

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY**

Meeting Date: October 19, 2010 Consent Regular
 Public Hearing Workshop

Department:

Submitted by: Information Systems Services
Submitted for: Countywide GIS

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve:

A) Amendment No. 3 to Contract R2006-2516 with Surdex Corporation to extend the term of the contract to November 21, 2011; and

B) Amendment No. 3 to Contract R2006-2517 with BAE Systems NSS Inc., to extend the term of the contract to November 21, 2011; and

C) Amendment No. 3 to Contract R2006-2518 with Woolpert, Inc. to extend the term of the contract to November 21, 2011.


Summary: Three firms were selected using the Consultant Competitive Negotiations Act (CCNA) process, contracted on November 21, 2006 to perform digital ortho photography and planimetric mapping for the County (R2006-2516, R2006-2517, and R2006-2518). These Amendments exercise the third and final of three (3) one-year renewal options set forth in the original contracts. No additional costs are associated with these amendments. Surdex Corporation, a Missouri-based company, subcontracts approximately 8% of their work to a Palm Beach County firm. BAE Systems a New Jersey-based Company, subcontracts 12% of their work to a Palm Beach County firm, and Woolpert, Inc., an Ohio-based company with offices in Orlando and Miami, FL, subcontracts 3% of their work to a Palm Beach County subcontractor. These Amendments provide for disclosure of County Ordinance No. 2009-049 establishing the Office of the Inspector General. Countywide (PK)

Background and Justification: In November 2006, contracts were established with Surdex Corporation, BAE Systems NSS Inc., and Woolpert, Inc., to provide mapping services. Planimetric mapping entails delineating a list of features, such as drainage, building outlines and edge of pavements, from aerial photos to within +/- 0.5 foot accuracy. Digital ortho photography is aerial photos rectified to match the earth's surface location. All Task Orders in excess of \$100,000 must be approved by the Board. The first one-year renewal option was approved by the Board of County Commissioners on October 21, 2008, and the second one-year renewal option was approved on November 17, 2009.

Attachments:

- 1. Amendment No. 3 for Surdex Corporation (2) originals
- 2. Amendment No. 3 for BAE Systems NSS Inc. (2) originals
- 3. Amendment No. 3 for Woolpert, Inc. (2) originals

Recommended by:  9/30/2010
Department Director Date

Approved by:  10/7/2010
County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact

Fiscal Years	<u>2011</u>	<u>2012</u>	<u>2013</u>	<u>2014</u>	<u>2015</u>
Capital Expenditures	\$ 0	\$0	0	0	0
Operating Costs	<u>0</u>	0	<u>0</u>	<u>0</u>	<u>0</u>
External Revenues	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Program Inc (County)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
In-Kind Match (County)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
NET FISCAL IMPACT	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>	\$ <u>0</u>

See below

Additional FTE Positions (Cumulative) 0 0 0 0 0

Is Item Included in Current Budget Yes No

Budget Account Number(s): Fund Dept. Unit Object

B. Recommended Sources of Funds / Summary of Fiscal Impact

No Fiscal Impact

C. Department Fiscal Review: _____

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Administration Comments:

No fiscal impact. Contract is for time extension only. Budget is setup in the GIS unit (unit 1315)

[Signature] 10/5/10
OFMB
10/14/10
10/11/10

[Signature] 10/6/10
Contract Administration
E. Jones 10/6/10

B. Legal Sufficiency:

[Signature] 10/7/10
Assistant County Attorney

These amendments comply with our review requirements.

C. Other Department Review:

Department Director

AMENDMENT NO. 3 TO CONTRACT FOR
CONSULTING/PROFESSIONAL SERVICES

This AMENDMENT No. 3, dated _____, 2010 to the contract of November 21, 2006, between Palm Beach County, a political Subdivision of the State of Florida, by and through, its Board of Commissioners, hereinafter referred to as COUNTY, and SURDEX CORPORATION, 520 Spirit of St. Louis Blvd., St. Louis, MO 63006, a corporation authorized to do business in the State of Florida, hereinafter referred to as the CONSULTANT, whose Federal I.D. is 43-0690641.

WHEREAS, the parties have entered into a Contract (R2006-2516) of November 21, 2006, under which the CONSULTANT furnishes professional/consultation services in the area of Planimetric and Digital Ortho Photography mapping goods and services on behalf of the COUNTY; and

WHEREAS, the parties mutually desire to extend the Contract until November 21, 2011.

