

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY

=====
Meeting Date: May 15, 2012 Consent Regular
 Workshop Public Hearing
Department:

Submitted By: Department of Airports

Submitted For:
=====

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve:

- (A) Change Order No. 6 to the contract with David Brooks Enterprises, Inc. in the amount of \$39,581.84 and a time extension of 37 Calendar Days to the Terminal Flooring Improvements-Phase 1 project at Palm Beach International Airport (PBIA); and
- (B) A Budget Transfer of \$39,582 in the Airports Improvement and Development Fund from Reserves to provide additional budget to fund the Change Order.

Summary: On October 5, 2010, the BCC approved the contract with David Brooks Enterprises, Inc. in the amount of \$1,196,311 (R-2010-1605). Change Orders 1 through 5 were approved in accordance with the authority delegated in PPM No. CW-F-050 for an increase to the contract in the amount of \$188,772.78 and 108 Calendar Days. Approval of Change Order No. 6 in the amount of \$39,581.84 will extend the contract by 37 Calendar Days. The Disadvantaged Business Enterprise (DBE) Goal for this project was established at 18%. The total DBE participation to date is 69%. **Countywide (JCM)**

Background and Justification: Change Order No. 6 will cover items described in the attached summary sheet containing description, summary explanation and cost for each item as submitted in 7 requests for change orders by David Brooks Enterprises Inc. One of these proposals is at the request of the Department of Airports to purchase an additional 4,880 square feet of tile to be used as attic stock that became available from the Manufacturer due to a cancelled order. Purchasing this tile from the same lot that was manufactured for this project ensures that there will be no difference in color variation. The tile will be installed as Owner furnished material in Phase 2 of the Flooring Improvements that will be bid as a separate contract in the near future. The Contract time will be extended by 37 Calendar Days to process the change order and procure the tile. Change Order No. 6 is being brought to the BCC due to the Budget Transfer required to fund the work.

Attachments:

- 1. Change Order No. 6 with Change Order History- (3 Originals)
- 2. Budget Transfer

=====
Recommended By: *[Signature]* 4/16/12
 Department Director Date
Approved By: *[Signature]* 4/16/12
 County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2012	2013	2014	2015	2016
Capital Expenditures	\$39,582				
Operating Costs					
External Revenues (FDOT)					
Program Income (County)					
In-Kind Match (County)					
NET FISCAL IMPACT	\$39,582				
# ADDITIONAL FTE POSITIONS (Cumulative)					

Is Item Included In Current Budget? Yes No
 Budget Account No.: Fund 4111 Department 121 Unit A212 Object 6211
 Reporting Category _____

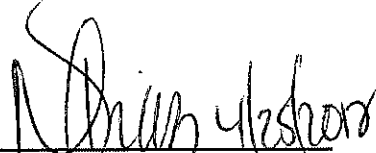
B. Recommended Sources of Funds/Summary of Fiscal Impact:

Approval of this item results in capital expenditures of \$39,581.84. This item includes a transfer from reserves of \$39,582.


C. Departmental Fiscal Review: 17M Sumner

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Dev. and Control Comments:



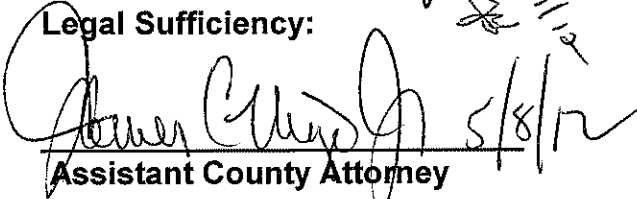
 OFMB



 Contract Dev. and Control

4/24/12
5/19/12
5-2-12

B. Legal Sufficiency:



 Assistant County Attorney

5/8/12

C. Other Department Review:

 Department Director

CHANGE ORDER

- | | | | |
|-------------------------------------|-------------------------------|-------------------------------------|--|
| <input checked="" type="checkbox"/> | Owner Initiate | <input checked="" type="checkbox"/> | Quantity Overruns/Underruns |
| <input checked="" type="checkbox"/> | Differing Site Conditions | <input type="checkbox"/> | Request By Another Agency/Outside Party |
| <input type="checkbox"/> | Zoning/Code/Ordinance Changes | <input type="checkbox"/> | A. Reimbursable <input type="checkbox"/> B. Non-Reimbursable |
| <input type="checkbox"/> | Errors/Omissions/In Design | <input type="checkbox"/> | Other |

PROJECT: **Terminal Flooring Improvements Phase 1
Palm Beach International Airport**

CHANGE ORDER NO: **Six (6)**
 COUNTY/FAA PROJECT NO: **PB10-8**
 CONTRACT DATE: **October 5, 2011**
 RESOLUTION NO. **R2010-1605**
 DISTRICT # **2**

TO: **David Brooks Enterprises, Inc.
9000 Burma Rd., Ste 101
Palm Beach Gardens, FL 33403**

Description of Change:

- This Change Order includes the costs as detailed in seven (7) Cost Change Proposals (CCP's) submitted by the Contractor. A Description of the work, explanation and the costs are detailed in the attached Exhibit 1 Change Order Summary.
Total Change to the Contract **\$39,581.84**
- This Change Order includes a time extension of 37 Calendar Days to process the change order and order the tile.

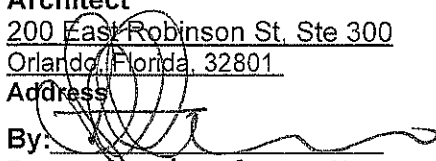
EXECUTION OF THIS CHANGE ORDER ACKNOWLEDGES FINAL SETTLEMENT OF, AND RELEASES ALL CLAIMS FOR, COSTS AND TIME ASSOCIATED, DIRECTLY OR INDIRECTLY, WITH THE ABOVE STATED MODIFICATION(S), INCLUDING ALL CLAIMS FOR CUMULATIVE DELAYS OR DISRUPTIONS RESULTING FROM, CAUSED BY, OR INCIDENT TO, SUCH MODIFICATION(S), AND INCLUDING ANY CLAIM THAT THE ABOVE-STATED MODIFICATION(S) CONSTITUTES, IN WHOLE OR PART, A CARDINAL CHANGE TO THE CONTRACT.

