

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: October 8, 2019

☒ Consent ☐ Regular
☐ Ordinance ☐ Public Hearing

Department: Parks and Recreation

Submitted By: Parks and Recreation Department

Submitted For: Parks and Recreation Department

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to receive and file: a First Amendment to the Independent Contractor Agreement between Palm Beach County and LB2 Enterprises Inc., Masters Swimming Program, North County Aquatic Complex, to increase the amount of the agreement (R2018-2016) by \$28,000 for a total amount not to exceed \$90,000 for the period October 1, 2018 through September 30, 2019.

Summary: This Independent Contractor Agreement has been fully executed on behalf of the Board of County Commissioners (BCC) by the County Administrator in accordance with Resolution 94-422, amended by Resolutions 2002-2103, 2007-0409, 2012-0168 and 2017-0822. The Department is now submitting this Amendment in accordance with County PPM CW-O-051, which requires all delegated amendments to be submitted by the initiating Department to the BCC as a Receive and File agenda item. District 1 (AH)

Background and Justification: A resolution providing authority to execute Independent Contractor Agreements with recreation instructors and sports officials (Resolution 94-422, amended by Resolutions 2002-2103, 2007-0409, 2012-0168 and 2017-0822) was adopted by the BCC to streamline the hiring process. The BCC granted the Director of Parks and Recreation authority to execute Independent Contractor Agreements and Amendments with recreation instructors and sports officials up to \$10,000, with contracts of \$10,000 or more requiring the County Administrator's approval.

The Agreement attached has been executed on behalf of the BCC by the County Administrator in accordance with the authority delegated by the BCC, and is now being submitted to the BCC to receive and file.

Attachment: First Amendment to the Independent Contractor Agreement

Recommended by: 
Department Director

9-12-19
Date

Approved by: 
Assistant County Administrator

9/24/2019
Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2020	2021	2022	2023	2024
Capital Expenditures	_____	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u><u>*-0-</u></u>	<u><u>-0-</u></u>	<u><u>-0-</u></u>	<u><u>-0-</u></u>	<u><u>-0-</u></u>
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____
Is Item Included in current Budget:	Yes	_____	No	<u>X</u>	
Does this item include use of federal funds?	Yes	_____	No	<u>X</u>	

Budget Account No.: Fund 0001 Department 580 Unit 5305
Object 3422 Revenue Source 4724 Program _____

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

*Estimated revenue and expense were recorded in FY2019.

Contractor	FY2019	
	Revenue	Expense
LB2 Enterprises Inc.	\$112,500	\$90,000
Totals	\$112,500	\$90,000

C. Departmental Fiscal Review:

III. REVIEW COMMENTS

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

[Signature] 9/12/19
OFMB 9/16/19 BR 9/16

[Signature] 9/18/19
Contract Development & Control
9/18/19 TD

B. Legal Sufficiency:

Anne Delgant 9-23-19
Assistant County Attorney

C. Other Departmental Review:

Department Director

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

FIRST AMENDMENT TO INDEPENDENT CONTRACTOR AGREEMENT BETWEEN PALM BEACH COUNTY AND LB2 ENTERPRISES INC.

THIS FIRST AMENDMENT TO INDEPENDENT CONTRACTOR AGREEMENT," is made and entered into on Aug. 8, 2019, by and between the Board of County Commissioners of Palm Beach County, Florida, hereinafter referred to as "COUNTY," and LB2 Enterprises Inc., an Independent Contractor, hereinafter referred to as "CONTRACTOR".

WITNESSETH:

WHEREAS, on October 1, 2018, COUNTY and CONTRACTOR entered into an Agreement (R2018-2016) for the provision of providing a United States Masters Swimming Program at North County Aquatic Complex; hereinafter referred to as the "Agreement"; and

WHEREAS, under the Agreement the COUNTY is to provide funding in an amount not to exceed Sixty Two Thousand Dollars (\$62,000) for the Masters Swimming Program instructor services; and

WHEREAS, CONTRACTOR's fee is the sum of 80% of the paid enrollment fees for the Program; and

WHEREAS, the program has exceeded revenue projections of Seventy Four Thousand Four Hundred Dollars (\$74,400); and

WHEREAS, the total Agreement amount required to be paid to CONTRACTOR needs to be increased by Twenty Eight Thousand Dollars (\$28,000); and

WHEREAS, both parties desire to amend this Agreement.

