Agenda Item #: 3.M.5.

#### PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS

#### AGENDA ITEM SUMMARY

Meeting Date:	August 19, 2008	[X] Consent [] Ordinance	[] Regular [] Public Hearing
Department:	Parks and Recreation		
Submitted By:	Parks and Recreation Depart	<u>rtment</u>	
Submitted For:	Parks and Recreation Depart	rtment	
	I. EXECU	JTIVE BRIEF	
University in an	tle: Staff recommends mot amount not-to-exceed \$30,000 urchase and installation of a co	for the period August 19	), 2008, through August 14,
Environmental E the Pine Jog En eligible expense	funding is to assist with the cost Education Center's new facility. Invironmental Education Center is incurred subsequent to May 1 District 2 Funds. District 2 (AH	Approximately 40,000 per The Agreement allows 5, 2008. Funding is from	eople annually are served at s for the reimbursement of
Florida Atlantic provide program understanding cinhabitants. The	nd Justification: The Pine Jog I University's College of Educat ns that foster an awareness a of ecological concepts, and insi e funding is needed for the pu try for the operations of Pine Jo	ion. Pine Jog is designand appreciation of the till a sense of stewardsharchase and installation o	ed to develop, model, and natural world, promote an ip toward the earth and its
District 2 will pro	communications/phone system vide the funding for the purchas on behalf of Florida Atlantic Universioners.	e and installation of the sy	ystem. The Agreement has
Attachment: A	greement		
Recommended	by: Department Directo	Memor or	7/30/08 Date
Approved by: _	Assistant County A	administrator	8/8/08 Date

### II. FISCAL IMPACT ANALYSIS

A. Five Year Summary o	f Fiscal Imp	act:			
Fiscal Years	2008	2009	2010	2011	2012
Capital Expenditures Operating Costs External Revenues Program Income (County In-Kind Match (County)	30,000 -0- -0- -0- -0- -0-	-0- -0- -0- -0-	-0- -0- -0- -0-	-0- -0- -0- -0-	-0- -0- -0- -0-
NET FISCAL IMPACT	30,000	0	0-	0	0
# ADDITIONAL FTE POSITIONS (Cumulative)	0				
Is Item Included in Currer Budget Account No.:		<u>Departmen</u>		<u>1902</u>	
B. Recommended Source	es of Funds	/Summary of	Fiscal Impact:		
Recreation Assistan District 2		902-111-8101		\$30,00	00
C. Departmental Fiscal I	Review:	cko	pelakis	·	
	<u>III.</u>	REVIEW COM	<u>MENTS</u>		
A. OFMB Fiscal and/or C	ontract Dev	elopment and	Control Comm	nents:	
OFMB \$8/4/08  B. Legal Sufficiency:		101 101	This Cor	prinent and Contract complies with	
Assistant County Attorne	8/7/08 ey	-			
C. Other Department Re	view:				
Department Director		-			

REVISED 10/95 ADM FORM 01

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# AGREEMENT BETWEEN PALM BEACH COUNTY AND FLORIDA ATLANTIC UNIVERSITY FOR THE PURCHASE AND INSTALLATION OF COMMUNICATIONS/PHONE SYSTEM FOR PINE JOG FACILITY

THIS AGREEMENT is made and entered into on \_\_\_\_\_\_, by and between Palm Beach County, a political subdivision of the State of Florida, hereinafter referred to as "County", and Florida Atlantic University Acting For and on Behalf of the Florida Atlantic University Board of Trustees, hereinafter referred to as "FAU".

#### WITNESSETH:

WHEREAS, FAU is a state university that owns Pine Jog Environmental Education Center (Pine Jog), which it operates through its College of Education; and

**WHEREAS,** Pine Jog is situated on 150 acres located at 6301Summit Boulevard in West Palm Beach; and

WHEREAS, Pine Jog is designed to develop, model, and provide programs which foster an awareness and appreciation of the natural world, promote an understanding of ecological concepts, and instill a sense of stewardship toward the earth and all its inhabitants; and

**WHEREAS,** Pine Jog serves approximately 40,000 people annually, including students from kindergarten through sixth grade, teachers participating in professional development, and the public; and

WHEREAS, Pine Jog needs assistance with funding for the purchase and installation of a communications/phone system for its new Pine Jog facility; and

WHEREAS, Pine Jog provides public access to trails and environmental programs; and WHEREAS, the cost of the communications/phone system for the new Pine Jog facility is approximately \$30,000; and

WHEREAS, FAU has requested \$30,000 from County to offset costs for the communications/phone system for the new Pine Jog facility; and

WHEREAS, funding for the communications/phone system for the new Pine Jog facility in an amount not-to-exceed \$30,000 is available from the Recreation Assistance Program (RAP) - District 2; and

WHEREAS, County desires to provide funding for the communication/phone system for the new Pine Jog facility; and

WHEREAS, environmental education centers provide a public purpose; and WHEREAS, both parties desire to enter into this Agreement.

