

PALM BEACH COUNTY  
BOARD OF COUNTY COMMISSIONERS

3H-10

AGENDA ITEM SUMMARY

Meeting Date: January 14, 2014

Consent     Regular  
 Ordinance    Public Hearing

Department: Facilities Development & Operations

I. EXECUTIVE BRIEF

**Motion and Title: Staff recommends motion to approve:** Amendment No. 5 to Contract with Kerney & Associates, Inc. (R2010-0069) to implement the fourth and final renewal of the Annual HVAC Contract with a maximum value of \$2,000,000.


**Summary:** Amendment No. 5 is the final renewal to the Annual HVAC Contract which was awarded to Kerney & Associates, Inc. The Contractor will continue to perform on HVAC projects for various facilities. The Annual HVAC Contract is an indefinite-quantity contract and this renewal has a maximum value of \$2,000,000. The capacity is shared and work orders are awarded based on competitive quotes/bids issued to all six (6) participating contractors. The renewal term is for twelve (12) months or until \$2,000,000 in work orders are issued in this term. Staff is bringing forward the amendment at this time based on expiration of the term. All terms of the original contract remain in effect. This is the fourth and final renewal allowed by the contract. The goal for Small Business Enterprise (SBE) participation is 15% and will be tracked cumulatively for each work order issued. This is a bond wavier contract. The cumulative value of active work orders at any time will be limited to \$200,000 per contractor. Kerney & Associates, Inc.'s SBE participation for work orders issued to date is 74.67%. Kerney & Associates, Inc., is a Palm Beach County company and is a certified SBE contractor. (FD&O Admin) Countywide (JM)

**Background and Justification:** Amendment No. 5 is the fourth and final renewal to the Annual Contract - HVAC which was awarded to Kerney & Associates, Inc. on January 12, 2010 and renewed on January 11, 2013. The contractor will continue to perform as an Annual HVAC Contractor for installation, repair, and/or replacement of HVAC systems on an "as-needed" basis for projects typically under \$100,000 each. This annual HVAC contract is an indefinite-quantity contract and this renewal has a maximum value of \$2,000,000 among the pool of Annual HVAC Contractors. The renewal term is for twelve (12) months or until the renewal limit of \$2,000,000 is reached.

Attachments:

Amendment No. 5

Recommended by:

  
Department Director

12/18/13  
Date

Approved by:

  
County Administrator

1/14/14  
Date

**II. FISCAL IMPACT ANALYSIS**

347

**A. Five Year Summary of Fiscal Impact:**

Fiscal Year	2014	2015	2016	2017	2018
Capital Expenditures	\$0	0	0	0	0
Operating Costs	0	0	0	0	0
External Revenues	0	0	0	0	0
Program Income (County)	0	0	0	0	0
In-Kind Match (County)	0	0	0	0	0
<b>NET FISCAL IMPACT</b>	<b>* \$0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
<b># Additional FTE Positions (Cumulative)</b>	<b>C</b>	<b>C</b>	<b>C</b>	<b>C</b>	<b>C</b>

Is Item Included in Current Budget? Yes X No     

Budget Account No:

Reporting Category \_\_\_\_\_

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

\* Potential maximum fiscal impact is \$2,000,000. Work Orders requiring BCC approval will be brought to the Board and fiscal impact will be addressed at that time; otherwise, funding will come from previously approved BCC projects.

C. Departmental Fiscal Review: \_\_\_\_\_ *W 12/19/13*

**III. REVIEW COMMENTS**

**A. OFMB Fiscal and/or Contract Development & Control Comments:**

*[Signature]* 12/20  
 OFMB *[Signature]* 12/20  
*[Signature]* 12/20

*[Signature]* 12/30/13  
 Contract Dev. and Control  
 12-30-13 *[Signature]*

**A. Legal Sufficiency:**

*[Signature]* 12/31/13  
 Assistant County Attorney

**A. Other Department Review:**

\_\_\_\_\_  
 Department Director

This summary is not to be used as a basis for payment.

## AMENDMENT No. 5 TO ANNUAL HVAC CONTRACT

This Agreement amends the Contract between Palm Beach County (County) and Kerney & Associates, Inc. (Contractor) authorized pursuant to Palm Beach County Resolution (R-2010-0069).

