

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2016	2017	2018	2019	2020
Capital Expenditures					
Operating Costs	11,725				
External Revenue	(11,725)				
Program Income					
In-Kind Match (County)					
NET FISCAL IMPACT	0				
# ADDITIONAL FTE POSITIONS (Cumulative)					

Is Item Included In Current Budget: Yes X No _____

Budget Account No.:

Fund 1101 Dept. 143 Unit 1435 Obj. 8201 Program Code ES42 Program Period: GY14

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

Funding Source is the U.S. Department of Housing and Urban Development through the Emergency Solutions Grant.

C. Departmental Fiscal Review:

PM
Taruna Malhotra, Assistant Department Director

III. REVIEW COMMENTS

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

[Signature] 6/7/16
OFMB ET 6/3 AK MMJ JP GJ
6/7/16 6/7 6/12

[Signature] 6/14/16
Contract Development and Control
6/10/16

B. Legal Sufficiency:

[Signature]
Assistant County Attorney

C. Other Department Review:

Department Director

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

**AMENDMENT TO
CONTRACT FOR PROVISION OF SERVICES**

THIS AMENDMENT TO CONTRACT FOR PROVISION OF SERVICES (R2015-1247) is made and entered into at West Palm Beach Florida. On this _____ day of _____, 2016 by and between PALM BEACH COUNTY, a political subdivision of the state of Florida, by and through its Board of County Commissioners, hereinafter referred to as "COUNTY" and The Young Women's Christian Association of Palm Beach County, Florida, hereinafter referred to as the "AGENCY", a not-for-profit corporation, entitled to do business in the State of Florida, whose address is 1016 North Dixie Highway, West Palm Beach, Florida 33401.

WITNESSETH:

WHEREAS, the AGENCY has agreed to provide emergency shelter to victims of domestic abuse and their children; and

WHEREAS, the need exists to amend the current contract to increase the total contract amount by \$11,725.

NOW THEREFORE, the above named parties hereby mutually agree that the Contract entered into on October 20, 2015 is hereby amended as follows:

- I. Article 3 is hereby amended to replace "Thirty One Thousand Seven Hundred and Thirty One Dollars (\$31,731)" with "Forty Three Thousand Four Hundred and Fifty Six (\$43,456)."
- II. Exhibit "A" Section I.M. is hereby amended to replace "\$31,731" with "43,456."
- III. Exhibit "A" Section II. A. is hereby amended to replace the contents of this section with the following:
 - A. Provide up to \$43,456 in funding. The County agrees to reimburse the Agency for Emergency Shelter. The total shall not exceed \$43,456 in funding for the following budget line items:

Budget Line Item Description	Amount
Emergency Shelter	
Repair & Maintenance	\$25,991
Utilities	\$17,465
TOTAL:	\$43,456

OTHER PROVISIONS:

All provisions in the Contract or exhibits to the Contract in conflict with this Amendment to the Contract shall be and are hereby changed to conform to the amendment.

All provisions not in conflict with this Amendment are still in effect and are to be performed at the same level as specified in the Contract.

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Contract on behalf of the COUNTY and AGENCY has hereunto set his/her hand the day and year above written.

ATTEST:

Sharon R. Bock, Clerk & Comptroller

**PALM BEACH COUNTY, FLORIDA, a
Political Subdivision of the State of
Florida**

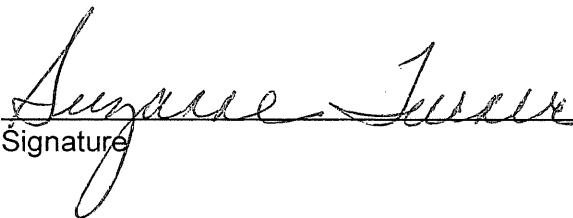
BOARD OF COUNTY COMMISSIONERS

BY: _____
Deputy Clerk

BY: _____
Mary Lou Berger, Mayor

WITNESS:

AGENCY:


