

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date:	December 17, 2019	Consent [X]	Regular []
		Public Hearing []	
Department:	Water Utilities Department		

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Amendment No. 2 to the Water Utilities Department (WUD) Pipeline Continuing Construction Contract 2017 (Contract) with Hinterland Group Inc., (Contractor) to extend the Contract for an additional nine (9) months, or until the new contract is issued under WUD solicitation No. 19-040; 2019 Pipeline Continuing Construction Contract, whichever may occur first.

Summary: On January 10, 2017, the Board of County Commissioners (BCC) approved the Contract (R2017-0072) with the Contractor. The Contract provides for materials and installation services for systemwide raw water mains, potable water mains, reclaimed water mains, wastewater force mains and water service line projects in the amount of \$22,637,321.63. The Contract included a 24-month term with the option of one (1) 12-month renewal at the discretion of the County.



On December 4, 2018, Amendment No. 1 (R2018-1918) to the Contract renewed the Contract for an additional one (1) year through January 9, 2020, with no cost increase to the Contract amount of \$22,637,321.63. Amendment No. 2 to the Contract constitutes a nine (9) month extension to the Contract through October 5, 2020, with no cost increase to the Contract amount of \$22,637,321.63. While this extension goes beyond the term and renewal periods set forth in the Contract, it is necessary for WUD to have an annual pipeline contractor in place in order to expedite pipeline projects without the need to re-bid each project. Such an extension is permissible under Section 2-54(b) of the Purchasing Code where the BCC determines that the extension is beneficial to the interest, health, safety, or welfare of the County.

This Contract was procured under the requirements of the 2002 Small Business Enterprise (SBE) Ordinance (R2002-0064) prior to the adoption of the new Equal Business Opportunity Ordinance on October 16, 2018. The SBE participation goal established under the 2002 Ordinance was 15% overall participation. The Contract provides for 15% SBE participation. The cumulative SBE participation is 100%. Contractor is a Palm Beach County company. The project is included in the WUD FY20 Budget (WUD Project No.16-077) Countywide (MJ)

Background and Justification: WUD performs maintenance, repair and construction activities on water, wastewater and reclaimed water pipelines throughout its service area. The Contract will reduce the time needed to undertake the installation of infrastructure necessary to complete required utility repairs and improvements. Amendment No. 2 will expedite utility special assessment projects and other pipeline improvement projects where timing is critical throughout WUD's service area. The 2019 Pipeline Continuing Construction Contract was advertised on April 21, 2019, and is currently under Bid Protest with the Palm Beach County Purchasing Department. The terms and conditions of the Contract will remain in full force and effect.

Attachments:

- 1. Three (3) Originals of Amendment No. 2
- 2. Location Map
- 3. Certificate of Liability Insurance

Recommended By:		11-18-19
	Department Director	Date
Approved By:		11-20-19
	Assistant County Administrator	Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2020	2021	2022	2023	2024
Capital Expenditures	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Operating Costs	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
External Revenues	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
Program Income (County)	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
In-Kind Match County	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
NET FISCAL IMPACT	0	<u>0</u>	<u>0</u>	<u>0</u>	<u>0</u>
# ADDITIONAL FTE POSITIONS (Cumulative)	0	0	0	0	0

Budget Account No.: Fund 4011 Dept 721 Unit Various Object Various

Is Item Included in Current Budget? Yes **X** No

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

Reporting Category **N/A**


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

The proposed extension has no fiscal impact. Projects will be assigned on an individual work authorization basis.

C. Department Fiscal Review: _____


III. REVIEW COMMENTS

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


 11/12/19
 OFMB BR 11/12

Contract Development and Control

B. Legal Sufficiency:

 1/18/19
Assistant County Attorney

C. Other Department Review:

Department Director

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

**AMENDMENT No. 2 TO CONTRACT WITH
HINTERLAND GROUP INC.
PIPELINE CONTINUING CONSTRUCTION
CONTRACT 2017**

This Amendment No. 2 dated _____ to the Contract (R2017-0072) dated January 10, 2017 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 the COUNTY and **Hinterland Group Inc.**, a corporation authorized to do business in the State of Florida, hereinafter referred to as the CONTRACTOR.