NOW THEREFORE, in consideration of the mutual promises contained herein the parties agree as follows:

1. In Article 2, SCHEDULE, the expiration date of the contract amended on November 21, 2009 to November 21, 2010 is deleted, and November 21, 2011 is substituted.
2. In Article 20, ACCESS AND AUDITS, the following Inspector General clauses are added:
 - a. Palm Beach County has established the Office of the Inspector General in Ordinance 2009-049, as may be amended, which is authorized and empowered to review past, present and proposed County contracts, transactions, accounts and records. The Inspector General has the power to subpoena witnesses, administer oaths and require the production of records, and audit, investigate, monitor, and inspect the activities of the CONSULTANT, its officers, agents, employees, and lobbyists in order to ensure compliance with contract requirements and detect corruption and fraud.
 - b. Failure to cooperate with the Inspector General or interference or impeding any investigation shall be in violation of Ordinance 2009-049, and punished pursuant to Section 125.69, Florida Statutes, in the same manner as a second degree misdemeanor.

Except as expressly modified above all the terms and conditions of the contract of November 21, 2006 are confirmed and remain in full force and effect.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Amendment on behalf of the COUNTY and CONSULTANT has hereunto set its hand.

ATTEST
SHARON R. BOCK
CLERK & COMPTROLLER

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

By: _____
Deputy Clerk

By: _____
Burt Aaronson, Chair

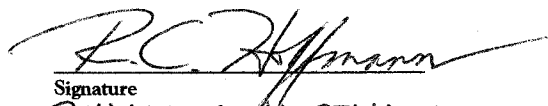
WITNESS

CONSULTANT


Signature

SURDEX CORPORATION

John Boeding
Name (type or print)


Signature
RONALD C. HOFFMANN
Name (type or print)

Title: PRESIDENT

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS
AND CONDITIONS

County Attorney


Steve Bordelon, Director of ISS



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/28/2009

PRODUCER (636)787-7777 FAX: (636)787-7778

Weiss Insurance
3 Trade Center Blvd
Suite 100

Chesterfield MO 63005

INSURED
SURDEX CORPORATION
520 SPIRIT OF SAINT LOUIS BLVD

CHESTERFIELD MO 63005-1002

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURER A: AMCO Insurance Company
INSURER B: Nationwide Mutual Ins Co
INSURER C: Travelers
INSURER D:
INSURER E:NAIC #
19100
23787

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	ACPGLA07132478791	01/01/2010	01/01/2011	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	ACPBA7122478791	01/01/2010	01/01/2011	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
A	EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	ACP7102478791	01/01/2010	01/01/2011	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000 DEDUCTIBLE \$ RETENTION \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below				Y/N <input type="checkbox"/> WG STATU-TORY LIMITS: OTH-ER: E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
C	OTHER Professional Liability	105213717	01/01/2010	01/01/2011	Each Wrongful Act \$1,000,000 Total Limit of Ins. \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Certificate holder is listed as additional insured. Coverage for work done by insured for Palm Beach County.

CERTIFICATE HOLDER

Palm Beach County ISS
Penny Anderson
301 N. Olive Avenue
8th Floor
West Palm Beach, FL 33401

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
Matthew Weiss/LAUERACORD 25 (2009/01)
INS025 (200901)

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IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

This Certificate of Insurance does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

ADDITIONAL COVERAGES

Ref #	Description	Coverage Code	Form No.	Edition Date
	LARGE PREMIUM DISCOUNT	LPDP		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
	MULTI POLICY DISCOUNT	MPD		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
	Schedule Mod Factor 1	SCH01		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
	Other Perm not sep sent	MISC		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium \$1,825.00
	Underinsured motorist combined single limit	UNCSL		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
1,000,000				Premium
	Medical payments	MEDPM		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
5,000				Premium
	Uninsured motorist combined single limit	UMCSL		
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
1,000,000				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium
Limit 1	Limit 2	Limit 3	Deductible Amount	Deductible Type
				Premium

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/2/2010

PRODUCER
NationAir Aviation Insurance
1525 Kautz Road, Suite 100
West Chicago, IL 60185