**NOW THEREFORE**, in consideration of the covenants and promises contained herein, the parties hereby agree to the following terms and conditions:

- 1. County agrees to fund an amount not-to-exceed \$30,000 to FAU for the purchase and installation of a communication/phone system for the new Pine Jog facility, as set forth in Exhibit "A", attached hereto and incorporated herein, hereinafter referred to as the "Project".
- 2. County will use its best efforts to provide said funds to FAU on a reimbursement basis within forty-five (45) days of receipt of the following information:
- a. A written statement that the Project, as specified herein, was completed in accordance with this Agreement; and
- b. A Contract Payment Request Form and a Contractual Services Purchases Schedule Form attached hereto and made a part hereof as Exhibit "B", which are required for each and every reimbursement requested by FAU. Said information shall list each invoice paid by FAU and shall include the vendor invoice number; invoice date; and the amount paid by FAU along with the number and date of the respective check or proof of payment for said payment. FAU shall attach a copy of each vendor invoice paid by FAU along with a copy of the respective check or proof of payment and shall make reference thereof to the applicable item listed on the Contractual Services Purchases Schedule. Further, FAU's Program Administrator and Project Financial Officer shall certify the total funds spent by FAU on the Project and shall also certify that each vendor invoice, as listed on the Contractual Services Purchases Schedule was paid by FAU and approved by FAU as indicated.
- 3. FAU incurred expenses for the Project beginning on May 15, 2008. Those costs incurred by FAU for the Project, approved and submitted accordingly by FAU subsequent to May 15, 2008, are eligible for reimbursement by County pursuant to the terms and conditions hereof.
- 4. RAP funds may be used as a match for other local, state, or federal grant programs, but FAU may not submit reimbursement requests for the same expenses to the County as other fund sources to receive duplicate reimbursement for the same expenses.
- 5. FAU agrees, warrants, and represents that all of the employees and participants in the Project will be treated equally during employment, and for the provision of services without regard to residency, race, color, religion, disability, sex, age, national origin, ancestry, marital status, or sexual orientation.
- 6. FAU shall be responsible for the operation and maintenance of the Project, including all associated costs.

- 7. The term of this Agreement shall be until August 14, 2009, commencing upon the date of execution by the parties hereto.
- 8. The parties agree that, in the event FAU is in default of its obligations under this Agreement, the County shall provide FAU thirty (30) days written notice to cure the default. In the event FAU fails to cure the default within the thirty (30) day cure period, the County shall have no further obligation to honor reimbursement requests submitted by FAU for the Project deemed to be in default and FAU shall return any unexpended County RAP funds already collected by FAU for that Project. FAU shall return any County RAP funds already collected by FAU for the Project, if it is determined by the County that the funds were used in violation of this Agreement or in violation of any state, county or federal law.
- 9. Notwithstanding any provision of this Agreement to the contrary, this Agreement may be terminated by the County, without cause, upon thirty (30) days prior written notice to the other party. This Agreement may be terminated by the County with cause, upon expiration of the thirty (30) day cure period provided for in Section 8 above.
- 10. FAU shall complete the Project by May 14, 2009, and invoices and checks submitted for reimbursement must be dated within the project time frame of May 15, 2008, and May 14, 2009. FAU shall provide its final reimbursement request(s), including a project completion statement and reimbursement documentation as indicated in Section 2 above on or before August 14, 2009. Upon written notification to County at least ninety (90) days prior to that date FAU may request an extension beyond this period for the purpose of completing the Project. County shall not unreasonably deny FAU's request for said extension.
- 11. In the event FAU ceases to exist, or ceases or suspends the Project for any reason, any remaining unpaid portion of this Agreement shall be retained by County, and County shall have no further obligation to honor reimbursement requests submitted by FAU. The determination that FAU has ceased or suspended the Project shall be made by County and FAU agrees to be bound by County's determination. County shall give FAU thirty (30) days to respond to a County determination that FAU has ceased or suspended the project.
- 12. FAU agrees to abide by, and be governed by, all applicable federal, state, county, and municipal laws, including but not limited to, Palm Beach County's ordinances, as said laws and ordinances exist and are amended from time to time. In entering into this Agreement, Palm Beach County does not waive the requirements of any County or local ordinance or the requirements of obtaining any permits or licenses normally required to conduct business or

activity conducted by FAU. Failure to comply may result in County's refusal to honor reimbursement requests for the Project.

