

AMENDMENT #1
LEBOLO CONSTRUCTION MANAGEMENT, INC.
TO CONTRACT FOR CONSTRUCTION MANAGEMENT AT RISK SERVICES
(CM@Risk)
ON A CONTINUING CONTRACT BASIS
FOR FEDERALLY FUNDED PROJECTS
PROJECT NO.: 18208

This Amendment is made as of _____ by and between Palm Beach County, a political subdivision of the State of Florida, hereinafter referred to as Owner, and Lebolo Construction Management, Inc., hereinafter referred to as “Construction Manager”.

WHEREAS, on August 14, 2018, the parties hereto entered into the Continuing Contract (R2018-1161) (hereinafter the “Contract”) under which the Construction Manager provides awarded work to the County for various projects as authorized from time to time under the Contract; and

WHEREAS, the County and the Construction Manager desire to amend certain contract conditions of the Contract.

NOW THEREFORE, in consideration of the mutual covenants, promises and representations contained herein, the Parties agree as follows:

1. Contract Extension/Renewal. The parties hereby extend the term of the original Contract through August 13, 2022.

2. Construction Manager Representation. The Construction Manager certifies that it is still in compliance with the requirements pertaining to scrutinized companies under Florida Statutes Section 287.135.

3. Contract Terms Affirmed. Except as set forth below, the terms and conditions of the Contract including the Federal Requirements shall remain in full force and effect and are hereby ratified and affirmed by the parties hereto.

Contract Modifications and Additions. The following provisions of the Contract are modified as follows: <none>

IN WITNESS WHEREOF, the parties hereto have caused this Amendment to the Contract to be executed as of the day and year first above written.

ATTEST:

SHARON R. BOCK
CLERK & COMPTROLLER

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

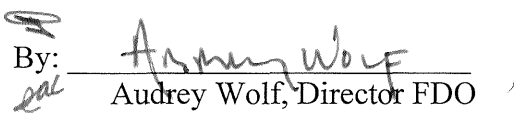
By: _____
Deputy Clerk

By: _____
Dave Kerner, Mayor

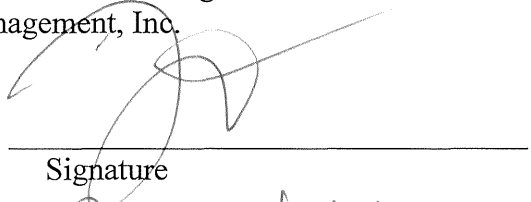
APPROVED AS TO
LEGAL SUFFICIENCY

APPROVED AS TO TERMS AND
CONDITIONS

By: 
Assistant County Attorney

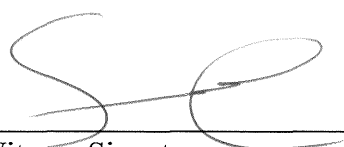
By: 
Audrey Wolf, Director FDO

Construction Manager: Lebolo Construction
Management, Inc.

By: 
Signature

Name: Randall Lebolo

(SEAL)
Title: president


Witness Signature
SEBASTIAN FOWDGBRA
Print Witness Name



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

9/10/2019

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 Bateman, Gordon & Sands, Inc. 3050 North Federal Hwy Lighthouse Point FL 33064	CONTACT NAME: PHONE (A/C No. Ext): 954-941-0900 FAX (A/C No.): 954-941-2006 E-MAIL ADDRESS: kdunn@bgsagency.com		
	INSURER(S) AFFORDING COVERAGE		
INSURED Lebolo Construction Management, Inc. 2100 Corporate Drive Boynton Beach FL 33426	LEBC01	INSURER A : CNA/American Casualty Co. of Reading, PA	NAIC # 20427
		INSURER B : The Continental Insurance Co	35289
		INSURER C : Transportation Insurance Company	20494
		INSURER D : Starstone National Insurance Company	25496
		INSURER E :	
		INSURER F :	


COVERAGES **CERTIFICATE NUMBER:** 1456699107 **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input checked="" type="checkbox"/> PRO-JECT LOC	Y	Y	GL6072556356	9/11/2019	9/11/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS	Y	Y	BUA6072556373	9/11/2019	9/11/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000	Y	Y	CUE6072556390	9/11/2019	9/11/2020	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	WC6072623358	9/11/2019	9/11/2020	<input checked="" type="checkbox"/> WC STATUTORY LIMITS 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	Leased/Rented Equipment			84917R180EQF	8/13/2019	8/13/2020	Limit: \$100,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 General Liability: Additional Insured, Primary & Non-Contributory, Waiver of Subrogation, Per Project Aggregate, On-Going and Completed Operations, as required by written contract, per form CNA74705XX 01/15.
 Auto Liability: Additional Insured, Primary & Non-Contributory, Waiver of Subrogation, as required by written contract, per form CNA63359XX 04/12.
 Workers' Compensation: Waiver of Subrogation, as required by written contract, per form WC000313.
 Umbrella Liability: Extends coverage to underlying General Liability, Auto Liability and Workers Compensation/Employers Liability coverages.
ALL COVERAGE IS SUBJECT TO THE POLICY TERMS, CONDITIONS AND EXCLUSIONS

Project Number: 18208
 See Attached...

CERTIFICATE HOLDER Palm Beach County c/o Capital Improvements Division 2633 Vista Parkway West Palm Beach FL 33411-5603	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 

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AGENCY CUSTOMER ID: LEBCO1

LOC #: _____



ADDITIONAL REMARKS SCHEDULE

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AGENCY Bateman, Gordon & Sands, Inc.		NAMED INSURED Lebolo Construction Management, Inc. 2100 Corporate Drive Boynton Beach FL 33426	
POLICY NUMBER		EFFECTIVE DATE:	
CARRIER	NAIC CODE		

ADDITIONAL REMARKS

**THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 FORM TITLE: CERTIFICATE OF LIABILITY INSURANCE**

Additional Insured: Palm Beach County Board of County Commissioners, a political subdivision of the State of Florida, its officers, employees and agents, c/o Facilities Development & Operations Department