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED
Surdex Corporation
520 Spirit of St. Louis Blvd.
Chesterfield, MO 63005

INSURERS AFFORDING COVERAGE NAIC #
INSURER A: Global Aerospace/Tokio Marine & Nichido Fire
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES
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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSURANCE TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
GENERAL LIABILITY	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADY INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	GENE. AGGREGATE LIMIT APPLIES PER POLICY PRO. SEC. LOC				
AUTOMOBILE LIABILITY	<input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ACC \$ AGG \$
	<input type="checkbox"/> EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				EACH OCCURRENCE \$ AGGREGATE \$ DEDUCTIBLE \$ RETENTION \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/EMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	WC1600305	12/31/2009	12/31/2010	<input checked="" type="checkbox"/> WC STATE TOBY LIMITS E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER
Palm Beach County ISS
Attn: Penny Anderson
301 N. Olive Avenue, 8th Floor
West Palm Beach, FL 33401

CANCELLATION
SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL XX DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
AUTHORIZED REPRESENTATIVE
Brian A. Jones

IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

AMENDMENT NO. 3 TO CONTRACT FOR
CONSULTING/PROFESSIONAL SERVICES

This AMENDMENT No. 3, dated _____, 2010 to the contract of November 21, 2006, between Palm Beach County, a political Subdivision of the State of Florida, by and through, its Board of Commissioners, hereinafter referred to as COUNTY, and BAE SYSTEMS/NSS INC., a corporation authorized to do business in the State of Florida, hereinafter referred to as the CONSULTANT, whose Federal I.D. is 33-0536290.

WHEREAS, the parties have entered into a Contract (R2006-2517) of November 21, 2006, under which the CONSULTANT furnishes professional/consultation services in the area of Planimetric and Digital Ortho Photography mapping goods and services on behalf of the COUNTY; and

WHEREAS, the parties mutually desire to extend the Contract until November 21, 2011.

NOW THEREFORE, in consideration of the mutual promises contained herein the parties agree as follows:

1. In Article 2, SCHEDULE, the expiration date of the contract amended on November 21, 2009 to November 21, 2010 is deleted, and November 21, 2011 is substituted.
2. In Article 20, ACCESS AND AUDITS, the following Inspector General clauses are added:
 - a. Palm Beach County has established the Office of the Inspector General in Ordinance 2009-049, as may be amended, which is authorized and empowered to review past, present and proposed County contracts, transactions, accounts and records. The Inspector General has the power to subpoena witnesses, administer oaths and require the production of records, and audit, investigate, monitor, and inspect the activities of the CONSULTANT, its officers, agents, employees, and lobbyists in order to ensure compliance with contract requirements and detect corruption and fraud.
 - b. Failure to cooperate with the Inspector General or interference or impeding any investigation shall be in violation of Ordinance 2009-049, and punished pursuant to Section 125.69, Florida Statutes, in the same manner as a second degree misdemeanor.

Except as expressly modified above all the terms and conditions of the contract of November 21, 2006 are confirmed and remain in full force and effect.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Amendment on behalf of the COUNTY and CONSULTANT has hereunto set its hand.

ATTEST
SHARON R. BOCK
CLERK & COMPTROLLER

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

By: _____
Deputy Clerk

By: _____
Burt Aaronson, Chair

WITNESS

CONSULTANT

Andrew Pickford
Signature

BAE SYSTEMS/NSS INC.

Andrew Pickford
Name (type or print) Regional Mgr.

Didi Rufer
Signature

Didi Rufer Contracts Manager
Name (type or print)

Title: Contracts Manager

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS
AND CONDITIONS

County Attorney

Steve Bordelon
Steve Bordelon, Director of ISS



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

10/31/2010

10/28/2009

PRODUCER Lockton Companies, LLC-A DC 1110 Vermont Ave. NW, Suite 700 Washington DC 20005 (202) 414-2400	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED 1064666 BAE Systems, Inc. National Security Solutions, Inc. 124 Gaither Drive Suite #100 Mt. Laurel NJ 08054	INSURER A: ACE American Insurance Company	
	INSURER B: Indemnity Insurance Co of North America	43575
	INSURER C: Allianz Global Risks US Insurance Co	35300
	INSURER D:	
	INSURER E:	

COVERAGES BAESY01 J5

THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER AND THE CERTIFICATE HOLDER.