13. County reserves the right to withhold reimbursement if the Project is not completed as specified in Exhibit "A".

14. It is understood and agreed that FAU is merely a recipient of County funding and is an independent contractor and is not an agent, servant or employee of County or its Board of County Commissioners. It is further acknowledged that the County only contributes funding under this Agreement and operates no control over the Project. In the event a claim or lawsuit is brought against County or any of its officers, agents or employees, to the extent permitted by Florida law, including Section 768.28, Florida Statutes, FAU shall indemnify, save and hold harmless and defend the County, its officers, agents, and/or employees from and against any and all claims, liabilities, losses, judgements, and/or causes of action of any type arising out of or relating to any act or omission of FAU, its agents, servants and/or employees in the performance of this Agreement. The foregoing indemnification shall survive termination of this Agreement. Nothing herein is a waiver of any defense or immunity by either party.

In consideration for reimbursement of costs incurred prior to the term of this Agreement, the foregoing indemnification shall apply not only during the term of this Agreement but also for the period prior to the Agreement for which FAU is eligible to receive reimbursement from the County.

15. Without waiving the right to sovereign immunity as provided by Section 768.28, Florida Statutes, FAU acknowledges to be self-insured for General Liability and Automobile Liability under Florida sovereign immunity statutes with coverage limits of \$100,000 Per Person and \$200,000 Per Occurrence; or such monetary waiver limits that may change and be set forth by the legislature.

In the event FAU maintains third-party commercial General Liability and Business Auto Liability in lieu of exclusive reliance on self-insurance under Section 768.28, Florida Statutes, FAU shall agree to maintain said insurance policies at limits not less than \$500,000 combined single limit for bodily injury or property damage.

FAU agrees to maintain or to be self-insured for Worker's Compensation & Employer's Liability insurance in accordance with Florida Statutes 440.

Prior to execution of this Agreement by the County, FAU shall deliver to the County an affidavit or Certificate of Insurance evidencing insurance, self-insurance, and/or sovereign

immunity status, which County agrees to recognize as acceptable for the above mentioned coverages. Certificate holder's address shall read Palm Beach County, c/o Parks and Recreation Department, 2700 Sixth Avenue South, Lake Worth, FL 33461, Attention: Administrative Support Manager. Compliance with the foregoing requirements shall not relieve FAU of its liability and obligations under this Agreement.

16. Upon request by County, FAU shall demonstrate financial accountability through the submission of acceptable financial audits performed by an independent auditor.

17. FAU shall maintain books, records, documents and other evidence that sufficiently and properly reflect all costs of any nature expended in the performance of this Agreement for a period of not less than five (5) years. Upon advance notice to FAU, County shall have the right to inspect and audit said books, records, documents and other evidence during normal business hours.

18. The County and FAU may pursue any and all actions available under law to enforce this Agreement including, but not limited to, actions arising from the breach of any provision set forth herein.

19. This Agreement shall be governed by the laws of the State of Florida and any and all legal action necessary to enforce this Agreement shall be held in Palm Beach County.

20. As provided in Section 287.132-133, Florida Statutes, by entering into this Agreement or performing any work in furtherance hereof, FAU certifies that it, its affiliates, suppliers, subcontractors and consultants who will perform hereunder, have not been placed on the convicted vendor list maintained by the State of Florida Department of Management Services within the thirty six (36) months immediately preceding the date hereof. This notice is required by Section 287.133 (3) (a), Florida Statutes.

21. This Agreement represents the entire agreement between the parties and supersedes all other negotiations, representations, or agreement, written or oral, relating to this Agreement. This Agreement may be modified and amended only by written instrument executed by the parties hereto.

22. Any notice given pursuant to the terms of this Agreement shall be in writing and hand delivered or sent by U.S. mail. All notices shall be addressed to the following:

As to the County:
Director of Parks and Recreation
Palm Beach County Parks and Recreation Department
2700 Sixth Avenue South
Lake Worth, Florida 33461

As to FAU:

Executive Director
Pine Jog Environmental Education Center
College of Education, Florida Atlantic University
6301 Summit Boulevard
West Palm Beach, FL 33415

23. This Agreement is made solely and specifically among and for the benefit of the parties hereto, and no other person shall have any rights, interest, or claims hereunder or be entitled to any benefits under or on account of this Agreement as a third-party beneficiary or otherwise.

