

PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS

AGENDA ITEM SUMMARY

Meeting Date: September 13, 2022 Consent [X] Regular []
Public Hearing []

Department: Water Utilities Department

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Supplement No. 5 to Work Authorization (WA) No. 2 to the Continuing Contract for Wastewater Gravity Lines & Manhole Rehabilitation (Continuing Contract) with Hinterland Group Inc. (Contractor) for the Gravity Main and Manhole Rehabilitation (Project) in the amount of \$238,379.63.

Summary: On February 5, 2019, the Board of County Commissioners approved the Palm Beach County Water Utilities Department (PBCWUD) Continuing Contract (R2019-0216) with Contractor. WA No. 2 completes the rehabilitation of 30,735 linear feet of existing gravity sewer mains located within West Palm Beach. The work involved the cleaning and video inspection of the gravity sewer mains, inspection of the gravity sewer manholes, repair of the gravity sewer mains as necessary, the rehabilitation of the gravity sewer mains using cured-in-place pipe and finally, the rehabilitation of the gravity sewer manholes. The Continuing 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 Continuing Contract provides for 91.845% SBE participation. WA No. 2 includes 100% SBE participation. Supplement No. 5 to WA No. 2 includes 100% SBE participation. The cumulative SBE participation including Supplement No. 5 to WA No. 2 is 51.3%. Contractor is a Palm Beach County based company. The project is included in the PBCWUD FY22 Budget. (PBCWUD Project 20-048) Districts 2 and 3 (MWJ)

Background and Justification: Bid Item No. 92 for WA No. 2 listed a quantity of one hundred fifty-eight (158) gravity sewer manholes to be inspected for rehabilitation. The related quantities for bid items 66 and 86 were under estimated. During the course of construction, several gravity sewer manholes within the lift station basins were in need of immediate rehabilitation which resulted in an additional amount of \$238,379.63. This work was necessary to restore the service life of the gravity sewer system assets, reduce ground water infiltration and improve the long-term operability of the wastewater collection system.

Attachments:

1. Four (4) Originals of Supplement No. 5 to Work Authorization No. 2
2. Location Map
3. Certificate of Liability Insurance

Recommended By: AL: 1304AT 7/29/22
Department Director Date

Approved By: Zell B. Blum 8/22/22
Assistant County Administrator Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2022	2023	2024	2025	2026
Capital Expenditures	\$238,380	0	0	0	0
Operating Costs	0	0	0	0	0
External Revenues	0	0	0	0	0
Program Income (County)	0	0	0	0	0
In-Kind Match County	0	0	0	0	0
NET FISCAL IMPACT	\$238,380	0	0	0	0
# ADDITIONAL FTE POSITIONS (Cumulative)	0	0	0	0	0
Budget Account No.:	Fund 4011	Dept 721	Unit W031	Object	6547

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:

One (1) time expenditure from user fees, connection fees and balance brought forward.

C. Department Fiscal Review: Joony Banton GE

III. REVIEW COMMENTS

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

Lin Ma 8/16/22
OFMB 8/16/22
Angela B. Babin
Contract Development and Control
8-19-22 TW

B. Legal Sufficiency:

[Signature] 8/23/22
Assistant County Attorney

C. Other Department Review:

Department Director

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

SUPPLEMENT NO. 5 TO WORK AUTHORIZATION NO. 2
Palm Beach County Water Utilities Department
Continuing Contract for Wastewater Gravity Lines & Manhole Rehabilitation
Resolution No. R2020-1483 Work Authorization Dated 10-06-2020

Project Title: Gravity Main and Manhole Rehabilitation

PBCWUD Project No.: 20-048

Contractor: Hinterland Group Inc.

Address: 2051 W. Blue Heron Blvd., Riviera Beach, FL 33404

Budget Line Item No.: 4011 - 721 - W031 - 6547

Districts: 2 & 3

Notice to Proceed: November 17, 2020

The Contract provides for 91.845 % SBE participation. This Supplement includes 100 % overall participation. The cumulative SBE participation, including this Supplement is 51.30 %.