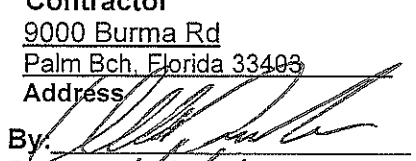
The Original Contract Sum was	\$1,196,311.00
Net change by previous Change Orders	\$188,772.78
The Contract Sum prior to this Change Order	\$1,385,083.78
The Contract Sum will be increased by this Change Order	\$39,581.84
The new Contract Sum including Change Order will be	\$1,424,665.62
The Time to complete this Contract will be increased/decreased by	37 Calendar days.
The Date of Substantial Completion of this Change Order therefore is	May 21, 2012

SCHENKELSHULTZ
Architect
 200 East Robinson St, Ste 300
 Orlando, Florida, 32801
 Address

David Brooks Enterprises
Contractor
 9000 Burma Rd
 Palm Bch, Florida 33403
 Address

PBC Bd. of County Commissioners
Owner
 P.O. Box 21229
 West Palm Beach, FL 33406
 Address

By: 
 Date: 4.10.2012

By: 
 Date: 4/18/12

By: _____
 Date: _____

PALM BEACH COUNTY DEPARTMENT OF AIRPORTS

Attest: SHARON R. BOCK
 Clerk & Comptroller


Approved as to Form and Legal
 Sufficiency

By: _____
 Deputy Clerk

**APPROVED AS TO TERMS
 AND CONDITIONS:**

By: _____
 County Attorney

PB10-8 Terminal Flooring Improvements

By: 
 Director of Airports

Attachment # 1

PALM BEACH INTERNATIONAL AIRPORT							RESOLUTION NO:R-2011-0494	
							DAVID BROOKS ENTERPRISES	
PB 10-8 TERMINAL FLOORING IMPROVEMENTS PHASE 1								
EXHIBIT 1 CHANGE ORDER NO 6: SUMMARY								
				COST				
PAY ITEM	DESCRIPTION	UNIT	QTY	UNIT COST	AMOUNT	DAYS	CODE	SUMMARY EXPLANATION
	New Pay Items							
35	CCP 14 Removal of membrane in T32	LS	1	\$771.13	\$771.13		Unforeseen Conditions	Existing crack membrane was discovered following demo of tile in phase T32 of the Terminal. Needed to be completely removed to meet the warranty requirements by the manufacturer of the crack membrane
36	CCP 16 Removal of membrane in T36	LS	1	\$725.43	\$725.43		Unforeseen Conditions	Existing crack membrane was discovered following demo of tile in Phase T36 of the Terminal. Needed to be completely removed to meet the warranty requirements by the manufacturer of the crack membrane
37	CCP 18 Base Changes	LS	1	\$1,187.09	\$1,187.09		Quantity Underruns, contract adjustments,	Base Changes at restroom in Terminal, Elevator lobbies and at round columns
38	CCP 21 Replace damaged tiles	LS	1	\$1,424.37	\$1,424.37		Unforeseen Conditions	Multiple tiles were broken following installation due to transport of materials by other tenants
39	CCP 22 Credit for installation of 236 sf of tile	LS	1	(\$1,579.50)	(\$1,579.50)			Credit to accept tile in lieu of remove and replace. The control joint was not installed per specifications
40	CCP 23 Cost to re-Install Data line to ATM machine	LS	1	\$513.01	\$513.01		Unforeseen Conditions	The Data line to the ATM machine in the terminal had to be re-routed to accommodate the tile installation
41	CCP24 Purchase 4,880sf of Tile	LS	1	\$36,540.31	\$36,540.31		Department of Airports	Costs include the purchase of 4,880 sf of tile from the manufacturer that that was from the same batch and became available due to a cancelled order. Tile will be stored for the Phase 2 flooring project
Total Change Order No.6					\$39,581.84	37	Days	
							LEGEND	
							Error	
							\$0.00	Omission/recommended and/or required in project.
							\$0	Other Agency (TSA, PZ&B, Fire Marshall)
							\$36,540.31	Department of Airports
							\$3,433.94	Conditions not normally anticipated or encountered in construction.
							\$1,187.09	Quantity Underruns, contract adjustments,
							\$39,581.84	Total Change Order #6



CONSTRUCTION CHANGE PROPOSAL

Project: Terminal Flooring Improvements Ph1 Number: PB 10-8
 To: Cindy Portnoy, PBIA Project Manager From: Mark Davidson, David Brooks Ent.
 Re: Change in SF installation Date: 3-21-12

Keyword Description: CCP 14 - Remove concealed membrane in T32
 Date Quotation Required: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a proposal as described in Item 1. The proposal should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit as required in General Provisions SP 10. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (include list of attachments) - in T32, upon removal of the existing tile, we discovered a crack suppression membrane. A check with the specified membrane manufacturer confirmed that the existing membrane must be removed prior to installation of new system.

2. Reason(s) for Modification: Owner Unforeseen Conditions (site, weather, etc.) Other

3. Approval of Request:

Owner: _____ Date: _____
 Engineer: _____ Date: _____

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 771.13

5. Will a modification to the contract time be required? Yes No

If so, trade(s): _____

No. of personnel: _____

Duration: _____ (calendar days)

6. Attachment identification: (list) _____

7. Quotation is in effect until: (date) _____

8. Approval of Quotation

Contractor:  Date: 3/24/12

Complete and attach Proposal Worksheet Detail for each element of Work. Enter Worksheet Information below.

CONSTRUCTION CHANGE PROPOSAL Cont.

PROPOSAL WORKSHEET SUMMARY

CCP - 014- Remove concealed crack suppression membrane in T32

* Labor shall be broken down by classification

ADDITIONS:

Item	Sheet	Description	Material		
			SF	Unit Price	Subtotal
		Add for machine removal of crack suppression & tile adhered to membrane	450.00	\$ 1.00	\$ 450.00
			Subtotal Material		\$ 450.00
			*Labor		
			SF	Rate	Subtotal
		Labor to remove additional material to dumpster (2 men 5.25 hours each)	10.50	19.36	203.28
			Subtotal Labor		\$ 203.28
		Subtotal:			\$ 653.28

DEDUCTIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
			Subtotal Material		\$ -
			*Labor		
			Hours	Rate	Subtotal
			Subtotal Labor		\$ -
		Subtotal:			\$ -

Subcontractor's Net:	\$ 653.28
Subcontractor's OH&P:	\$ 65.33
Subcontractor's Bond:	\$ -
Subcontractor's Total:	\$ 718.61
Contractor's OH&P:	\$ 36.78
Contractor's Bond:	\$ 11.73
Insurance:	\$ 4.01
Tax:	
Worksheet Total:	\$ 771.13