The Contract provided that the Contractor would act as an annual HVAC Contractor working within the annual capacity as established below:

	Effective Date	End Date	Capacity
Original Contract	January 12, 2010	January 11, 2011	\$2,000,000
Renewal #1	January 12, 2011	January 11, 2012	\$2,000,000
Renewal #2	January 12, 2012	January 11, 2013	\$2,000,000
Renewal #3	January 12, 2013	January 11, 2014	\$2,000,000

Amendment No. 1 dated September 30, 2010, was approved by FD&O Director and amended the contract to include the Inspector General language.

Amendment No. 2 Renewal No. 1 extends the term of the original contract from January 12, 2011 through January 11, 2012. The renewal term is for twelve (12) months or until \$2,000,000 in work orders are issued.

Amendment No. 3 Renewal No. 2 extends the term of the original contract from January 12, 2012 through January 11, 2013. The renewal term is for twelve (12) months or until \$2,000,000 in work orders are issued.

Amendment No. 4 Renewal No. 3 extends the term of the original contract from January 12, 2013 through January 11, 2014. The renewal term is for twelve (12) months or until \$2,000,000 in work orders are issued.

Amendment No. 5 Renewal No. 4 extends the term of the original contract from January 12, 2014 through January 11, 2015. The renewal term is for twelve (12) months or until \$2,000,000 in work orders are issued.

Except as amended herein, all provisions of the existing contract shall remain in full force and effect.

ATTEST

Sharon R. Bock, Clerk & Comptroller

BOARD OF COUNTY COMMISSIONERS

\_\_\_\_\_  
Deputy Clerk

Witness:

Michael GERGEL  
Printed Name

[Signature]  
Signature

\_\_\_\_\_  
Kerney & Associates, Inc.

[Signature]  
Signature

President  
Title

APPROVED AS TO FORM  
AND LEGAL SUFFICIENCY

[Signature]  
County Attorney

APPROVED AS TO TERMS  
AND CONDITIONS

[Signature]  
Audrey Wolf, Director  
Facilities Development & Operations



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/16/2013

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**  
Frank H. Furman, Inc.  
1314 East Atlantic Blvd.  
P. O. Box 1927  
Pompano Beach FL 33061

**INSURED**  
Kerney & Associates, Inc.  
320 SE 16th Avenue  
Ft Lauderdale FL 33301

**CONTACT NAME:**  
**PHONE (A/C, No, Ext):** 800-344-4838 **FAX (A/C, No):** (954) 943-5417  
**E-MAIL ADDRESS:**

INSURER(S) AFFORDING COVERAGE	NAIC #
INSURER A: Security National Insurance Co	19879
INSURER B: National Trust Insurance Co	20141
INSURER C: North River Insurance Company	21105
INSURER D: Bridgefield Employers Ins Co	10701
INSURER E: Columbia Casualty Insurance Co	31127
INSURER F:	

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

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR		POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
		INSR	WVD					
A	<b>GENERAL LIABILITY</b>			SES1102196	7/16/2013	7/16/2014	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 50,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				MED EXP (Any one person)	\$ Excluded
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ 2,000,000
B	<b>AUTOMOBILE LIABILITY</b>			CA001643404	7/16/2013	7/16/2014	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS						BODILY INJURY (Per accident)	\$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>				PROPERTY DAMAGE (Per accident)	\$
							Personal Injury Protection	\$ 10,000
								\$
C	<b>UMBRELLA LIAB</b>			5821013313	7/16/2013	7/16/2014	EACH OCCURRENCE	\$ 20,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB						AGGREGATE	\$ 20,000,000
	<input checked="" type="checkbox"/> OCCUR							\$
	<input type="checkbox"/> CLAIMS-MADE							\$
D	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>			083042575	7/16/2013	7/16/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory In NH)	<input checked="" type="checkbox"/>	<input type="checkbox"/>				E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A					E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
							E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
E	<b>Professional Liability</b>			CEO288380747	7/16/2013	7/16/2014	Per Claim Limit	\$2,000,000
	Retro Date: 9/22/2010						Aggregate Limit	\$2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Palm Beach County Board of County Commissioners is named as Additional Insured with respects to General Liability when required by written contract. Waiver of Subrogation with respect to General Liability and Worker's Compensation in favor of Palm Beach County Board of County Commissioners when required by written contract. Thirty (30) days notice of cancellation applies, except ten (10) days notice of cancellation for non-payment of premium.

**CERTIFICATE HOLDER**                                      **CANCELLATION**

Palm Beach County Board of  
County Commissioners  
2633 Vista Parkway  
West Palm Beach, FL 33411

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  
  
Dirk DeJong/JC *[Signature]*