WITNESSETH

WHEREAS, the parties have entered into a Contract under which the CONTRACTOR provided certain services to the COUNTY for various projects in accordance with the contract for the:

Pipeline Continuing Construction Contract 2017

Contract No: WUD 16-077; and

WHEREAS on December 4, 2018 (County Resolution R2018-1918), the CONTRACTOR and COUNTY entered into Amendment No. 1 to the Contract ("First Amendment") renewing the Contract for an additional one (1) year period.

WHEREAS, while there are no renewal periods remaining in the Contract, the parties wish to extend the Contract in order to continue services until a new Pipeline Continuing Construction Contract is issued.

WHEREAS the parties hereto desire to renew the Contract for an additional nine (9) months period or until the new contract is issued under WUD solicitation No. 19-040; 2019 Pipeline Continuing Construction Contract, whichever comes first.

NOW, THEREFORE, in consideration of the premises and of the mutual covenants hereinafter set forth and for such other good and valuable consideration, the receipt of which the parties hereto expressly acknowledge, the parties covenant and agree to the following terms and

conditions:

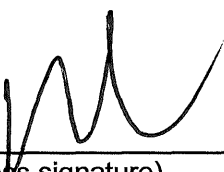
1. The term of this Contract is renewed for nine (9) additional months from January 9, 2020 to October 5, 2020, or until the new contract is issued under WUD solicitation No. 19-040; 2019 Pipeline Continuing Construction Contract, whichever comes first.
2. The Contract cumulative amount not to exceed of \$22,637,321.63 is not being increased.
3. Except as specifically modified above, the terms and conditions of the Contract as amended by the First Amendment, are hereby confirmed and remain in full force and effect.

INWITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Amendment No. 2 on behalf of the COUNTY and CONTRACTOR has hereunto set its hand the day and year above written.

ATTEST:
SHARON R. BOCK
CLERK AND COMPTROLLER

APPROVED AS TO FORM AND LEGAL
SUFFICIENCY

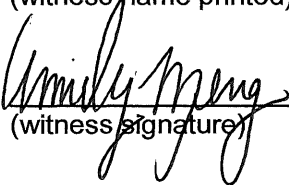
Assistant County Attorney



(witness signature)

Daniel Duke

(witness name printed)



(witness signature)

Emily Meng

(witness name printed)

(Corporate Seal)

PALM BEACH COUNTY, FLORIDA
BOARD OF COUNTY COMMISSIONERS

By: _____
Mayor

APPROVED AS TO TERMS AND
CONDITIONS



Jim Stiles, Director, *2. E.*
Water Utilities Department

'CONTRACTOR'

By: Hinterland Group Inc.

a Florida corporation
(insert state of corporation)

By: 

(signatory)

Chase R Rogers

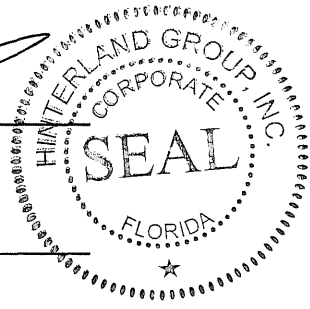
(print signatory's name)

By: Project Director
(print title)

