

**PALM BEACH COUNTY
BOARD OF COUNTY COMMISSIONERS
AGENDA ITEM SUMMARY**

Meeting Date: November 5, 2024

Consent
 Workshop

Regular
 Public Hearing

Department: Facilities Development & Operations

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve: Consultant Services Authorization (CSA) No. 10 to the continuing consulting services/design professional services contract for public safety radio system planning and design services (R2019-1897) with Omnicom Consulting Group, Inc. (Consultant) in the amount of \$129,440 for the West County Communications Tower Site Replacement project.

Summary: On December 17, 2019, the Board of County Commissioners (BCC) approved the continuing consulting services/design professional services contract for public safety radio system planning and design services (R2019-1897) with Consultant to provide engineering and management services to upgrade, maintain, operate and make modifications to the public safety radio system throughout the County on an as needed basis. This item will authorize the professional services necessary for the West County Communications Tower Site Replacement project. Under CSA No. 10, the Consultant will provide professional services which include all design phase services (i.e. design services, construction documents preparation, permitting and construction administration services) necessary for the construction of a 400 foot self-supporting tower, equipment shelter, communications compound and emergency power systems for the West County Communications Tower Site Replacement project. The existing communication tower structure is leased, no longer meets County standards for the public safety radio system, and provides no certainty of critical communication operational continuity into the future. This design will deliver a County-owned communication tower at the West County Administrative Complex in unincorporated Belle Glade, in accordance with the BCC and State approved Master Plan for the property, to serve the western communities. This continuing contract was solicited pursuant to the requirements of the Equal Business Opportunity (EBO) Ordinance. This continuing contract was presented to the Goal Setting Committee (GSC) on May 1, 2019 and the Committee established an Affirmative Procurement Initiative (API) of a Small Business Enterprise (SBE) Evaluation Preference that awarded 15 points for SBE prime respondents during selection. No mandatory SBE subcontracting goal was applied by the GSC to this continuing contract due to the specialized nature of the services to be performed.

Funding for this project is from the RR&I for 800 Mhz Sys. **(Capital Improvements Division) District 6 (MWJ)**

Background & Justification: The design professional was selected on November 8, 2019, pursuant to Section 287.055, Florida Statutes, the Consultants' Competitive Negotiation Act (CCNA). CSA No. 10 will authorize professional services necessary for the West County Communications Tower Site Replacement. This design will deliver a County-owned communication tower at the West County Administrative Complex in unincorporated Belle Glade, in accordance with the BCC and State approved Master Plan for the property, to serve the western communities.

Attachments:

1. Budget Availability Statement
2. CSA No. 10
3. CSA History

Recommended by:  Department Director 10/21/24 Date

Approved by:  County Administrator 10/24/24 Date

II. FISCAL IMPACT ANALYSIS

A. Five Year Summary of Fiscal Impact:

Fiscal Years	2025	2026	2027	2028	2029
Capital Expenditures	\$129,440	_____	_____	_____	_____
Operating Costs	_____	_____	_____	_____	_____
External Revenues	_____	_____	_____	_____	_____
Program Income (County)	_____	_____	_____	_____	_____
In-Kind Match (County)	_____	_____	_____	_____	_____
NET FISCAL IMPACT	<u>\$129,440</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>	<u>-0-</u>
# ADDITIONAL FTE POSITIONS (Cumulative)	_____	_____	_____	_____	_____

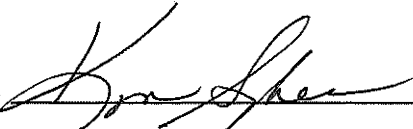
Is Item Included in Current Budget: Yes X No _____
 Is this item using Federal Funds? Yes _____ No X
 Is this item using State Funds? Yes _____ No X

Budget Account No:

<u>Fund</u> 3801	<u>Dept</u> 411	<u>Unit</u> B653	<u>Object</u> 6505
PROFESSIONAL SERVICES		\$129,440.00	
STAFF COSTS		\$ 0.00	
CONTINGENCY		<u>\$ 0.00</u>	
TOTAL		\$129,440.00	