You are directed to make the following changes in this work authorization:

- Increase the Work Authorization (WA) amount to pay for additional work done for bid items 28 to 120 (see attached "Estimate of Remaining Cost"). \$238,379.63

Total: \$238,379.63

All Attachments to this Supplement are made a part of this Supplement and incorporated herein.

NOT VALID UNTIL SIGNED BY BOTH OWNER AND ENGINEER. SIGNATURE OF THE CONTRACTOR INDICATES THEIR AGREEMENT HERewith INCLUDING ANY ADJUSTMENT IN THE WORK AUTHORIZATION SUM OR WORK AUTHORIZATION TIME, AND NO ADDITIONAL COST OR TIME INDICATED HEREIN WILL BE RELATED TO THIS CHANGE

The Original Work Authorization Sum was.....	<u>\$1,270,266.05</u>
Net Change by previous Supplements.....	<u>\$108,575.65</u>
The Work Authorization Sum prior to this Supplement was.....	<u>\$1,378,841.70</u>
The Work Authorization Sum will be increased/decreased by this Supplement.....	<u>\$238,379.63</u>
The New Work Authorization Sum indicating this Supplement will be.....	<u>\$1,617,221.33</u>
The Work Authorization Time will be increased/decreased by.....	<u>0 Days</u>
The Date of Substantial Completion including this Supplement.....	<u>7/15/2022</u>
The Date of Final Completion including this Supplement.....	<u>8/14/2022</u>

SUPPLEMENT NO. 5 TO WORK AUTHORIZATION NO. 2
Palm Beach County Water Utilities Department
Continuing Contract for Wastewater Gravity Lines & Manhole Rehabilitation
Resolution No. R2020-1483 Work Authorization Dated 10-06-2020


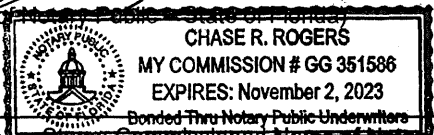
Execution of this supplement acknowledges final settlement of, and releases, all claims for costs and time associated, directly or indirectly, with the above stated modification(s), including all claims for cumulative delays or disruptions resulting from, caused by, or incident to such modification(s), and including any claim that the above stated modification(s) constitutes, in whole or part, a cardinal change to the work authorization.

Hinterland Group Inc. CONTRACTOR	Palm Beach County Water Utilities Department ENGINEER	Palm Beach County Board of County Commissioners OWNER
2051 W. Blue Heron Blvd. Riviera Beach, FL 33404 ADDRESS	8100 Forest Hill Blvd. West Palm Beach, FL 33413 ADDRESS	301 N. Olive Avenue West Palm Beach, FL 33401 ADDRESS
 SIGNATURE	 SIGNATURE	 SIGNATURE
Daniel Duke III PRINT NAME	Frantz Fenelon PRINT NAME	Robert S. Weinroth PRINT NAME
President TITLE	Project Manager TITLE	Mayor TITLE
7/19/22 DATE	7/22/2022 DATE	DATE



STATE OF FLORIDA
COUNTY OF PALM BEACH

The foregoing instrument was acknowledged
before me by means of ☒ physical presence or ☐ online notarization
this 19, day of JULY, 2022,
by DANIEL DUKE III who is ☒ personally known
to me or ☐ has produced _____ as identification.

(Signature of Notary Public - State of Florida)


(Print, Type, or Stamp Commissioned Name of Notary Public)

Approved as to Form and Legal Sufficiency

By: _____
County Attorney

Attest: Joseph Abruzzo, Clerk of the Circuit Court
& Comptroller, Palm Beach County

By: _____
Deputy Clerk

SUPPLEMENT NO. 5 TO WORK AUTHORIZATION NO. 2
Palm Beach County Water Utilities Department
Continuing Contract for Wastewater Gravity Lines & Manhole Rehabilitation
Resolution No. R2020-1483 Work Authorization Dated 10-06-2020

LIST OF ATTACHMENTS

ATTACHMENT A	Supplement Summary and Categorization
ATTACHMENT B	Supplement Additions/Deletions Summary
ATTACHMENT C	OEBO Schedule 1 and Schedule 2
ATTACHMENT D	Location Map
ATTACHMENT E	Bond Rider
ATTACHMENT F	Supporting Documentation

Revised 12/06/2021

Project Title: Gravity Main and Manhole Rehabilitation

PBCWUD Project No.: 20-048

Resolution No.: R2020-1483

SUPPLEMENT CATEGORIZATION CODE

- Revised 12/06/2021

SUPPLEMENT ADDITIONS/DELETIONS SUMMARY

PROJECT TITLE: Gravity Main and Manhole Rehabilitation

APPROVAL LIMITS:

CONTRACTOR: Hinterland Group Inc.