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS		
C		GENERAL LIABILITY	CGL 2002666	10/31/2009	10/31/2010	EACH OCCURRENCE	\$ 2,000,000	
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 2,000,000	
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10,000	
		GEN'L AGGREGATE LIMIT APPLIES PER:				PERSONAL & ADV INJURY	\$ 2,000,000	
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				GENERAL AGGREGATE	\$ 8,000,000	
						PRODUCTS - COMP/OP AGG	\$ 4,000,000	
A		AUTOMOBILE LIABILITY	ISAH08582397	10/31/2009	10/31/2010	COMBINED SINGLE LIMIT (Ea accident)	\$ 2,000,000	
		<input checked="" type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$ XXXXXXXX	
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$ XXXXXXXX	
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$ XXXXXXXX	
		<input type="checkbox"/> HIRED AUTOS						
		<input type="checkbox"/> NON-OWNED AUTOS						
		GARAGE LIABILITY	NOT APPLICABLE			AUTO ONLY - EA ACCIDENT	\$ XXXXXXXX	
		<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	\$ XXXXXXXX	
						AGG	\$ XXXXXXXX	
		EXCESS / UMBRELLA LIABILITY	NOT APPLICABLE			EACH OCCURRENCE	\$ XXXXXXXX	
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ XXXXXXXX	
		<input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> UMBRELLA FORM					\$ XXXXXXXX	
		RETENTION \$					\$ XXXXXXXX	
							\$ XXXXXXXX	
B		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WLRC45705353 (AOS)	10/31/2009	10/31/2010	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS	OTH-ER	
A		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	WLRC45705365 (CA Only)	10/31/2009	10/31/2010	E.L. EACH ACCIDENT	\$ 1,000,000	
A		If yes, describe under SPECIAL PROVISIONS below	SCFC45705377 (WI Only)	10/31/2009	10/31/2010	E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000	
						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000	
		OTHER						

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 RE: PLANIMETRIC AND DIGITAL ORTHO PHOTOGRAPHY MAPPING SERVICES. PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS, A POLITICAL SUBDIVISION OF THE STATE OF FLORIDA, ITS OFFICERS, EMPLOYEES AND AGENTS ARE LISTED AS ADDITIONAL INSURED AS REQUIRED BY WRITTEN CONTRACT. A WAIVER OF SUBROGATION IS APPLICABLE.

CERTIFICATE HOLDER

2394984
 PALM BEACH COUNTY
 ISS/COUNTYWIDE GIS
 ATTN: PENNY ANDERSON
 301 N. OLIVE AVE., 8TH FLOOR
 WEST PALM BEACH FL 33401

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD 25 (2009/01)

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For questions regarding this certificate, contact the number listed in the 'Producer' section above and specify the client code 'BAESY01'.

AMENDMENT NO. 3 TO CONTRACT FOR
CONSULTING/PROFESSIONAL SERVICES

This AMENDMENT No. 3, dated _____, 2010 to the contract of November 21, 2006, between Palm Beach County, a political Subdivision of the State of Florida, by and through, its Board of Commissioners, hereinafter referred to as COUNTY, and WOOLPERT INC., a corporation authorized to do business in the State of Florida, hereinafter referred to as the CONSULTANT, whose Federal I.D. is 20-1391306.

WHEREAS, the parties have entered into a Contract (R2006-2518) of November 21, 2006, under which the CONSULTANT furnishes professional/consultation services in the area of Planimetric and Digital Ortho Photography mapping goods and services on behalf of the COUNTY; and

WHEREAS, the parties mutually desire to extend the Contract until November 21, 2011.

NOW THEREFORE, in consideration of the mutual promises contained herein the parties agree as follows:

1. In Article 2, SCHEDULE, the expiration date of the contract amended on November 21, 2009 to November 21, 2010 is deleted, and November 21, 2011 is substituted.
2. In Article 20, ACCESS AND AUDITS, the following Inspector General clauses are added:
 - a. Palm Beach County has established the Office of the Inspector General in Ordinance 2009-049, as may be amended, which is authorized and empowered to review past, present and proposed County contracts, transactions, accounts and records. The Inspector General has the power to subpoena witnesses, administer oaths and require the production of records, and audit, investigate, monitor, and inspect the activities of the CONSULTANT, its officers, agents, employees, and lobbyists in order to ensure compliance with contract requirements and detect corruption and fraud.
 - b. Failure to cooperate with the Inspector General or interference or impeding any investigation shall be in violation of Ordinance 2009-049, and punished pursuant to Section 125.69, Florida Statutes, in the same manner as a second degree misdemeanor.