**IN WITNESS WHEREOF,** the undersigned parties have signed this Agreement on the date first above written.

SHARON R. BOCK, Clerk Comptroller	PALM BEACH COUNTY, FLORIDA, BY ITS BOARD OF COUNTY COMMISSIONERS
By: Deputy Clerk	ByCommissioner Addie L. Greene, Chairperson
APPROVED AS TO FORM 20/08 AND LEGALITY General Counsel  Piorida Atlantic University	FLORIDA ATLANTIC UNIVERSITY ACTING FOR AND ON BEHALF OF THE FLORIDA ATLANTIC UNIVERSITY BOARD OF TRUSTEES  By:  Camille E. Coley JD  Asst VP for Research  Florida Atlantic University  Date
APPROVED AS TO FORM AND LEGAL SUFFICIENCY	APPROVED AS TO TERMS AND CONDITIONS
By:County Attorney	By: Dennis L. Eshleman, Director Parks and Recreation Department

### Recreation Assistance Program (RAP) Exhibit "A" to Agreement

Mailing Address: 6301 Summit Boulevard, West Palm Beach, FL 33415

**Atlantic University** 

Name of FAU Contact:

Name of Governmental Entity: Pine Jog Environmental Education, Florida

Proje	ect Liaison Information: Name: Par	
	Talanhama # 41.1- 1-86 - 6600	
	Fax #: SUI - U87 - 4968 e-mail: WELCH & FAK. EOK	
	PROJECT INFORMATION	
1.	Name of Project: Purchase and Installation of Commu	nications/phone
2.	system for new Pine Jog Facility Project Description	
	• General (Project Scope):  PHRCHASE OF COMMUNICATION / PHONE	SYSIEM
	PHREHASE OF COMMUNICATIONS , PHONE SCTS	& voice mail
	• Public Purpose: Public Access / REC	CREATION
y,sa	(1985년 - 1987년 - 1987년 - 1987년 - 1987	
	· Location: PINZ JOU ENVIRONMENTAL ED.	ALATAN CANTER
	• Anticipated Number of Participants/Users: 20, 5	
3.	Project Elements: List anticipated broad categories of Ex such as capital outlay, contractual services, personnel co expenses, equipment, and "Other Miscellaneous Project not include expenditure line item budget/ amounts.	sts, operational
	PURCHASE ORDER FOR TRECO South	FLORIDA
	FOR PARCASE & INSTALL A TION OF COMM	unica nows/
	PHONE SYSTEM / ETOMPMENT	
,		
4.	Estimated Lump Sum Total for Project: \$ 30,000	· (Beso Brown of Stalk)
5.	Project Initiation date (date of first invoice for which reimburequested) and anticipated End date (date which project wand all invoices paid)	ill be completed
Proje Boar at th subr fram	e: Invoices and copies of proof of payment documents will ect/Program reimbursement after the RAP Agreement is and of County Commissioners. Do not submit reimbursement is time. After the Agreement is approved, and the reimburse mitted, all invoices and checks must be dated within the state AND Categories for Project Elements must be listed in Security to be eligible for RAP reimbursement.	pproved by the documentation ment request is ted project time
6.	Required Attachments:	
	Certificate of Insurance	
Am	ount of Recreation Assistance Program Funding awarded	\$ 30,000
Form	real and the second of the sec	District 2 (filled in by County)
i UIII	available offine by request. Contact Susan Tinger at Symper@pbcgov.cc	2111
		CVIUDIT A



## PALM BEACH COUNTY PARKS AND RECREATION DEPARTMENT

#### CONTRACT PAYMENT REQUEST

Date

Grantee:		Project Name:				
Submission #:	-	Reimbursement P	eriod:			
Item	<u>Key</u>	Project Costs This Submission		Cumulative Project Costs		
Contractual Services	(C)	· · · · · · · · · · · · · · · · · · ·			_	
Salary & Wages (% of salaries)	(S)				<del>-</del>	
Materials, Supplies, Direct Purchases	(M)				-	
Equipment	(E)		a		<u>.</u>	
Travel	(T) <u> </u>				<del>-</del>	
Indirect Costs	(I) ·				<b>-</b>	
TOTAL PROJECT CO	OSTS .					
Key Legend  C = Contractual Services S = Salary & Wages M = Materials, Supplies, D E = Equipment T = Travel I = Indirect Costs						
Certification: I hereby certify that the at expenses were incurred for the work ide being accomplished in the attached proreports.	entified as	been maintained	as require	fy that the documentated to support the project and is available for auc	ct	
Administrator [	Date	Financial Officer		Date	<del></del>	
		PBC USE ONLY			· .	
County Funding Participation	on .	\$		·		
Total Project Costs To Date	9:	\$				
County Obligation To Date		\$				
County Retainage (	%)	\$	<del> </del>			
County Funds Previously D	isbursed	\$			·	
County Funds Due this Billing	ng	\$				
Reviewed and Approved B				·	-	
	PBC Pr	oject Administrator		Date		
	Departm	nent Director		Date	-	