D&C Technologies

13548 82ND Lane North • West Palm Beach, FL 33412
 Dale Short (561) 379-4575 •
 Fax (561) 795-5012

Bid Invoice

Customer: Brain's Carpet + Flooring
5401 Haverhill Rd #113
W.P.B FL 33407
 Fax: 242-9502

Date: 11/3/12

Job Location (<u>Palm Beach Airport</u>)	Cost Per Ft.	Total
Carpet		
Carpet with VCT under		
VCT () Layer		
Ceramic Tile - <u>200 SF Removal of Remaining Tile</u>	<u>1.25</u>	<u>250.00</u>
Wood		
Marble <u>(This was Demo price to show you only First Trip)</u>		
Sheet Vinyl		
Mud Bed		
Rescrape () <u>1,331 SF of Crack Suppression</u>	<u>1.00</u>	<u>450.00</u>
Removal - Disposal		
Fuel - Toll's		
TOTAL		<u>\$700.00</u>

Removal of flooring material does not guarantee 100% removal of mastic and/or thinset.
 Rescrape available upon inspection, for an additional charge.

Customer acknowledges that payment is due in full upon completion of service.

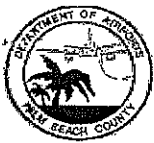
Print Name: _____

Date: _____

Signature: _____

TERMS: _____ Thank You Dale

Flooring Preparation Specialist



CONSTRUCTION CHANGE PROPOSAL

Project: Terminal Flooring Improvements Ph1 Number: PB 10-8
 To: Cindy Portnoy, PBlA Project Manager From: Mark Davidson, David Brooks Ent.
 Re: Change in SF installation Date: 3-9-12

Keyword Description: CCP 16 – Remove concealed membrane in T36
 Date Quotation Required: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a proposal as described in Item 1. The proposal should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit as required in General Provisions SP 10. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (include list of attachments) – in T36, upon removal of the existing tile, we discovered a crack suppression membrane. A check with the specified membrane manufacturer confirmed that the existing membrane must be removed prior to installation of new system.

2. Reason(s) for Modification: Owner Unforeseen Conditions (site, weather, etc.) Other

3. Approval of Request:

Owner: _____ Date: _____
 Engineer: _____ Date: _____

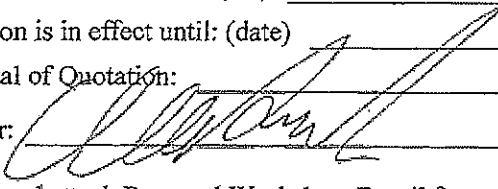
To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$725.43
 5. Will a modification to the contract time be required? Yes No
 If so, trade(s): _____
 No. of personnel: _____
 Duration: _____ (calendar days)

6. Attachment identification: (list) _____

7. Quotation is in effect until: (date) _____

8. Approval of Quotation:

Contractor:  Date: 3/8/12

Complete and attach Proposal Worksheet Detail for each element of Work. Enter Worksheet Information below.

**CONSTRUCTION CHANGE PROPOSAL Cont.
PROPOSAL WORKSHEET SUMMARY**

CCP - 0016 Removal of membrane - Phase T36

* Labor shall be broken down by classification

ADDITIONS:

Item	Sheet	Description	Material		
			SF	Unit Price	Subtotal
Demo		Remove membrane (crack suppression)	548.00	\$ 1.00	548.00
					-
			Subtotal Material		\$ 548.00
			*Labor		
		labor to remove membrane to dumpster	HR	Rate	Subtotal
			3.50	\$ 19.36	67.76
					0
					0
			Subtotal Labor		\$ 67.76
			Subtotal:		\$ 615.76

DEDUCTIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
			Subtotal Material		\$ -
			*Labor		
			Hours	Rate	Subtotal
					-
			Subtotal Labor		\$ -
			Subtotal:		\$ -

Subcontractor's Net:	\$	615.76
Subcontractor's OH&P:	\$	61.58
Subcontractor's Bond:	\$	-
Subcontractor's Total:	\$	677.34
Contractor's OH&P:	\$	33.87
Contractor's Bond:	\$	10.67
Insurance:	\$	3.56
Tax:		
Worksheet Total:	\$	725.43

D&C Technologies

13548 82ND Lane North • West Palm Beach, FL 33412
 Dale Short (561) 379-4575 •

Fax (561) 795-5012

Bid Invoice

Customer: BRAIN'S Carpet + Flooring
5401 Haverhill Rd #113
W.P.B FL 33407
 Fax: 242-9502

Date: 2/13/2012

Job Location (<u>Palm Beach Airport</u>)	Cost Per Ft.	Total
Carpet		
Carpet with VCT under		
VCT () Layer		
Ceramic Tile - <u>548 SF</u>	1.25	685.00
Wood		
Marble		
Sheet Vinyl		
Mud Bed		
Rescrape () <u>548 SF of Crack Suppression</u>	1.00	548.00
Removal - Disposal <u>and Ardex</u>		
Fuel - Toll's		
TOTAL		<u>\$1,233.00</u>

Removal of flooring material does not guarantee 100% removal of mastic and/or thinset.
 Rescrape available upon inspection, for an additional charge.

Customer acknowledges that payment is due in full upon completion of service.

Print Name: _____

Date: _____

Signature: _____

TERMS: _____ Thank You Dale

Flooring Preparation Specialist



CONSTRUCTION CHANGE PROPOSAL

Project: Terminal Flooring Improvements Ph1 Number: PB 10-8
 To: Cindy Portnoy, PBI A Project Manager From: Mark Davidson, David Brooks Ent.
 Re: Change in SF installation Date: 3-21-12

Keyword Description: CCP 18 – Additional Base Changes
 Date Quotation Required: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a proposal as described in Item 1. The proposal should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit as required in General Provisions SP 10. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (include list of attachments) – per RFI 20 response and Field Instruction 1, we are to add base in several areas. This is the cost to fabricate and add that base.

