

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2018	2019	2020	2021	2022
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	<u>\$5,409</u>	<u>\$5,409</u>	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u><u>\$5,409</u></u>	<u><u>\$5,409</u></u>	=====	=====	=====
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

Is Item Included in Current Budget: Yes No

Does this item include the use of federal funds? Yes No

Budget Account No: 50% Fund 1003 Dept 145 Unit 1455 Object 4410 - C441
GY16

Budget Account No: 50% Fund 1009 Dept 145 Unit 1462 Object 4410 - LH11
GY17
 Program _____

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

Fixed Asset Number _____

C. Departmental Fiscal Review: *[Signature]* 1/9/18

III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development Comments:

[Signature] 1/16/18
 OFMB 1/16/18
1/16/18 1/16/18

[Signature] 1/17/18
 Contract Development and Control
1/17/18

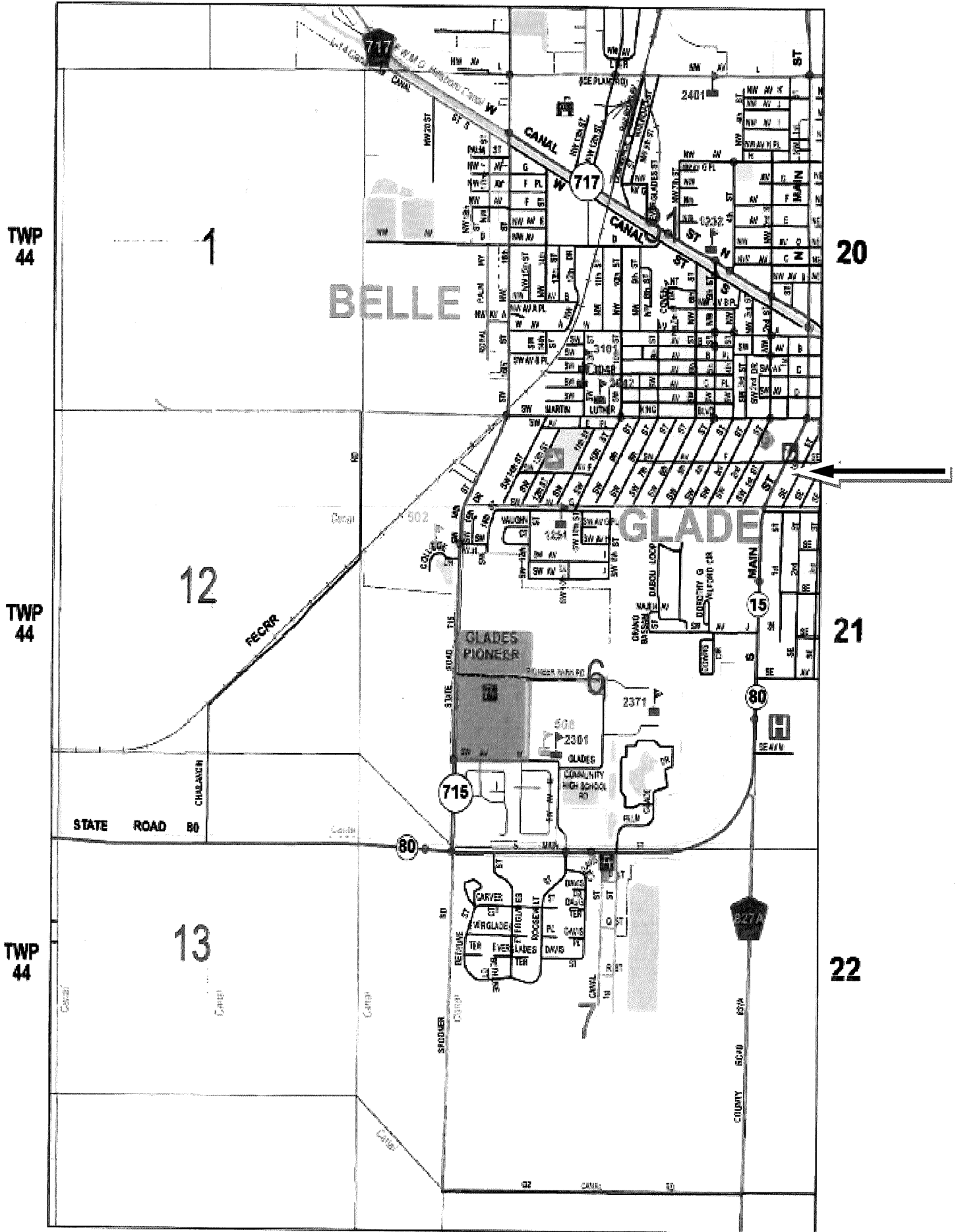
B. Legal Sufficiency:

[Signature] 1/19/18
 Assistant County Attorney

C. Other Department Review:

 Department Director

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



TWP 44

TWP 44

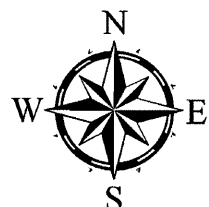
TWP 44

RNG 36

See pg 154

RNG 37

Page 157



LOCATION MAP

Attachment #1

Attachment #2
Option to Extend Letter (1 page)



CERTIFIED MAIL
RETURN RECEIPT REQUESTED
7013 2630 0000 6412 5994 /

February 6, 2018

Facilities Development & Operations Department

Property & Real Estate Management Division

2633 Vista Parkway

West Palm Beach, FL 33411

Telephone - (561) 233-0217

Facsimile (561) 233-0210

www.pbcgov.com/fdo

Palm Beach County Board of County Commissioners

Melissa McKinlay, Mayor

Mack Bernard, Vice Mayor

Hal R. Valeche

Paulette Burdick

Dave Kerner

Steven L. Abrams

Mary Lou Berger

County Administrator

Verdenia C. Baker

"An Equal Opportunity Affirmative Action Employer"

Wallace K. Lutz, Sr. And Theresa C. Lutz, Trustees of the Wallace K. Lutz, Sr. Revocable Living Trust dated October 8, 1991, and any Amendments Thereto
c/o Lutz Rentals,
P.O. Box 2741
Belle Glade, FL 33430

RE: Exercise of Third Option to Extend Lease Agreement (R2013-0325) dated March 12, 2013, as amended, with Palm Beach County for Community Services Department's Community Action Program at 607 South Main Street, Unit 102 in Belle Glade.

Dear Mr. & Mrs. Lutz:

Pursuant to the provisions of Section 1.04 of the above referenced Lease Agreement, Palm Beach County is hereby exercising the third option to extend the term of said Lease Agreement for an additional period of one (1) year effective April 1, 2018, through March 31, 2019.

Sincerely,

ATTEST:

SHARON R. BOCK,
CLERK & COMPTROLLER

PALM BEACH COUNTY,
a political subdivision of the State of Florida

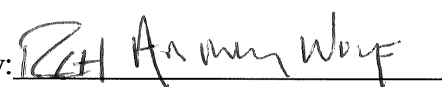
By: _____
Deputy Clerk

By: _____
Melissa McKinlay, Mayor

APPROVED AS TO FORM AND LEGAL SUFFICIENCY

APPROVED AS TO TERMS AND CONDITIONS

By: 
Assistant County Attorney

By: 
Audrey Wolf, Director
Facilities Development & Operations

Attachment #3
Budget Availability Statement (1 page)

Below is the rent only information justifying the figures listed on the attached BAS for Belle Glade Community Action Program Lease – Option – 3 of 5:

Fiscal Years	2018	2019	2020	2021	2022
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	<u>\$5,409</u>	<u>\$5,409</u>	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>\$5,409</u>	<u>\$5,409</u>	=====	=====	=====

For FY2018:

- The Agreement expires on 03/31/18.
- The current rent is \$10,711.05 annually = \$892.59 monthly.
- Exercising Option 3 will extend the term for one year from 04/01/18 – 03/31/19.
- The rent will be increasing one percent (1%) pursuant to (R2013-0325).
- $\$10,711.05 \times 101\% = \$10,818.16$ annually
- $\$10,818.16 \div 12 \text{ months} = \901.51 monthly (rounded down)
- 04/01/18 – 9/30/18 = 6 months.
- $\$901.51 \times 6 \text{ months} = \$5,409.06$

FY2018 TOTAL = \$5,409.06

For FY2019:

- 10/01/18 – 03/31/19 = 6 months.
- $\$901.51 \times 6 \text{ months} = \$5,409.06$

FY2019 TOTAL = \$5,409.06

For FY2020:

- n/a

FY2020 TOTAL = \$-0-

For FY2021:

- n/a

FY2021 TOTAL = \$-0-

For FY2022:

- n/a

FY2022 TOTAL = \$-0-

Attachment #4
Disclosure of Beneficial Interest (3 pages)

**LANDLORD'S DISCLOSURE OF BENEFICIAL INTERESTS
(REQUIRED BY FLORIDA STATUTES 286.23)**

TO: PALM BEACH COUNTY CHIEF OFFICER, OR HIS OR HER OFFICIALLY DESIGNATED REPRESENTATIVE

STATE OF FLORIDA
COUNTY OF PALM BEACH

BEFORE ME, the undersigned authority, this day personally appeared, Wallace ~~and Theresa Lutz~~, hereinafter referred to as "Affiant", who being by me first duly sworn, under oath, deposes and states as follows:

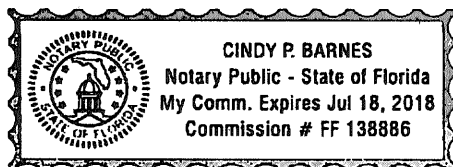
1. Affiant is the Trustee of Wallace K. Lutz, Sr. Revocable Living Trust which entity is the owner of the real property legally described on the attached Exhibit "A".
2. Affiant's address is: P. O. Box 2741, Belle Glade, FL 33430.
3. Attached hereto, and made a part hereof, as Exhibit "B" is a complete listing of the names and addresses of every person or entity having a five percent (5%) or greater beneficial interest in the Landlord and the percentage interest of each such person or entity.
4. Affiant acknowledges that this Affidavit is given to comply with Florida Statutes 286.23, and will be relied upon by Palm Beach County in its lease of the Property.
5. Affiant further states that Affiant is familiar with the nature of an oath and with the penalties provided by the laws of the State of Florida for falsely swearing to statements under oath.
6. Under penalty of perjury, Affiant declares that Affiant has examined this Affidavit and to the best of Affiant's knowledge and belief it is true, correct, and complete.

FURTHER AFFIANT SAYETH NAUGHT.

W.K. Lutz, Affiant
Print Affiant Name: W.K. Lutz

The foregoing instrument was sworn to, subscribed and acknowledged before me this 4 day of JANUARY, 2016, by W.K. LUTZ who is personally known to me or who has produced _____ as identification and who did take an oath.

Cindy P. Barnes
Notary Public



CINDY P. BARNES
(Print Notary Name)

NOTARY PUBLIC
State of Florida at Large
My Commission Expires: _____

EXHIBIT "A"

PROPERTY

Legal Description:

Lot 4, less the South 8 feet, and all of Lots 1, 2 and 3, Block 4, REPLAT OF HOLLOWAY ADDITION TO BELLE GLADE, City of Belle Glade, Palm Beach County, Florida, as recorded in Plat Book 18, Page 16 of the Public Records of Palm Beach County, Florida, LESS AND NOT INCLUDING, the West 17 feet thereof, measured at right angles to the West Lot lines, for the right-of-way of State Road 80 (South Main Street), as described in Warranty Deed recorded in OR Book 4070, page 1076.

Parcel Control Number:

04-37-43-41-05-004-0010

Address:

607 South Main Street, Belle Glade, FL 33430