Except as expressly modified above all the terms and conditions of the contract of November 21, 2006 are confirmed and remain in full force and effect.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Amendment on behalf of the COUNTY and CONSULTANT has hereunto set its hand.

ATTEST
SHARON R. BOCK
CLERK & COMPTROLLER

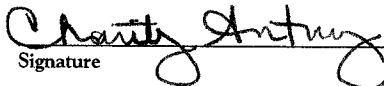
PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

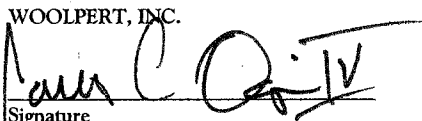
By: _____
Deputy Clerk

By: _____
Burt Aaronson, Chair

WITNESS

CONSULTANT


Signature

WOOLPERT, INC.

Signature

Charity Antunez
Name (type or print)

James C. Ogier
Name (type or print)

Title: Practice Leader

APPROVED AS TO FORM
AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS
AND CONDITIONS

County Attorney


Steve Bordelon, Director of ISS



CERTIFICATE OF LIABILITY INSURANCE

OP ID SHCL
WOOLP-1

DATE (MM/DD/YYYY)

09/28/10

PRODUCER Nichols Rogers Knipper 533 E First St. Dayton OH 45402 Phone: 937-222-4666 Fax: 937-222-0103	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Woolpert Inc. 4454 Idea Center Blvd Dayton OH 45430-1500	INSURER A: The Hartford Casualty Ins Co	29424
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	X	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Contractual Liab <input checked="" type="checkbox"/> XCU Included GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC	33UUNIE2329	01/01/10	01/01/11	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPROP AGG \$2,000,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	33UENTI4239	01/01/10	01/01/11	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under SPECIAL PROVISIONS below Y/N <input checked="" type="checkbox"/> N	33WBPN3041 EXCL MONOPOLISTIC & CO	12/31/09	12/31/10	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER EL EACH ACCIDENT \$1,000,000 EL DISEASE - EA EMPLOYEE \$1,000,000 EL DISEASE - POLICY LIMIT \$1,000,000
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Palm Beach County is additional insured for general liability as per written contract. All policies contain waiver of subrogation in favor of additional insured.

CERTIFICATE HOLDER PALMB-3 Palm Beach County 301 N. Olive Ave. 8th FL West Palm Beach FL 33401	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE William J. Moran, A. Argan
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CERTIFICATE OF INSURANCE

09-28-2010

Producer:
Ames & Gough, Inc.
8300 Greensboro Drive, Suite 980
McLean, VA 22102
(703) 827-2277

LEXINGTON
100 SUMMER STREET, BOSTON, MASSACHUSETTS 02110
ARCHITECTS/ENGINEERS PROFESSIONAL AND
POLLUTION INCIDENT LIABILITY

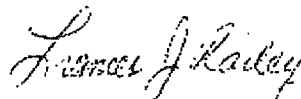
To: Palm Beach County
301 N. Olive Avenue, 8th Floor
West Palm Beach, FL 33401

As set forth below, the named insured has in force, on the date indicated, a policy of Architects/Engineers Professional And Pollution Incident Liability insurance with a limit of liability of not less than the amount indicated.

This certificate is issued as a matter of information only and confers no rights upon the holder. By its issuance, it does not alter, change, modify or extend the provisions of said policy and does not waive any rights thereunder.

Name of Insured:**WOOLPERT, INC.****Policy Period:****7/8/2010 TO 7/8/2011****Address of Insured:****4454 IDEA CENTER BOULEVARD
DAYTON, OH 45430-1500****Limit Of Liability - Per Claim:****\$1,000,000.00****Policy Number:****21456787****Limit of Liability - Annual Aggregate:****\$1,000,000.00****Insurance Company****LEXINGTON**

AMES & GOUGH
INSURANCE/RISK MANAGEMENT, INC.



Frances J. Railey, CPCU

#23126