2. Reason(s) for Modification: Owner Unforeseen Conditions (site, weather, etc.) Other

3. Approval of Request:

Owner: _____ Date: _____
 Engineer: _____ Date: _____

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 1,187.09
 5. Will a modification to the contract time be required? Yes No
 If so, trade(s): _____
 No. of personnel: _____
 Duration: _____ (calendar days)

6. Attachment identification: (list) _____

7. Quotation is in effect until: (date) _____

8. Approval of Quotation:

Contractor: [Signature] Date: 3/21/12

Complete and attach Proposal Worksheet Detail for each element of Work. Enter Worksheet Information below.

CONSTRUCTION CHANGE PROPOSAL Cont.

PROPOSAL WORKSHEET SUMMARY

CCP 018 - more base added by RFI and Field Instructions

* Labor shall be broken down by classification

ADDITIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
		Limestone Ivory Base 7 x 24 pcs	65.00	\$ 7.13	463.45
		Base Fabrication (unit price from Bryants)	65.00	\$ 4.50	292.50
Subtotal Material					\$ 755.95
			*Labor		
		Labor to install 65 additional pieces	Hours 13.00	Rate \$ 19.36	Subtotal 251.68
Subtotal Labor					\$ 251.68
Subtotal:					\$ 1,007.63

DEDUCTIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
Subtotal Material					\$ -
			*Labor		
Subtotal Labor					\$ -
Subtotal:					\$ -

Subcontractor's Net:	\$	1,007.63
Subcontractor's OH&P:	\$	100.76
Subcontractor's Bond:	\$	-
Subcontractor's Total:	\$	1,108.39
Contractor's OH&P:	\$	55.42
Contractor's Bond:	\$	17.46
Insurance:	\$	5.82
Tax:		
Worksheet Total:	\$	1,187.09

BRIAN'S CARPET & COMMERCIAL FLOORING, INC.

5401 N. HAVERHILL ROAD, SUITE 113
 WEST PALM BEACH, FL. 33407
 PH: (561) 242-9500 FAX: (561) 242-9502

Change Order

Date	Estimate #
3/18/2012	16698

Name / Address
DAVID BROOK ENTERPRISES, INC. 9000 BURMA ROAD STE 101 PALM BEACH GARDENS, FL 33404-1601

				Project
				CO Additional 7" Base
Item	Description	Qty	Cost	Total
	PBJA Change Order Additional 7" base at 1. Returns at carpeted areas (Elevator and waiting areas) 2. Bathroom returns 3. Coral walls at store fronts not receiving new tile 4. Columns at carpet areas (C concourse exit)			
PC-1	PORCELAIN BASE Limestone Ivory 7x24 pc	65	7.13	463.45
FAB	Fabrication	65	4.50	292.50
L-1	Labor:	13	19.36	251.68
OH & P	OVERHEAD AND PROFIT:		100.76	100.76
			Subtotal	\$1,108.39
			Sales Tax (6.0%)	\$0.00
			Total	\$1,108.39



CONSTRUCTION CHANGE PROPOSAL

Project: Terminal Flooring Improvements Ph1 Number: PB 10-8
 To: Cindy Portnoy, PBIA Project Manager From: Mark Davidson, David Brooks Ent.
 Re: Replacement of tiles damaged by others Date: 3-28-12

Keyword Description: CCP - 021 - Replacement of tiles in terminal damaged by others
 Date Quotation Required: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a proposal as described in Item 1. The proposal should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit as required in General Provisions SP 10. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (include list of attachments) --Replacement of 30 tiles in terminal - damaged by others. Work includes removal, replacement and regrouting and recleaning of: - six Lavento (red) tiles and 24 Ivory (border) tiles. Tiles were taken from attic stock and are so reflected on the attic stock calculations forwarded to DOA this date.

2. Reason(s) for Modification: Owner Unforeseen Conditions (site, weather, etc.) Other

3. Approval of Request:

Owner: _____ Date: _____
 Engineer: _____ Date: _____

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 1,424.37

5. Will a modification to the contract time be required? Yes No

If so, trade(s): _____

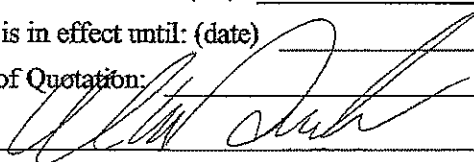
No. of personnel: _____

Duration: _____ (calendar days)

6. Attachment identification: (list) _____

7. Quotation is in effect until: (date) _____

8. Approval of Quotation:

Contractor:  Date: 3/28/12

Complete and attach Proposal Worksheet Detail for each element of Work. Enter Worksheet Information below.

**CONSTRUCTION CHANGE PROPOSAL Cont.
PROPOSAL WORKSHEET SUMMARY**

CCP 021 - replace 30 tiles (6 lavento, 24 ivory) tile damaged by others in terminal

* Labor shall be broken down by classification

ADDITIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
		GraniRapid (thinset) powder	3.00	\$ 22.28	66.84
		GraniRapid (thinset) liquid	1.00	\$ 76.42	76.42
		Epoxy Grout	1.00	\$ 42.33	42.33
		NOTE: Tile materials consumed from attic stock	-	\$ -	-
			Subtotal Material		\$ 185.59
			*Labor		
			Hours	Rate	Subtotal
		Labor to demolish and replace and regROUT 30 pieces of tile in the terminal, damaged by others (3 people 5 hrs per night for 4 nights; over a 2 week period)	60.00	\$ 16.90	1,014.00
			Subtotal Labor		\$ 1,014.00
Subtotal:					\$ 1,199.59

DEDUCTIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
			Subtotal Material		\$ -
			*Labor		
			Hours	Rate	Subtotal
			Subtotal Labor		\$ -
Subtotal:					\$ -

Subcontractor's Net:	\$ 1,199.59
Subcontractor's OH&P:	\$ 119.96
Subcontractor's Bond:	\$ -
Subcontractor's Total:	\$ 1,319.55
Contractor's OH&P:	\$ 65.98
Contractor's Bond:	\$ 20.78
Insurance:	\$ 6.93
Tax:	\$ 11.14
Worksheet Total:	\$ 1,424.37

**BRIAN'S CARPET & COMMERCIAL
FLOORING, INC.**

5401 N. HAVERHILL ROAD, SUITE 113
WEST PALM BEACH, FL. 33407
PH: (561) 242-9500 FAX: (561) 242-9502

Change Order

Date	Estimate #
3/28/2012	16774

Name / Address
DAVID BROOK ENTERPRISES, INC. 9000 BURMA ROAD STE 101 PALM BEACH GARDENS, FL 33404-1601

Project
CO Rerair Broken Ti...