Signature

The Young Women's Christian Association
Of Palm Beach County, Florida

AGENCY's Name Typed

SUZANNE TURNER
Name Typed

BY: 
Signature

59-0751935

ALEXCIA L COX

AGENCY's Federal ID Number

AGENCY's Signatory Name Typed

**APPROVED AS TO FORM AND
LEGAL SUFFICIENCY**

PRESIDENT
AGENCY's Signatory Title Typed

By: _____
Assistant County Attorney

**APPROVED AS TO TERMS AND
CONDITIONS** Department of Community
Services


Channell Wilkins, Director

[Simple View](#)

Summary of Certificates

This report displays detailed Certificate of Insurance information for a selected Insured. Any items shown in red are deficient. Click on the Insured Name to update contact information.

Wednesday, May 11, 2016

[Images](#)

[Contracts](#)

Insured: The Young Women's Christian Association of Palm Beach County, Florida Insured ID: 051HS0315-PBC

Status: Compliant

ITS Account Number: PLC1524

Project(s): Palm Beach County - Community Services

Insurance Policy	Required	Provided	Override
General Liability			
Expiration: 2/3/2017			
General Aggregate:	\$500,000	\$3,000,000	
Products - Completed Operations Aggregate:	\$0	\$0	
Personal And Advertising Injury:	\$0	\$0	
Each Occurrence:	\$500,000	\$1,000,000	
Fire Damage:	\$0	\$0	
Medical Expense:	\$0	\$0	
Automobile Liability			
Expiration: 2/3/2017			
	All Owned Autos	Any Auto not provided	X
	Hired Autos	not provided	X
	Non-Owned Autos	not provided	X
Combined Single Limit:	\$500,000	\$1,000,000	
Workers Compensation/Employers Liability			
Expiration: 6/1/2016			
Professional Liability			
Expiration: 2/3/2017			
Each Occurrence:	\$1,000,000	\$1,000,000	
Aggregate Limit:	\$0	\$3,000,000	

Notifications

There were no deficiency letters issued.

Do you have an updated Certificate? Click the button below to submit a Certificate.

[Certificate Submittal](#)

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: June 6, 2016

REQUESTED BY: Shairette Major

PHONE: 561-233-3679

PROJECT TITLE: The Young Women's Christian Association (YWCA)

PROJECT NO.: n/a

ORIGINAL CONTRACT AMOUNT: \$31,731

BCC RESOLUTION#: R2015-1247

CONSULTANT/CONTRACTOR: Community Services

PROVIDE A BRIEF STATEMENT OF THE SCOPE OF SERVICES TO BE PROVIDED BY THE CONSULTANT/CONTRACTOR: This amendment increases funding to allow additional clients to be served in an emergency shelter for victims of domestic abuse. Palm Beach County Community Services manages the YWCA sub recipient agreement funded in FY 2015-2016 under the Emergency Solutions Grant Program.

WILL THIS AMENDMENT CHANGE THE ESTIMATED COAST OF THE PROJECT? IF YES, PROVIDE ESTIMATES OF THE NEW COSTS:

CONSTRUCTION: \$-0-
PROFESSIONAL SERVICES: \$11,725
STAFF COSTS: \$-0-
EQUIP./SUPPLIES: \$-0-
CONTINGENCY: \$-0-
TOTAL: \$11,725

BUDGET ACCOUNT NUMBER (IF KNOWN)

FUND: 1101 DEPT: 143 UNIT: 1435 OBJ: 8201 PROG CODE: ES42/GY15

GY14
Thomas
6-6-16

IDENTIFY FUNDING SOURCE (CHECK ALL THAT APPLY):

- AD VALOREM _____
- NON-AD VALOREM _____
- GRANT Emergency Solutions Grant - Federal Grant
- FEDERAL/DAVIS BACON _____

SUBJECT TO INSPECTOR GENERAL FEE YES NO

Department: Department of Economic Sustainability

BAS APPROVED BY: Edward W. Lowery DATE: 6/6/2016

ENCUMBRANCE NUMBER: _____

6/6/16