Department Head

Contract Review Committee

PBCWUD PROJECT NO.: 20-048

INDIVIDUAL SUPPL.	<u>\$100,000.00</u>
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\$199,999.00

RESOLUTION NO.: R2020-1483

DATE APPROVED: October 06, 2020

SUPPL. NO.	DATE APPROVED	NET CHANGE ¹	DEPARTMENT HEAD (ADDS PLUS DEDUCTS) ²		CONTRACT REVIEW COMMITTEE (ADDS PLUS DEDUCTS) ²		TOTAL DEPT. HEAD & CONTRACT REVIEW COMM. (ADDS PLUS DEDUCTS) ²		BOARD OF COUNTY COMMISSIONERS (ADDS PLUS DEDUCTS) ²		TOTALS
			AMOUNT	DAYS	AMOUNT	DAYS	AMOUNT	DAYS	AMOUNT	DAYS	
1	7/26/2021	\$14,975.00	\$14,975.00	0	\$0.00	0	\$14,975.00	0	\$0.00	0	\$14,975.00
2	3/17/2022	\$9,200.00	\$9,200.00	90	\$0.00	0	\$9,200.00	90	\$0.00	0	\$9,200.00
3	3/17/2022	\$8,547.75	\$8,547.75	90	\$0.00	0	\$8,547.75	90	\$0.00	0	\$8,547.75
4	6/15/2022	\$75,852.90	\$0.00	0	\$75,852.90	90	\$75,852.90	90	\$0.00	0	\$75,852.90
5	Pending	\$238,379.63	\$0.00	0	\$0.00	0	\$0.00	0	\$238,379.63	0	\$238,379.63
		\$346,955.28	\$32,722.75	180	\$75,852.90	90	\$108,575.65	270	\$238,379.63	0	\$346,955.28

NOTES:

1. Net Change reflects the net amount of additions plus deletions.
2. Adds plus Deducts reflects the absolute value of unrelated changes for use in determining the approval authority for the Supplement.

ATTACHMENT C
OEBO SCHEDULE 1

OFFICE OF EQUAL BUSINESS OPPORTUNITY COMPLIANCE PROGRAMS

OEBO SCHEDULE 1

LIST OF PROPOSED CONTRACTOR/CONSULTANT AND SUBCONTRACTOR/SUBCONSULTANT PARTICIPATION

SOLICITATION/PROJECT/BID NAME: Gravity Main and Manhole Rehabilitation

NAME OF PRIME RESPONDENT/BIDDER: Hinterland Group Inc.

CONTACT PERSON: Butch Forrester

SOLICITATION OPENING/SUBMITTAL DATE: 10/06/2020

SOLICITATION/PROJECT/BID No.: WUD #20-048

ADDRESS: 2051 W Blue Heron Blvd., Riviera Beach, FL 33404

PHONE NO.: (561) 640-3503 E-MAIL: bforrester@hinterlandgroup.com

DEPARTMENT: Water Utilities

PLEASE LIST THE DOLLAR AMOUNT OR PERCENTAGE OF WORK TO BE COMPLETED BY THE PRIME CONTRACTOR/CONSULTANT ON THIS PROJECT. PLEASE ALSO LIST THE DOLLAR AMOUNT OR PERCENTAGE OF WORK TO BE COMPLETED BY ALL SUBCONTRACTORS/SUBCONSULTANTS ON THE PROJECT.