Item	Description	Qty	Cost	Total
	PBIA			
	CHANGE ORDER			
SCOPE OF WORK	Replace broken tile due to x-ray scanners .		0.00	0.00
L-1	Labor:	60	16.90	1,014.00
THIN SET	THIN SET Grani Rapid Power	3	22.28	66.84
THIN SET	THIN SET Grani Rapid Liquid	1	76.42	76.42
EG	EPOXY GROUT:	1	42.33	42.33
	Used from attic stock			
	Ivoryto 24 x 24 6 PC			
	Ivory honed 12 x 24 24 PC			
OH & P	OVERHEAD AND PROFIT:		119.96	119.96
			Subtotal	\$1,319.55
			Sales Tax (6.0%)	\$0.00
			Total	\$1,319.55



CONSTRUCTION CHANGE PROPOSAL

Project: Terminal Flooring Improvements Ph1 Number: PB 10-8
 To: Cindy Portnoy, PBIA Project Manager From: Mark Davidson, David Brooks Ent.
 Re: Credit to leave tiles in place in T35 Date: 3-28-12

Keyword Description: CCP - 022 - Credit issued to leave 236SF of tile as is in phase T35
 Date Quotation Required: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a proposal as described in Item 1. The proposal should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit as required in General Provisions SP 10. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (include list of attachments) -- This is a credit to NOT demolish and replace 236 SF of tile in T35 as noted on punchlist Week 33 Item 11

2. Reason(s) for Modification: Owner Unforeseen Conditions (site, weather, etc.) Other

3. Approval of Request:

Owner: _____ Date: _____

Engineer: _____ Date: _____

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ (1,579.50)

5. Will a modification to the contract time be required? Yes No

If so, trade(s): _____

No. of personnel: _____

Duration: _____ (calendar days)

6. Attachment identification: (list) _____

7. Quotation is in effect until: (date) _____

8. Approval of Quotation: _____

Contractor: [Signature] Date: 3/29/12

Complete and attach Proposal Worksheet Detail for each element of Work. Enter Worksheet Information below.

***Labor shall be broken down by classification**

CONSTRUCTION CHANGE PROPOSAL Cont.

PROPOSAL WORKSHEET SUMMARY

CCP 22 - credit to not remove 236 SF of tile in T35 - per punchlist Week 23 item 11

* Labor shall be broken down by classification

ADDITIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
Subtotal Material				\$	-
			*Labor		
			Hours	Rate	Subtotal
Subtotal Labor				\$	-
Subtotal:				\$	-

DEDUCTIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
		Demo tile and crack suppression (machine) SF	236.00	\$ 2.25	531.00
		Crack Suppression Materials SF	236.00	\$ 0.67	158.12
		Thinset - bags	7.00	\$ 23.99	167.93
		Thinset - liquid	2.50	\$ 87.00	217.50
		Epoxy grout - 1 unit	1.00	\$ 48.75	48.75
		Schluter control joint pieces	3.00	\$ 23.00	69.00
					-
Subtotal Material				\$	1,192.30
			*Labor		
			Hours	Rate	Subtotal
		Demo labor remove tile - 3 men 2 hours	6.00	\$ 19.36	116.16
		Crack Suppression Labor (2 men 1 hour)	2.00	\$ 19.36	38.72
		Install labor - 2 men 4 hours	8.00	\$ 19.36	154.88
		Grout labor - 2 men 2 hours	4.00	\$ 19.36	77.44
					-
Subtotal Labor				\$	387.20
Subtotal:				\$	1,579.50

Subcontractor's Net:	\$	(1,579.50)
Subcontractor's OH&P:		
Subcontractor's Bond:	\$	-
Worksheet Total:	\$	(1,579.50)

BRIAN'S CARPET & COMMERCIAL FLOORING, INC.

5401 N. HAVERHILL ROAD, SUITE 113
 WEST PALM BEACH, FL. 33407
 PH: (561) 242-9500 FAX: (561) 242-9502

Estimate

Date	Estimate #
3/18/2012	16697

Name / Address
DAVID BROOK ENTERPRISES, INC. 9000 BURMA ROAD STE 101 PALM BEACH GARDENS, FL 33404-1601

P.O. No.	Project
	12 T035 Tile Repair ...

Item	Description	Qty	Cost	Total
	PBIA T 35 Tile Repair Credit Cost to replace 236 SF of tile due to expansion joint being to wide.			
D-1	DEMO Tile and crack suppression (Machine)	236	2.25	531.00
L-1	DEMO Labor:Remove tile 3 men 2 hours	6	19.36	116.16
CR-1	CRACK SUPPRESSION: Material	236	0.67	158.12
L-1	CRACK SUPPRESSION:Labor 2 men 1 hour	2	19.36	38.72
THIN SET	THIN SET bags	7	23.99	167.93
THIN SET	THIN SET liquid	2.5	87.00	217.50
L-1	Install Labor: 2 men 4 hours	8	19.36	154.88
EG	EPOXY GROUT: 1 unit	1	48.75	48.75
L-1	Labor:2 men 2 hours	4	19.36	77.44
Schluter	Schluter: Expansion	3	23.00	69.00
	Additional 236 SF of attic stock			
Total				\$1,579.50

Customer Signature _____



CONSTRUCTION CHANGE PROPOSAL

Project: Terminal Flooring Improvements Ph1 Number: PB 10-8
 To: Cindy Portnoy, PBIA Project Manager From: Mark Davidson, David Brooks Ent.
 Re: Repair Data Cable at ATM Date: 3-29-12

Keyword Description: CCP 023 – Remove and redrill and reroute data cable for ATM on East end of terminal
 Date Quotation Required: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a proposal as described in Item 1. The proposal should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit as required in General Provisions SP 10. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (include list of attachments) – Replace Cat5 data cable, re-drill hole in floor, reconnect to ATM

2. Reason(s) for Modification: Owner Unforeseen Conditions (site, weather, etc.) Other

3. Approval of Request:

Owner: _____ Date: _____
 Engineer: _____ Date: _____

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 513.01

5. Will a modification to the contract time be required? Yes No

If so, trade(s): _____
 No. of personnel: _____
 Duration: _____ (calendar days)

6. Attachment identification: (list) _____

7. Quotation is in effect until: (date) _____

8. Approval of Quotation: _____

Contractor:  Date: 3/29/12

Complete and attach Proposal Worksheet Detail for each element of Work. Enter Worksheet Information below.