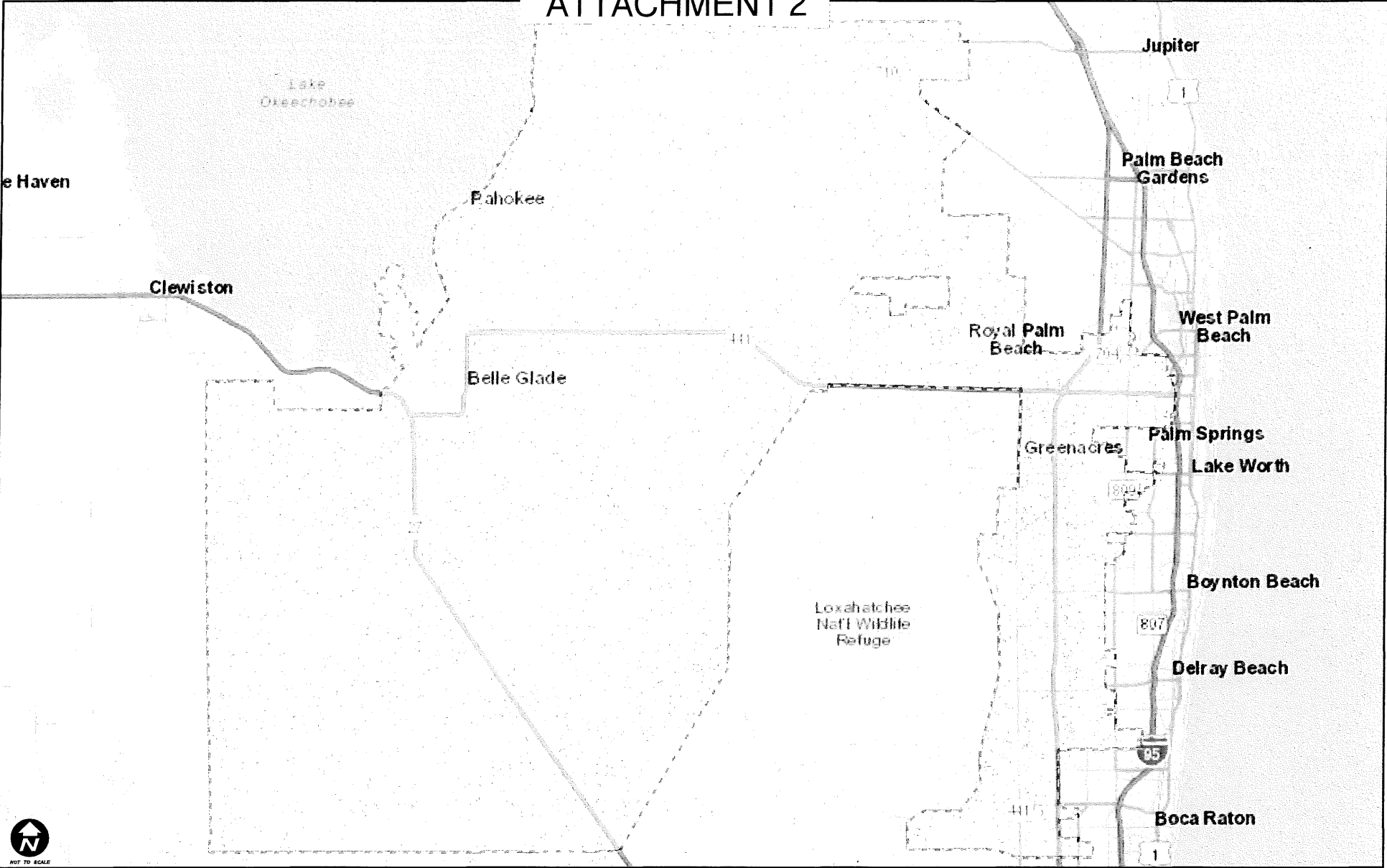
October 25, 20 19
(date of execution)

2051 W Blue Heron Blvd
(Contractor's Official Address)

Riviera Beach, FL 33404
(Contractor's City, State, Zip Code)