Name, Address and Phone Number	(Check all Applicable Categories)			DOLLAR AMOUNT OR PERCENTAGE OF WORK					
	Non-SBE	M/WBE Minority/Women Business	SBE Small Business	Black	Hispanic	Women	Caucasian	Other (Please Specify)	
1. Hinterland Group Inc. 2051 W Blue Heron Blvd., Riviera Beach, FL 33404 (561) 640-3503	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$238,379.63	<input type="checkbox"/>	
2.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
3.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
4.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
5.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	
(Please use additional sheets if necessary)				Total	<input type="checkbox"/>	<input type="checkbox"/>	\$238,379.63	<input type="checkbox"/>	
Total Bid Price \$ 238,379.63				Total SBE - M/WBE Participation 100%					

I hereby certify that the above information is accurate to the best of my knowledge:

Butch Forrester

Signature

Project Manager

Title

- Note:
- 1. The amount listed on this form for a Subcontractor/subconsultant must be supported by price or percentage listed on the properly executed Schedule 2 or attached signed proposal.
 - 2. Firms may be certified by Palm Beach County as an SBE and/or an M/WBE. If firms are certified as both an SBE and/or M/WBE, please indicate the dollar amount under the appropriate category.
 - 3. Modification of this form is not permitted and will be rejected upon submittal.

ATTACHMENT C
OEBO SCHEDULE 2

OFFICE OF EQUAL BUSINESS OPPORTUNITY COMPLIANCE
PROGRAMS

Revised 12/06/2021

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OEBO LETTER OF INTENT – SCHEDULE 2

A completed Schedule 2 is a binding document between the Prime Contractor/consultant and a Subcontractor/subconsultant (for any tier) and should be treated as such. The Schedule 2 shall contain bolded language indicating that by signing the Schedule 2, both parties recognize this Schedule as a binding document. All Subcontractors/subconsultants, including any tiered Subcontractors/subconsultants, must properly execute this document. Each properly executed Schedule 2 must be submitted with the bid/proposal.

SOLICITATION/PROJECT NUMBER: WUD #20-048

SOLICITATION/PROJECT NAME: Gravity Main and Manhole Rehabilitation

Prime Contractor: Hinterland Group Inc. Subcontractor:

(Check box(s) that apply)

☒ SBE ☐ WBE ☐ MBE ☐ M/WBE ☐ Non-S/M/WBE Date of Palm Beach County Certification (if applicable): 12/10/2015 12/9/2018

The undersigned affirms they are the following (select one from each column if applicable):

Column 1

Column 2

Column 3

☒ Male ☐ Female ☐ African-American/Black ☐ Asian American ☒ Caucasian American ☐ Supplier ☐ Hispanic American ☐ Native American

S/M/WBE PARTICIPATION – S/M/WBE Primes must document all work to be performed by their own work force on this form. Failure to submit a properly executed Schedule 2 for any S/M/WBE participation may result in that participation not being counted. Specify in detail, the scope of work to be performed or items supplied with the dollar amount and/or percentage for each work item. S/M/WBE credit will only be given for the areas in which the S/M/WBE is certified. A detailed proposal may be attached to a properly executed Schedule 2.

Line Item	Item Description	Unit Price	Quantity/ Units	Contingencies/ Allowances	Total Price/Percentage
28	Gravity main cleaning, installation of Cured-In-Place Pipe,	\$238,379.63	1		\$238,379.63
to	manhole bench repair, manhole coating... (see attached for details)				
120					

The undersigned Subcontractor/subconsultant is prepared to self-perform the above-described work in conjunction with the aforementioned project at the following total price or percentage: \$238,379.63

If the undersigned intends to subcontract any portion of this work to another Subcontractor/subconsultant, please list the business name and the amount below accompanied by a separate properly executed Schedule 2.

Name of 2nd/3rd tier Subcontractor/subconsultant

Price or Percentage:

Hinterland Group Inc.

Print Name of Prime

By:

Authorized Signature

Butch Forrester

Print Name

Project Manager

Title

Date: 06/07/2022

Hinterland Group Inc.