***Labor shall be broken down by classification**

CONSTRUCTION CHANGE PROPOSAL Cont.
PROPOSAL WORKSHEET SUMMARY
 CCP 023 - Replace data cable to ATM on 2nd level East

* Labor shall be broken down by classification

ADDITIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
		Replace 300' data cable, including redrilling hole in slab, re-attaching on each end - night-time hours		\$ 435.45	\$ 435.45
			Subtotal Material		\$ 435.45
			*Labor		
			Hours	Rate	Subtotal
			Subtotal Labor		\$ -
		Subtotal:			\$ 435.45

DEDUCTIONS:

Item	Sheet	Description	Material		
			Unit Qty	Unit Price	Subtotal
			Subtotal Material		\$ -
			*Labor		
			Hours	Rate	Subtotal
			Subtotal Labor		\$ -
		Subtotal:			\$ -

Subcontractor's Net:	\$	435.45
Subcontractor's OH&P:	\$	43.55
Subcontractor's Bond:	\$	-
Subcontractor's Total:	\$	479.00
Contractor's OH&P:	\$	23.95
Contractor's Bond:	\$	7.54
Insurance:	\$	2.51
Tax:		
Worksheet Total:	\$	513.01

Davco



ELECTRICAL
CONTRACTORS CORP.

March 20, 2012

David Brooks Construction
9000 Burma Rd Suite 101
Palm Beach Gardens, Fl 33403

Attention: **Mark Davis**

Reference: **PBIA ATM Cable Repair**

Gentlemen:

We are pleased to submit our proposal to pull wire CAT5 cable for the ATM machine, for a total sum of:

FOUR HUNDRED SEVENTY NINE DOLLARS

\$479.00

Scope of Work

1. Provide all necessary material and labor.

Conditions

1. Proposal is based upon night hours.

We reserve the right to withdraw this proposal if it is not accepted and received in this office within thirty (30) days. This change order request is conditioned upon the premises being in the physical state that they are in as of this date. In the event there is a change to the physical condition of the premises requiring additional work, in the sole discretion of Davco Electrical Contractors Corp., additional costs may be incurred.

Should you wish to proceed with the above, please sign and return this proposal?

Requisition for payment shall be made upon completion of work.

Very Truly Yours,
DAVCO ELECTRICAL CONTRACTORS CORP.

Paul Costa
Assistant Project Manager
Commercial Division

Commercial • EC673 • Industrial

Boynton Beach: (561) 732-3434 • Boca Raton: (561) 338-6847 • Fax: (561) 732-3414 • www.davcoelectric.com

4885 Park Ridge Blvd. • Boynton Beach, Florida 33426-8316



ELECTRICAL
CONTRACTORS CORP.

DAVCO ELECTRICAL CONTRACTORS CORP.

4885 Park Ridge Blvd. Boynton Beach, Florida 33426-8316
(561) 732-3434 Fax: (561) 732-3414
www.davcoelectric.com License #EC673

INVOICE NO

10453

CUST David Brooks Enterprises
9000 Burma Road, Ste 101
Palm Beach Gard, FL 33403-1606

SITE PBIA ATM Cable Repair
3200 Belbeder Road
Palm Beach, FL 33401

ACCOUNT NO	INVOICE DATE	TERMS	DUPLICATE	FROM	PAGE
DBROOKS	3/21/2012	Net 0	3/21/2012		1

WORK ORDER 18314

DESCRIPTION Pull Wire CAT 5 for the atm machine

ITEM NO	QUANTITY	DESCRIPTION	UNIT PRICE	EXTENDED
	1	As per attached Proposal	479.00	479.00

Thank you for your business

TOTAL AMOUNT \$479.00



CONSTRUCTION CHANGE PROPOSAL

Project: Terminal Flooring Improvements Ph1 **Number:** PB 10-8
To: Cindy Portnoy, PBIA Project Manager **From:** Mark Davidson, David Brooks Ent.
Re: Purchase additional 4,880 SF of Fiandre tile for attic stock **Date:** 3-29-12

Keyword Description: CCP - 024 - Additional 4,880 SF of Fiandre tile for attic stock
Date Quotation Required: _____

The following modification to the contract has been identified. Pursuant to the General Conditions, please provide a proposal as described in Item 1. The proposal should include an itemized breakdown of contractor and subcontractor costs, including labor, materials, rentals, approved services, overhead, and profit as required in General Provisions SP 10. This request shall not be considered authorization to proceed with the work herein described.

To be completed by Initiator of Request:

1. Scope of Work: (include list of attachments) -Purchase and delivery to DOA - additional 4,880 SF of Fiandre Grinati tile from the same color batch as the original order - for additional attic stock for DOA

2. Reason(s) for Modification: Owner Unforeseen Conditions (site, weather, etc.) Other

3. Approval of Request:

Owner: _____ Date: _____
 Engineer: _____ Date: _____

To be completed by Contractor:

4. Total cost of modification (attach detailed breakdown) \$ 36,540.31

5. Will a modification to the contract time be required? Yes No

If so, trade(s): _____

No. of personnel: _____

Duration: 54 (calendar days)

6. Attachment identification: (list) _____

7. Quotation is in effect until: (date) _____

8. Approval of Quotation: _____

Contractor: [Signature] Date: 4/1/12

Complete and attach Proposal Worksheet Detail for each element of Work. Enter Worksheet Information below.

**SCHEDULE 1
LIST OF PROPOSED DBE FIRMS
(Attachment ____ to Bid Form)**

Project/Bid Name: Terminal Flooring Improvements Ph 1 Project/Bid No: PB10-7
 Name of Prime Bidder: David Brooks Enterprises, Inc. Change Order/Task/Amendment No. (if applicable): Change Order #6
 Contact Person: Mark Davidson Bid Opening Date: _____
 Address: 9000 Burma Rd, Suite 101, PBGardens, FL 33414 Department: _____
 Phone No.: 561-626-9960 Fax No: 561-626-9980 E-mail Address: mdavidson@dbrooksgc.com

Name, Address & Phone No. of DBE Firm	Description of Type of Work	Classification (Check applicable box)	Dollar Amount			
			Black	Hispanic	Women	Other (Please Specify)
Brians Carpet & Comm. Flooring - 5401 N. Haverhill Rd., Ste. 113; WPB FI 33407	Flooring Improvements CCPs 14,16, 18, 21, 22, 23 & 24	<input type="checkbox"/> Prime Contractor <input checked="" type="checkbox"/> Subcontractor <input type="checkbox"/> Supplier <input type="checkbox"/> Manufacturer	\$	\$	\$ 36,362.32	\$
		<input type="checkbox"/> Prime Contractor <input type="checkbox"/> Subcontractor <input type="checkbox"/> Supplier <input type="checkbox"/> Manufacturer	\$	\$	\$	\$
		<input type="checkbox"/> Prime Contractor <input type="checkbox"/> Subcontractor <input type="checkbox"/> Supplier <input type="checkbox"/> Manufacturer	\$	\$	\$	\$
		<input type="checkbox"/> Prime Contractor <input type="checkbox"/> Subcontractor <input type="checkbox"/> Supplier <input type="checkbox"/> Manufacturer	\$	\$	\$	\$

Total _____ **Price: \$ 39,581.84**
(Insert: Base Bid/Bid + Alternate, etc.)