Key Legend

C = Contractual Services

S = Salary & Wages

M = Materials, Supplies, Direct Purchases

E = Equipment

T = Travel

I = Indirect C

I = Indirect Costs

#### PALM BEACH COUNTY PARKS AND RECREATION DEPARTMENT CONTRACTUAL SERVICES PURCHASE SCHEDULE

**EXHIBIT B** 

Grantee:	· · · · · · · · · · · · · · · · · · ·		<u> </u>	Proje	ect Name:		· · · · · · · · · · · · · · · · · · ·	
Submittal #:			·	Contract Reimbursement Period:			· · · · · · · · · · · · · · · · · · ·	
		Check or Voucher		Invoice				
Payee (Vendor/Contractor)	Key	Number	Date	Number	Date	Amount	Expense Description	
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					TOTAL \$			
certification: I hereby certify that the puccomplishing this project.	rchases n	oted above were	used in	Certification: I here documentation hav request.	eby certify that bions in the best been maintained	d tabulations, executed cor ed as required to support th	ntract, cancelled checks, and other purchasing ne costs reported above and are available for audit up	
Administrator								



ALEX SINK
STATE RISK MANAGEMENT TRUST FUND

### CERTIFICATE OF COVERAGE

Policy Number:

GL-08-0201

**GENERAL LIABILITY** 

Name Insured:

FLORIDA ATLANTIC UNIVERSITY

General Liability Coverage provided pursuant to Chapter 284, Part II, Section 768.28, Florida Statutes, and any rules promulgated thereunder.

Coverage Limits:

General Liability:

**\$100,000.00** each person

\$200,000.00 each occurrence

Inception Date:

7/1/08

**Expiration Date:** 

7/1/09

Chief Financial Officer

alex Sink

DI4-863 (REV. 3/01)

DEPARTMENT OF FINANCIAL SERVICES
THE CAPITOL, TALLAHASSEE, FLORIDA 32399-0301 • (850) 413-2850 • TELECOPIER (850) 413-2950



ALEX SINK
STATE RISK MANAGEMENT TRUST FUND

### CERTIFICATE OF COVERAGE

Policy Number:

AL-08-0201

AUTOMOBILE LIABILITY

Name Insured:

FLORIDA ATLANTIC UNIVERSITY

Automobile Liability Coverage provided pursuant to Chapter 284, Part II, Section 768.28, Florida Statutes, the Florida Vehicle No-Fault Law, and any rules promulgated thereunder.

Coverage Limits:

General Liability:

\$100,000.00 each person

\$200,000.00 each occurrence

Personal Injury:

\$10,000.00 each person

\$10,000.00 each occurrence

Inception Date:

7/1/08

Expiration Date:

7/1/09

Chief Financial Officer

alex Sink

DI4-864 (REV. 3/01)

DEPARTMENT OF FINANCIAL SERVICES
THE CAPITOL, TALLAHASSEE, FLORIDA 32399-0301 • (850) 413-2850 • TELECOPIER (850) 413-2950



ALEX SINK
STATE RISK MANAGEMENT TRUST FUND

#### CERTIFICATE OF COVERAGE

Policy Number:

WC-08-0201

STATE EMPLOYEE WORKERS'

COMPENSATION and EMPLOYER'S

LIABILITY

Name Insured:

FLORIDA ATLANTIC UNIVERSITY

Coverage Limits:

Coverage A - Compensation coverage is provided to comply with the applicable State Workers' Compensation, Occupational Disease Laws and any rule promulgated thereunder.

Coverage B

\$100,000.00 each person

\$200,000.00 each occurrence

Inception Date:

7/1/08

Expiration Date:

7/1/09

Chief Financial Officer

DI4-867 (REV. 3/01)

DEPARTMENT OF FINANCIAL SERVICES

THE CAPITOL, TALLAHASSEE, FLORIDA 32399-0301 • (850) 413-2850 • TELECOPIER (850) 413-2950