Print Name of Subcontractor/subconsultant

By:

Authorized Signature

Butch Forrester

Print Name

Project Manager

Title

Date: 06/07/2022

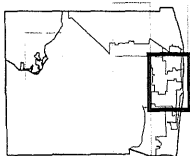
Revised 09/17/2019

ATTACHMENT D

LOCATION MAP

Revised 12/06/2021

PBCWUD Project No. 20-048



Location Sketch

ATTACHMENT E

BOND RIDER

Revised 12/06/2021

Increase Rider
(Bond No. 21BCSIH4408)

To be attached to and form a part of Bond No. 21BCSIH4408 on behalf of Hinterland Group Inc.
_____, as Principal, and in favor of the _____
Palm Beach County _____, as Obligee.

In consideration of the additional premium charged, and subject to all terms, conditions and limitations of the
said Bond, it is hereby understood and agreed that the amount of said bond is increased:

From: One Million Three Hundred Seventy Eight Thousand Eight Hundred Forty One dollars and Seventy Cents Dollars (\$ 1,378,841.70)

To: One Million Six Hundred Seventeen Thousand Two Hundred Twenty One dollars and Thirty Three Cents Dollars (\$ 1,617,221.33)

To be effective: June 29, 2022

In no event shall the aggregate liability of the undersigned surety exceed the increased limit.

Signed, and sealed this 29th day of June, 2022

Hinterland Group, Inc.
(Principal)

By: _____



Hartford Accident and Indemnity Company
(Surety)

By: Jennie N. Larman
Jennie N. Larman _____, Attorney-in-Fact

POWER OF ATTORNEY

Direct Inquiries/Claims to:

THE HARTFORD
BOND, T-12
One Hartford Plaza
Hartford, Connecticut 06155
bond.claims@thehartford.com

call: 888-266-3488 or fax: 860-757-5835

KNOW ALL PERSONS BY THESE PRESENTS THAT:

Agency Code: HALCYON UNDERWRITERS
Agency Code: 21-224119

- ☒ Hartford Fire Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- ☒ Hartford Casualty Insurance Company, a corporation duly organized under the laws of the State of Indiana
- ☒ Hartford Accident and Indemnity Company, a corporation duly organized under the laws of the State of Connecticut
- ☐ Hartford Underwriters Insurance Company, a corporation duly organized under the laws of the State of Connecticut
- ☐ Twin City Fire Insurance Company, a corporation duly organized under the laws of the State of Indiana
- ☐ Hartford Insurance Company of Illinois, a corporation duly organized under the laws of the State of Illinois
- ☐ Hartford Insurance Company of the Midwest, a corporation duly organized under the laws of the State of Indiana
- ☐ Hartford Insurance Company of the Southeast, a corporation duly organized under the laws of the State of Florida

having their home office in Hartford, Connecticut, (hereinafter collectively referred to as the "Companies") do hereby make, constitute and appoint, up to the amount of \$15,000,000:

Jennie N. Lanman
Of
Maitland, FL

their true and lawful Attorney(s)-in-Fact, each in their separate capacity if more than one is named above, to sign its name as surety(ies) only as delineated above by ☒, and to execute, seal and acknowledge any and all bonds, undertakings, contracts and other written instruments in the nature thereof, on behalf of the Companies in their business of guaranteeing the fidelity of persons, guaranteeing the performance of contracts and executing or guaranteeing bonds and undertakings required or permitted in any actions or proceedings allowed by law.

In Witness Whereof, and as authorized by a Resolution of the Board of Directors of the Companies on May 23, 2016 the Companies have caused these presents to be signed by its Assistant Vice President and its corporate seals to be hereto affixed, duly attested by its Assistant Secretary. Further, pursuant to Resolution of the Board of Directors of the Companies, the Companies hereby unambiguously affirm that they are and will be bound by any mechanically applied signatures applied to this Power of Attorney.



Shelby Wiggins

Shelby Wiggins, Assistant Secretary

Joelle L. LaPierre

Joelle L. LaPierre, Assistant Vice President

STATE OF FLORIDA

COUNTY OF SEMINOLE

ss. Lake Mary

On this 20th day of May, 2021, before me personally came Joelle L. LaPierre to me known, who being by me duly sworn, did depose and say: that she resides in Seminole County, State of Florida; that she is the Assistant Vice President of the Companies, the corporations described in and which executed the above instrument; that she knows the seals of the said corporations; that the seals affixed to the said instrument are such corporate seals; that they were so affixed by authority of the Boards of Directors of said corporations and that she signed her name thereto by like authority.