Total Value of DBE Participation: \$ 36,362.32

Notes:

- The amounts listed on this form for each DBE Firm must be supported by the price included on Schedule 2, "Letter of Intent to Perform as a Disadvantaged Business Enterprise", in order to be counted toward attainment of the DBE goal.
- Firms identified on this form must be certified as a DBE by the State of Florida's Unified Certification Program.
- If materials or supplies are proposed to be purchased from a DBE regular dealer, sixty percent (60%) of the proposed expenditure is counted toward attainment of the DBE goal. Reduce dollar amount to 60% of supplier's quote for purposes of determining value of DBE participation. Amounts listed on Schedule "2" should reflect the full expenditure (i.e., do not reduce supplier's quote).

By signing this form the undersigned Prime Bidder is committing to utilize the above referenced DBE Firms on the Project and that the Prime Bidder will monitor the DBE Firms to ensure that the work is actually performed by the by the DBE Firms.

By: _____
 Signature

M.L."Mark" Davidson, VP
 Print Name/Title of Person Executing on Behalf of the Prime

Date: 9/16/12

SCHEDULE 2
(Attachment ___ to the Bid Form)

LETTER OF INTENT TO PERFORM AS A DISADVANTAGED BUSINESS ENTERPRISE

Project/Bid No.: PB10-7 Project/Bid Name: Terminal Flooring Improvements Ph2

Change Order/Task/Amendment No. (if applicable): GC Change Order #6

Name of Prime Bidder: David Brooks Enterprises, Inc.

Name of DBE Firm: Brians Carpet & Commercial Flooring, Inc.

The undersigned is certified as a Disadvantaged Business Enterprise by the State of Florida's Unified Certification Program. Check one or more classifications as applicable:

- Black Hispanic Women Other (Please Specify) _____
 Prime Contractor Subcontractor Manufacturer Supplier

The undersigned is prepared to perform the following described work in connection with the above-referenced project (specify in detail the particular work and/or parts thereof to be performed):

Additional Sheets may be used as necessary.

Line Item	Description	Quan/Units	Unit Price	Total Price
CCP 14	Removal of membrane in T32	see brkdn	see brkdn	718.61
CCP 16	Removal of membrane in T36	see brkdn	see brkdn	677.34
CCP 18	Add base per RFI 20 response and Field Instruction	see brkdn	see brkdn	1,108.39
CCP 21	Replace damaged tiles	see brkdn	see brkdn	1,319.55
CCP 22	Credit for installation of 236 sf of tile - contractor's error	see brkdn	see brkdn	(1,579.50)
CCP 23	Cost to re-install Data line to ATM machine	see brkdn	see brkdn	-
CCP24	Purchase 4,880sf of Tile	see brkdn	see brkdn	34,117.93

at the following price: \$ 36,362.32

(Subcontractor/Supplier's Quotes)

and will enter into a formal agreement for work with you conditioned upon your execution of a contract with Palm Beach County.

If the undersigned intends to subcontract any portion of the work described above to another subcontractor, please complete the following:

(Name of Subcontractor) (Amount of Subcontract) DBE-Certified

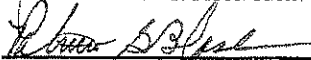
(Name of Subcontractor) (Amount of Subcontract) Non-DBE

(Name of Subcontractor) (Amount of Subcontract) DBE-Certified

(Name of Subcontractor) (Amount of Subcontract) Non-DBE

The undersigned affirms that it has the resources necessary to perform the work described above without subcontracting the work to another subcontractor, except as noted above. The undersigned subcontractor/supplier understands that the provision of this form to the Prime Bidder does not prevent the subcontractor from providing quotations to other bidders.

Patricia Blash, President
Printed Name of DBE Subcontractor

By: 
Signature

Date: 4-11-12



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/29/2012

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 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).

PRODUCER Tequesta Agency, Inc. dba Tequesta Insurance Advisors 218 S US Highway One, Ste 300 Tequesta FL 33469	CONTACT NAME: Debra Neumann, CIC	
	PHONE (A/C No. Ext): (561) 746-4546 FAX (A/C No): (561) 746-9599 E-MAIL ADDRESS: dneumann@tequestainsurance.com	
INSURED David Brooks Enterprises, Inc. 9000 Burma Road #101 Palm Beach Gardens FL 33403	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: National Trust Ins Co.	20141
	INSURER B: FCCI Commercial Insurance Co.	03499
	INSURER C: FCCI Insurance Company	10178
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: AI Master eff 3/1/12 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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY					EACH OCCURRENCE \$ 1,000,000	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000	
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	GL0012061-1	8/1/2011	8/1/2012	MED EXP (Any one person) \$ 5,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 2,000,000	
						PRODUCTS - COMP/OP AGG \$ 2,000,000	
A	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000	
	<input checked="" type="checkbox"/> ANY AUTO					BODILY INJURY (Per parson) \$	
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS	X	CA0018865-1	8/1/2011	8/1/2012	BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
						Uninsured motorist combined \$ 100,000	
B	<input checked="" type="checkbox"/> UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR				EACH OCCURRENCE \$ 8,000,000	
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$ 8,000,000	
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		UMB0012761-1	8/1/2011	8/1/2012	\$	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A	1166645	3/1/2012	3/1/2013	E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 500,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
Job: Terminal Flooring Improvements - Phase 1 - PBIA Project No. PB 10-8

See attached addendum for Additional Insured and Subrogation Waiver

CERTIFICATE HOLDER

CANCELLATION

PALM BEACH COUNTY
c/o DEPARTMENT OF AIRPORTS
846 PALM BEACH INT'L AIRPORT
WEST PALM BEACH, FL 33406-1470

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

Mark Kasten/DEBBIE

COMMENTS/REMARKS

Certificate Addendum for Certificate issued to PALM BEACH COUNTY, c/o DEPARTMENT OF AIRPORTS

Job: Terminal Flooring Improvements - Phase 1 - PBIA Project No. PB 10-8

Palm Beach Co Board of Co Commissioners a Political Subdivision of the State of FL its Officers Employees & Agents are additional insureds per form CGL084 12-10 attached to the General Liability policy & the Automobile policy to the extent that the organization qualifies as an Insured under Section II A.1 of the Coverage Form CAU003-FL 12-08. Subro Waiver in favor of certificate holder applies to General Liability, Automobile & Workers Comp policies.

