OP AGG \$ <b>2,000,000</b> \$			
	<b>B</b>	<b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			42UENOL5501	3/29/2022	3/29/2023	COMBINED SINGLE LIMIT (Ea accident) \$ <b>2,000,000</b> BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ <b>Comp./Coll. Ded</b> \$ <b>1,000</b>		
			<b>C</b>	<input checked="" type="checkbox"/> <b>UMBRELLA LIAB</b> <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ <b>10,000</b>			CUP-2T739221-22-NF	3/29/2022	3/29/2023	EACH OCCURRENCE \$ <b>2,000,000</b> AGGREGATE \$ <b>2,000,000</b> \$
					<b>A</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input checked="" type="checkbox"/> Y / <input checked="" type="checkbox"/> N If yes, describe under DESCRIPTION OF OPERATIONS below			42WBOL6H6E	3/29/2022
<b>D</b>	<b>Professional Liab.</b>			AEH008231489			3/29/2022	3/29/2023	<b>Per Claim/Aggregate</b> \$ <b>5,000,000</b>	

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 RE: RFQ 2020-1-UTL – PROFESSIONAL SERVICES PROVIDERS (ARCHITECTURAL, ENGINEERING, SURVEYING & MAPPING)

Pollution Liability coverage is provided and included within the Professional Liability policy noted above. It shares the limits of the Professional Liability policy.

The City of Cooper City, FL, its employees, directors, officers, agents, independent contractors, successors and assigns, and other authorized representatives

are included as additional insured with respect to General Liability, Automobile Liability and Umbrella Liability when required by written contract. General Liability, Automobile Liability and Umbrella Liability are primary and non-contributory over any existing insurance and limited to liability arising out of the SEE ATTACHED ACORD 101

**CERTIFICATE HOLDER****CANCELLATION**

City of Cooper City, FL PO Box 290910 Cooper City, FL 33329-0910	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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## ADDITIONAL REMARKS SCHEDULE

AGENCY <b>Ames &amp; Gough</b>		NAMED INSURED <b>Hazen and Sawyer</b> 498 Seventh Avenue New York, NY 10018	
POLICY NUMBER <b>SEE PAGE 1</b>			
CARRIER <b>SEE PAGE 1</b>	NAIC CODE <b>SEE P 1</b>	EFFECTIVE DATE: <b>SEE PAGE 1</b>	

## ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,  
FORM NUMBER: ACORD 25 FORM TITLE: Certificate of Liability Insurance

## Description of Operations/Locations/Vehicles:

operations of the named insured and when required by written contract. General Liability, Automobile Liability, Umbrella Liability and Workers Compensation policies include a waiver of subrogation in favor of the additional insureds where permissible by state law and when required by written contract. Umbrella Liability coverage sits excess over General Liability, Automobile Liability and Employers Liability coverage. 30-day Notice of Cancellation will be issued for the General Liability, Automobile Liability, Umbrella Liability, Workers Compensation and Professional Liability policies in accordance with policy terms and conditions.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **PRIMARY AND NONCONTRIBUTORY - OTHER INSURANCE CONDITION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

The following is added to the **Other Insurance** Condition and supersedes any provision to the contrary:

### **Primary And Noncontributory Insurance**

This insurance is primary to and will not seek contribution from any other insurance available to an additional insured under your policy provided that:

(1) The additional insured is a Named Insured under such other insurance; and

(2) You have agreed in writing in a contract or agreement that this insurance would be primary and would not seek contribution from any other insurance available to the additional insured.

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

### **SCHEDULE**

**Name Of Additional Insured Person(s) Or Organization(s):**

ANY PERSON OR ORGANIZATION THAT YOU HAVE AGREED TO NAME AS AN ADDITIONAL INSURED IN A WRITTEN CONTRACT OR AGREEMENT PROVIDED THAT THE INJURY OR DAMAGE OCCURS SUBSEQUENT TO THE EXECUTION OF THE CONTRACT OR AGREEMENT. A PERSON OR ORGANIZATION IS INCLUDED AS AN ADDITIONAL INSURED UNDER THIS ENDORSEMENT ONLY FOR THAT TIME PERIOD REQUIRED BY THE CONTRACT OR AGREEMENT.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

**A. Section II – Who Is An Insured** is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

**B.** With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
  2. Available under the applicable Limits of Insurance shown in the Declarations;
- whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.

# WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART  
PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

## SCHEDULE

**Name Of Person Or Organization:**

ANY PERSON OR ORGANIZATION FROM WHOM YOU ARE REQUIRED BY WRITTEN CONTRACT OR AGREEMENT TO OBTAIN THIS WAIVER OF RIGHTS FROM US.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. **Transfer Of Rights Of Recovery Against Others To Us** of Section IV – Conditions:

We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

## **ADDITIONAL INSURED AND RIGHTS OF RECOVERY AGAINST OTHERS**

This endorsement modifies insurance provided under the following:

### **BUSINESS AUTO COVERAGE FORM**

- A. Any person or organization whom you are required by contract to name as additional insured is an "insured" for LIABILITY COVERAGE but only to the extent that person or organization qualifies as an "insured" under the WHO IS AN INSURED provision of Section II - LIABILITY COVERAGE.
- B. For any person or organization for whom you are required by contract to provide a waiver of subrogation, the Loss Condition - TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US is applicable.



**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.**

**WAIVER OF OUR RIGHT TO RECOVER  
FROM OTHERS ENDORSEMENT**

**Policy Number:** 42 WB OL6H6E

**Endorsement Number:**

**Effective Date:** 03/29/2022 Effective hour is the same as stated on the Information Page of the policy.

**Named Insured and Address:** HAZEN AND SAWYER, D.P.C.  
498 FASHION AVE FL 11  
NEW YORK NY 10018

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule.

This agreement shall not operate directly or indirectly to benefit anyone not named in the Schedule.

**SCHEDULE**

Any person or organization from whom you are required by contract or agreement to obtain this waiver from us. Endorsement is not applicable in KY, NH, NJ or for any MO construction risk

Countersigned by \_\_\_\_\_

Authorized Representative



**EXHIBIT A**  
**CITY OF COOPER CITY**  
**EFFLUENT PUMP AND VFD REPLACEMENT**  
**AMENDMENT 1 TO TASK ORDER No. 2021-04**  
**SCOPE OF SERVICES**  
**NOVEMBER 29, 2022**

**PROJECT BACKGROUND**

Cooper City (CITY) operates its wastewater treatment plant (WWTP) with disposal of secondary effluent to both the City of Hollywood (for reuse as irrigation water) and to the onsite deep injection well. The CITY maintains this flexibility by operating a set of effluent pumps that are capable of transmitting to Hollywood or pumping down the onsite injection well. Under the most recent peak wet weather event, the CITY had difficulty maintaining pressure in the force main to Hollywood when the Town of Davie, who also pumps into the same force main, was pumping.

Under task order 2021-04, Hazen and Sawyer (CONSULTANT) developed specifications and drawings for the replacement of one of the effluent pumps with one of higher capacity. Under this amendment, the CITY requested CONSULTANT to prepare permit applications as described in the scope of services.

**SCOPE OF SERVICES**

**TASK 6 – PERMITTING ASSISTANCE**

**Task 6.1 – Permit Applications**

The CONSULTANT shall prepare permit applications for the following agencies:

Agency	Application Name
Florida Department of Environmental Protection Department (FDEP)	Application for a Minor Revision to Wastewater Facility or Activity Permit DEP Form 62-620.910(9)
Broward County Resilient Environment Department Environmental Engineering and Permitting Division	Application to Construct / Modify a Wastewater Treatment Plant
Broward County Resilient Environment Department Urban Planning Division	Development and Environmental Review Approval

The CITY shall pay all fees associated with application submittals. It is assumed that permitting agencies will issue one request for additional information (RAI) for each application. CONSULTANT shall prepare signed and sealed permit application documents. The documents shall include the following:

- Permit applications

- Drawings and specifications
- Basis of Design Letter Report

**Task 6.2 – Building Department Permit Assistance**

The CONSULTANT shall assist the Contractor procure the Building Department permits from the CITY by providing the following services:

- Provide drawings and specifications signed and sealed by a professional engineer
- Provide drawing revisions required by the Building Department
- Prepare written responses to Building Department comments

The CITY shall pay all fees associated with the Building Department permit application submittals.

**SCHEDULE**

The schedule for the major work tasks is summarized below.

Task	Description	Duration for task/subtask (days)	Calendar Days From Notice To Proceed
6.1	Permit Applications		
	• Prepare and submit applications	30	30
	• Permit agency review	45	75
	• Respond to RAIs	15	90
6.2	Building Department Permit Assistance	90	300

**COMPENSATION**

Compensation shall be made to CONSULTANT for a total amount of **\$19,525**.


Task	Description	Labor Cost
6.1	Permit Applications	\$12,533
6.2	Building Department Permit Assistance	\$6,992
	<b>TOTAL</b>	<b>\$19,525</b>





**SUBMITTED BY:**  
**Hazen and Sawyer**

**APPROVED BY:**  
**City of Cooper City**

BY:   
Janeen M. Wietgreffe, Associate Vice President  
Dated this 29th day of November, 2022

BY: \_\_\_\_\_  
Joseph Napoli, City Manager  
Dated this \_\_ day of \_\_\_\_\_, 2022