Jessica Ciccone

Jessica Ciccone
My Commission HH 122280
Expires June 20, 2025

I, the undersigned, Assistant Vice President of the Companies, DO HEREBY CERTIFY that the above and foregoing is a true and correct copy of the Power of Attorney executed by said Companies, which is still in full force effective as of June 29, 2022

Signed and sealed in Lake Mary, Florida.



Keith Dozois

Keith Dozois, Assistant Vice President

ATTACHMENT F

SUPPORTING DOCUMENTATION

Revised 12/06/2021




PALM BEACH COUNTY WATER UTILITIES DEPARTMENT

ENGINEERING DIVISION

Project Name:

Gravity Main and Manhole Rehabilitation

Project Manager:

Frantz Fenelon 

WUD No.:

20-048

MEMORANDUM OF EXPLANATION

For Work Authorization (WA) No. 2, bid item No. 92, pre-construction manhole survey, bid item 66, repair sewer manhole bench and invert and bid item 86, install cementitious manhole liner for precast manhole were under estimated. For during the course of construction, several gravity sewer manholes within the lift station basins listed in WA No. 2, not accounted for in the original scope of work, in need of immediate rehabilitation have been rehabbed. Consequently, the original quantities for the afore-mentioned bid items were exceeded resulting in the depletion of WA No. 2 amount. The additional funds needed to pay for the excess from bid items 66 and 86 along other bid items not fully paid for as yet are estimated to \$238,379.63. This work was necessary to restore the service life of the gravity sewer system assets, reduce ground water infiltration and improve the long-term operability of the wastewater collection system. The Project Manager submits this supplement for approval.

PALM BEACH COUNTY WATER UTILITIES DEPARTMENT
ESTIMATE OF REMAINING COST

ITEM NO.	UNIT COST	UNIT	ORIGINAL QUANTITY	ORIGINAL COST	PAID QUANTITY	PAID COST	UNPAID QUANTITY	UNPAID COST	% COMPLETE
28	\$ 4.00	LF	32,338.3	\$ 129,353.20	32,794.0	\$ 131,176.00	86.0	\$ 344.00	102%
46	\$ 28.00	LF	28,978.0	\$ 811,384.00	21,543.5	\$ 603,218.00	6,409.4	\$ 179,463.20	96%
48	\$ 32.00	LF	2,345.0	\$ 75,040.00	2,162.5	\$ 69,200.00	251.0	\$ 8,032.00	103%
52	\$ 45.00	LF	1,014.0	\$ 45,630.00	0.0	\$ -	368.5	\$ 16,582.50	36%
66	\$ 300.00	EA	2	\$ 600.00	244.0	\$ 73,200.00	2.0	\$ 600.00	12300%
86	\$ 220.00	VF	50	\$ 11,000.00	1,428.2	\$ 314,204.00	34.0	\$ 7,480.00	2924%
87	\$ 200.00	VF	50	\$ 10,000.00	0.0	\$ -	22.0	\$ 4,400.00	44%
120	\$ 42,955.86	LS	1	\$ 42,955.86	0.5	\$ 21,477.93	0.5	\$ 21,477.93	100%
				<u>\$ 1,125,963.06</u>				<u>\$ 238,379.63</u>	

NOTE: This table shows the additional cost of \$238,379.63 to be paid to the Contractor for work already completed. This amount does not include supplements 3 and 4.

JF. 7/20/2022

Accepted By (Signature) 6/16/2022



January 26, 2022


To whom it may concern:

I, Daniel Duke, III, President of Hinterland Group Inc., do hereby authorize Chase Rogers and Jay Breig to sign any and all project related documents on behalf of Hinterland Group Inc.

In addition, and until further notice, the following personnel are authorized to sign pay applications and supporting documentation relating to Palm Beach County pay applications. This does not authorize the signing of change orders, supplements, lien releases, notice to proceed, warranties of title or Final pay applications or relating documents.