ATTACHMENT 2



**Palm Beach County
Water Utilities
Department**
8100 Forest Hill Blvd.
West Palm Beach, FL 33416
(561) 740-4600

**Location Map
Pipeline Continuing Construction Contract 2017
WUD No. 16-077**

Legend

 P.B.C.W.U.D. Service Area

ATTACHMENT 3



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/30/2019

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 South Shore Insurance Inc. 955 SE Central Parkway Stuart, FL 34994	CONTACT NAME: Jennie Lanman PHONE (A/C, No., Ext): (772) 426-9973 FAX (A/C, No.): (772) 221-1960 E-MAIL: jennie@southshore-insurance.com ADDRESS:
INSURED Hinterland Group Inc. 2051 W Blue Heron Blvd Riviera Beach, FL 33404	INSURER(S) AFFORDING COVERAGE INSURER A : Hartford Casualty Insurance Company 29424 INSURER B : Property & Casualty Ins Comp of The Hartford 34690 INSURER C : Sentinel Insurance Compsny 11000 INSURER D : Hartford Fire Insurance Company 19682 INSURER E : The North River Insurance Company 21105 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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> XCU Coverage Included GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	Y	21 UEA HF5360	01/31/2019	01/31/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	Y	Y	21 UEA HF5507	01/31/2019	01/31/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
E	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			582-109804-8	01/31/2019	01/31/2020	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000 \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y	N/A	21 WBA AB0MTJ	01/31/2019	01/31/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
D	Inland Marine	Y		21UUMHF5845	01/31/2019	01/31/2020	Transit Coverage \$2,000,000 Rented/Leased Equi \$300,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

The Board of County Commissioners, Palm Beach County, Florida (a political subdivision of the State of Florida) is hereby named as additional insured under the terms of the policy on blanket form when required by written contract/agreement with the insured executed prior to injury or damage. Palm Beach County Water Utilities Department, its officers, directors, agents and employees are hereby named as additional insured on blanket form under the terms of this policy when required by written contract/agreement with the insured executed prior to injury or damage. The engineer, its officers, agents, and employees are hereby named as additional insured under the terms of this policy when required by written contract/agreement with the insured executed prior to injury or damage. A Waiver of subrogation on blanket form is also provided when required by written contract/agreement with the insured executed prior to injury or damage. Certificate holder is also listed as additional insured/loss payee with respect to inland marine transit coverage on blanket form when required by written contract/agreement with the insured executed prior to injury or damage. (Additional insured and waiver of subrogation in accordance with policy form HCG00010916). WUD Contract #: 16-077

CERTIFICATE HOLDER

CANCELLATION

Palm Beach County
Water Utilities Dept
Director Utilities Engineering
8100 Forest Hill Blvd
West Palm Beach, FL 33413

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

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/11/2019

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.

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PRODUCER	CONTACT NAME: Jennie Lanman
South Shore Insurance Inc.	PHONE (A/C, No, Ext): (772) 426-9973
955 SE Central Parkway	FAX (A/C, No): 772-872-5870
Stuart FL 34994	E-MAIL ADDRESS: jennie@southshore-insurance.com
	INSURER(S) AFFORDING COVERAGE
	INSURER A : The Hartford
	INSURER B :
	INSURER C :
	INSURER D :
	INSURER E :
	INSURER F :

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY						
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR						EACH OCCURRENCE \$
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$
							MED EXP (Any one person) \$
							PERSONAL & ADV INJURY \$
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$
	<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$
	OTHER:						\$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> OCCUR					AGGREGATE \$
		<input type="checkbox"/> CLAIMS-MADE					\$
	DED						PER STATUTE
	RETENTION \$						OTH-ER
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						E.L. EACH ACCIDENT \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y / <input type="checkbox"/> N					E.L. DISEASE - EA EMPLOYEE \$
	If yes, describe under DESCRIPTION OF OPERATIONS below		N / A				E.L. DISEASE - POLICY LIMIT \$
A	Builders Risk	Y		21MSJA9457	07/14/2019	07/14/2020	Blanket Limit \$10,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Palm Beach County Water Utilities Department, its officers, directors, agents and employees are hereby named as additional insured on blanket form under the terms of this policy when required by written contract/agreement with the insured executed prior to injury or damage

WUD Contract #: 16-077

5% wind/hail and \$5,000 all other deductible. This policy is on an All Risk form with 100% replacement cost.

CERTIFICATE HOLDER	CANCELLATION
Palm Beach County Water Utilities Department Director Utilities Engineering 8100 Forest Hill Blvd West Palm Beach, FL 33413	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 <i>Jennie Lanman</i> <JNL>

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