Copy of forms CGL084 12-10, CAU003-FL 12-08 & WC000313 4-84 are attached.

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS –
AUTOMATIC STATUS WHEN REQUIRED IN CONSTRUCTION
AGREEMENT WITH YOU – ONGOING OPERATIONS AND
PRODUCTS-COMPLETED OPERATIONS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

This endorsement is subject to the terms, conditions, exclusions and any other provisions of the COMMERCIAL GENERAL LIABILITY COVERAGE FORM or any endorsement attached thereto unless changes or additions are indicated below.

A. Section II – Who Is An Insured is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf

in the performance of "your work" for the additional insured. Such person or organization is an additional insured for liability caused by your ongoing operations and the "products-completed operations hazard."

B. All policy exclusions relating to you in the Commercial General Liability Coverage Form, including any exclusions added by endorsement, shall apply to the additional insured herein.

C. With respect to the insurance afforded to these additional insureds, the following additional exclusion applies:

This insurance does not apply to "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:

1. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
2. Supervisory, inspection, architectural or engineering activities.

D. This endorsement does not apply to any additional insureds scheduled by name on other additional insured endorsements attached to the Commercial General Liability Coverage Form.

PALM BEACH INTERNATIONAL AIRPORT
 PB 10-8 Terminal Flooring Improvements Phase 1
 FAA AIP NO. 3-12-0085-053-2010
 Fin. Proj. No.: None
 Contract Date : 10/05/10
 CONTRACT HISTORY

CHANGE ORDER No.	DATE	DESCRIPTION	CHANGE ORDER TIME	VALUE OF TIME EXTENSION	CHANGE ORDER AMOUNT	TOTAL VALUE OF CHANGE ORDER ADJUSTED FOR TIME ²	LEAD DEPT APPROVAL	CRC APPROVAL	CUMULATIVE APPROVAL	BCC APPROVAL	PERCENT CHANGE	NEW CONTRACT AMOUNT	STATUS
1		Tile Selection Changes	0	\$0	\$98,255.11	\$98,255.11		\$98,255.11	\$ 98,255.11		8.05%	\$1,292,586.11	5/4/11 CRC Meeting
2		Install Carpet, Kids Zoo tile	0	\$0	\$11,315.04	\$11,315.04	\$11,315.04		\$ 107,570.15		0.95%	\$1,303,881.15	Approved 10/18/11
3		Time Extension for tile selection in CO 1	107	\$107,000	\$0.00	\$107,000.00				See Note 2		\$1,303,881.15	11/15/11 Board Meeting
4		CCP004,005,006,007,008	2	\$2,000	\$13,376.57	\$15,376.57	\$13,376.57		\$ 120,946.72		1.12%	\$1,317,257.72	Approved on 1/30/12
5		CCP 009, 011, 012, 013, 015, 017	0	\$0	\$67,826.06	\$67,826.06		\$67,826.06	\$ 188,772.78		5.67%	\$1,385,083.78	Approved on 3/28/12
6		CCP014, 016, 018, 021, 022, 023, 024	37	\$37,000	\$39,581.84	\$76,581.84				\$39,581.84	3.31%	\$1,424,665.62	Board Approval on 5/15/12
Total			146		\$ 228,354.62		\$ 24,691.61	\$ 164,081.17	\$ 188,772.78	\$ 39,581.84	19.09%	\$1,424,665.62	

To be approved by the Dept
 To be approved by the CRC
 To be approved by the Board

+

\$ 11,227.22

Approval Authority					
CO Value	Cumm CO Value	Authority	Cumulative Days	Authority	
\$0-\$0,000		Lead Dept	0-30 days	Lead Dept	
\$50,001-100,000		CRC	31-90	CRC	
>\$100,001	See Note 1	BCC	120	BCC	

- Cumulative Value - Revised as of 6/24/09**
- When the cumulative value of changes or additional work exceeds the greater of \$250,000 or 5% of the original contract then it must be brought to the board. The cumulative value is then reset to 0
 - Time must also be evaluated based on value of LD's for projects over \$1,000,000. The value of the time extension is not included when calc the cumulative value Time Extensions in excess of 90 Days must be approved by the Board and does not count towards the Cumulative Limit

12-

0791

BUDGET TRANSFER
BOARD OF COUNTY COMMISSIONERS
PALM BEACH COUNTY, FLORIDA

Advantage Document Numbers:
BGEX 041112/1305
BGRV

Fund 4111 Airport Improvement & Development Fund

Use this form to provide budget for items not anticipated in the budget.

ACCT.NUMBER	ACCOUNT NAME	ADOPTED BUDGET	CURRENT BUDGET	INCREASE	DECREASE	ADJUSTED BUDGET	EXPENDED/ ENCUMBERED AS OF 04/11/12	REMAINING BALANCE
<u>Expenditures</u>								
121-A212-6505	Building Improvements	2,380,366	6,613,171	39,582	0	6,652,753	2,896,955	3,755,798
121-A900-9909	Reserves Improvement Program	22,695,087	25,091,408		39,582	25,051,826	0	25,051,826
Total Appropriations & Expenditures						39,582	39,582	

Signatures

Date

By Board of County Commissioners

OFMB

At Meeting of

INITIATING DEPARTMENT/DIVISION

Handwritten signature: Craig Summi

4/12/12

May 15, 2012

Administration/Budget Department Approval

Handwritten signature: [unclear]
4/25/2012

Deputy Clerk to the Board of County Commissioners

OFMB Department - Posted

Attachment #

2