Authorized to Sign Pay Applications and Supporting Documentation for Pay Applications:

- Butch Forrester
- Jacob Crowe
- Kervin Flores-Garcia
- Nelson Bello



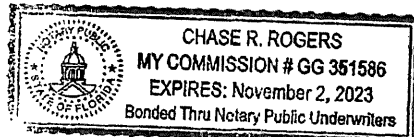
Daniel Duke, III – President
Dated: January 26, 2022

State of Florida
County of Palm Beach

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization this 27 day of JAN, 2022 by DANIEL DUKE III who is personally known to me ☐ or had produced a ☐ _____ as identification.

Notary Public

My Commission Expires 11/2/23



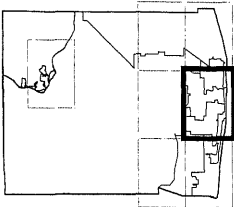
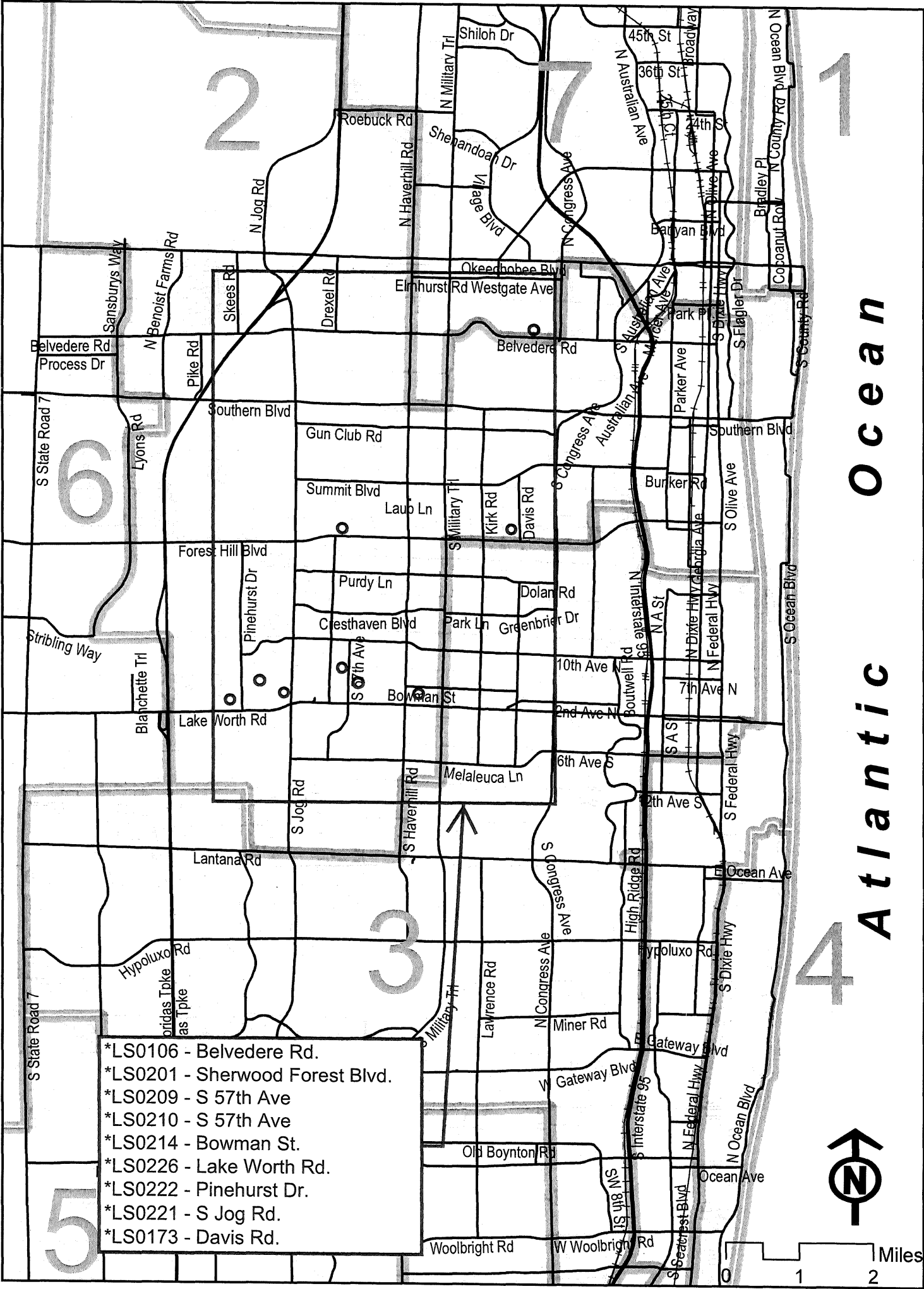
Hinterland Group Inc. Corporate Office