NOW THEREFORE, in consideration of the mutual covenants and agreements expressed herein, the COUNTY and CONTRACTOR hereby agree as follows:

1. Section 3.a. of the Agreement is hereby deleted in its entirety and replaced with the following:
"The total amount payable by COUNTY under this Agreement for the services to be performed hereunder is not to exceed Ninety Thousand Dollars (\$90,000)."
2. Except as provided herein, each and every other term of the Agreement shall remain in full force and effect and the Agreement is reaffirmed as modified herein.

REMAINDER OF PAGE LEFT INTENTIONALLY BLANK

IN WITNESS WHEREOF, the parties hereto have executed this Agreement as of the date first written above.

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS:

By: Eric Lee 07-19-19
Signature Date
Director / Assistant Director
Palm Beach County Parks and Recreation Department

If Agreement Value Exceeds \$10,000.00,:

County Administrator

Jan V. Baker 8-8-19
Signature Date

WITNESS

Michael Colhoun 7-12-19
Signature Date
Michael Colhoun
Print

CONTRACTOR - LB2 Enterprises Inc.

By: Linda Bostic 7/12/19
Signature Date
Linda Bostic
Print
President - LB2 Enterprises Inc
Title

APPROVED AS TO
FORM AND LEGAL SUFFICIENCY:

County Attorney

Anne Helgert 7/17/19
Signature Date

APPROVED AS TO
TERMS & CONDITIONS:

Division Director

Li Chen 7/19/19
Signature Date

CERTIFICATE OF INSURANCE		PRINT DATE: 10/1/2018
		CERTIFICATE NUMBER: 20180921655661
AGENCY: Integro USA Inc. d/b/a Integro Insurance Brokers 2727 Paces Ferry Road, Building Two, Suite 1500 Atlanta, GA 30339 678-324-3300 (Phone), 678-324-3303 (Fax)		
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.		
NAMED INSURED: United States Masters Swimming, Inc. 1751 Mound Street Suite 201 Sarasota FL 34236		INSURERS AFFORDING COVERAGE: INSURER A: Everest National Ins. Co. NAIC #: 10120 INSURER B: Everest National Ins. Co. NAIC #: 10120
EVENT INFORMATION: USMS Registered Club Workouts (-)		
POLICY/COVERAGE INFORMATION: 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.		
INS	TYPE OF INSURANCE:	POLICY NUMBER(S): EFFECTIVE: EXPIRES: LIMITS:
A	GENERAL LIABILITY	
	X Occurrence	SI8ML00043-181 10/1/2018 12:01 AM 10/1/2019 12:01 AM
	X Participant Legal Liability	
		GENERAL AGGREGATE (Applies Per Event) \$5,000,000
		EACH OCCURRENCE \$1,000,000
		DAMAGE TO RENTED PREMISES (Each Occ.) \$1,000,000
		MEDICAL EXPENSE (Any one person) \$5,000
		PERSONAL & ADV INJURY \$1,000,000
		PRODUCTS-COMP/OP AGG \$2,000,000
B	UMBRELLA/EXCESS LIABILITY	
	X Occurrence	SI8EX00028-181 10/1/2018 12:01 AM 10/1/2019 12:01 AM
		EACH OCCURRENCE \$10,000,000
		AGGREGATE \$20,000,000
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS: The certificate holder is an Additional Insured with respect to liability arising out of the negligence of the Named Insured, but only where required by written contract and as per the following endorsement: Additional Insured - Automatic Status When Required in a Written Agreement With You (Form ECG 20 600 05 09). Coverage applies only to the United States Masters Swimming (USMS) sanctioned or approved events or activities specified on this certificate, and only if the club or workout group shown as a Named Insured on this certificate is a member in good standing with USMS at the time of the event or activity. The General Liability policy includes \$1,000,000 Each Occurrence/\$5,000,000 Aggregate Abuse & Molestation coverage. A Waiver of Subrogation applies to the General Liability per form ECG 24 522 - Waiver of Transfer of Rights of Recovery Against Others to Us. The General Liability policy is primary and non-contributory as per Form ECG 24 520: Other Insurance - Primary Noncontributory Coverage available under policy 9906-7881 is on file with the policyholder - Accident Medical coverage \$25,000 per person per accident with no deductible, excess of any other valid and collectible insurance - Accidental Death & Dismemberment \$5,000 per person per accident. Policy effective date: October 1, 2018/Policy expiration date: October 1, 2019.		
CERTIFICATE HOLDER: Palm Beach County Board of County Commissioners c/o Parks and Recreation Department 2700 Sixth Avenue South Lake Worth FL 33461		NOTICE OF CANCELLATION: 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: 