2051 W Blue Heron Blvd. Riviera Beach, FL 33404 • Ph 561-640-3503 • Fax 561-640-3504

Project Location

PBCWUD Project No. 20-048

ATTACHMENT NO. 2



Location Sketch



ATTACHMENT 3
CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/31/2022

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: PHONE (A/C No., Ext): (772) 426-9973 FAX (A/C No.): (772) 872-5870 E-MAIL ADDRESS: INSURER(S) AFFORDING COVERAGE INSURER A : Zurich American Insurance Company NAIC # 16535 INSURER B : Travelers Property Casualty Company of Amer 25674 INSURER C : American Guarantee & Liability Insurance Co. 26247 INSURER D : INSURER E : INSURER F :
INSURED Hinterland Group Inc. 2051 West Blue Heron Blvd Riviera Beach, FL 33404	

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		x	x	GLO 4956332-02	01/31/2022	01/31/2023	EACH OCCURRENCE	\$ 1,000,000	
	<input type="checkbox"/>	CLAIMS-MADE	<input checked="" type="checkbox"/> OCCUR						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000	
	<input checked="" type="checkbox"/>	XCU Coverage Included							MED EXP (Any one person)	\$ 5,000	
	<input checked="" type="checkbox"/>	Primary/Non Contributory							PERSONAL & ADV INJURY	\$ 1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:								GENERAL AGGREGATE	\$ 2,000,000	
	<input type="checkbox"/>	POLICY	<input checked="" type="checkbox"/> PRO-JECT	<input type="checkbox"/> LOC					PRODUCTS - COMP/OP AGG	\$ 2,000,000	
	OTHER:									\$	
A	AUTOMOBILE LIABILITY			x	x	BAP 4956334-02	01/31/2022	01/31/2023	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000	
	<input checked="" type="checkbox"/>	ANY AUTO	<input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS						BODILY INJURY (Per person)	\$	
	<input type="checkbox"/>	ALL OWNED AUTOS							BODILY INJURY (Per accident)	\$	
	<input checked="" type="checkbox"/>	HIRED AUTOS							PROPERTY DAMAGE (Per accident)	\$	
										\$	
B	<input checked="" type="checkbox"/>	UMBRELLA LIAB	<input checked="" type="checkbox"/> OCCUR			CUP-0T249771-22-F	01/31/2022	01/31/2023	EACH OCCURRENCE	\$ 2,000,000	
	<input type="checkbox"/>	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE						AGGREGATE	\$ 2,000,000	
	<input type="checkbox"/>	DED	<input type="checkbox"/> RETENTION \$							\$	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			Y / N	N / A	x	WC4956333-02	01/31/2022	01/31/2023	<input checked="" type="checkbox"/> PER STATUTE	<input type="checkbox"/> OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)									E.L. EACH ACCIDENT	\$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below									E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
										E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
A	Inland Marine					CPP-6674260-02	01/31/2022	01/31/2023	Installation Floater	\$2,000,000	
				Rented/Leased Equi	\$500,000						

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

Should any of the above policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives. Certificate Holder is as an additional insured on blanket form only if required by written contract/agreement with the insured executed prior to injury or damage. A Waiver of Subrogation is provided on blanket form only if required by written contract/agreement with the insured executed prior to injury or damage. Coverage is primary/noncontributory to additional insureds when it is required by written contract/agreement with the insured executed prior to injury or damage.

Daniel Amos Duke III CGC1520354, CUC1224634
Charles J Breig EC13003615

CERTIFICATE HOLDER	CANCELLATION
Palm Beach County Palm Beach County Board of County Commissioners Insurance Compliance PO Box 100085- DX Duluth, GA 30096	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>Jimmie Janner</i>

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