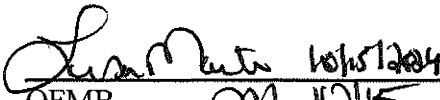
B. Recommended Sources of Funds/Summary of Fiscal Impact:

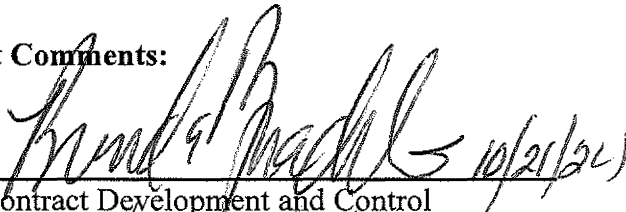
Funding for this project is from the RR&I for 800 Mhz Sys.

C. Departmental Fiscal Review: 


III. REVIEW COMMENTS

A. OFMB Fiscal and/or Contract Development Comments:

 10/15/2024
 OFMB
 JPA 10/15
 ESW 10.15

 10/21/24
 Contract Development and Control
 MWS, 10/18/24

B. Legal Sufficiency:

 10/22/24
 Assistant County Attorney

C. Other Department Review:

 Department Director

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

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: 07/11/2024

REQUESTED BY: Rich Avery

PHONE: 233-0208

PROJECT TITLE: West County Communications Tower Site Relocation
(Same as CIP or IST, if applicable)

ORIGINAL CONTRACT AMOUNT: N/A

IST PLANNING NO.:

REQUESTED AMOUNT: \$129,440.00
EFDO #2024-015781/P-2024-00541

BCC RESOLUTION#: R2019-1897
DATE: 12/17/19

CSA or CHANGE ORDER NUMBER: CSA #10

LOCATION: 38811 James Wheeler Way, Belle Glade

BUILDING NUMBER: 3027

DESCRIPTION OF WORK/SERVICE LOCATION:

PROJECT/W.O. NUMBER: 2024-015781

CONSULTANT/CONTRACTOR: Omnicom Consulting Group, Inc.

PROVIDE A BRIEF STATEMENT OF THE SCOPE OF SERVICES TO BE PROVIDED BY THE CONSULTANT/CONTRACTOR:

Professional services shall include design phase services for the construction of a 400 foot self-supporting tower, equipment shelter, communications compound and emergency power systems for the West County Government Center Tower project.

CONSTRUCTION	\$
PROFESSIONAL SERVICES	\$129,440.00
STAFF COSTS*	\$
EQUIP. / SUPPLIES	\$
CONTINGENCY	\$
TOTAL	\$129,440.00

* By signing this BAS your department agrees to these CID staff charges and your account will be charged upon receipt of this BAS by FD&O. Unless there is a change in the scope of work, no additional staff charges will be billed. If this BAS is for construction costs of \$250,000 or greater, staff charges will be billed as actual and reconciled at the end of the project. If the project requires Facilities Management or ESS staff your department will be billed actual hours worked upon project completion.

BUDGET ACCOUNT NUMBER(S) (Specify distribution if more than one and order in which funds are to be used):

FUND: 3801 DEPT: 411 UNIT: B653 OBJ: 6505

IDENTIFY FUNDING SOURCE FOR EACH ACCOUNT: (check and provide detail for all that apply)

Ad Valorem (Amount \$ _____) Infrastructure Sales Tax (Amount \$ _____)
 State (source/type: _____ Amount \$ _____) Federal (source/type: _____ Amount \$ _____)
 Grant (source/type: _____ Amount \$ _____) Impact Fees: (Amount \$ _____)
 Other (source/type: 800 mhz Amount \$ 129,440.00)

Department: FD + O

BAS APPROVED BY: [Signature]

DATE 8/19/2024

ENCUMBRANCE NUMBER: _____

CONSULTANT SERVICES AUTHORIZATION #10

OMNICOM CONSULTING GROUP, INC.
(Continuing Public Safety Radio Systems Consultant)

WEST COUNTY COMMUNICATIONS TOWER SITE REPLACEMENT
PROJECT NO. 2024-015781
DISTRICT NO. 6

THIS CONSULTANT SERVICES AUTHORIZATION (CSA) NO. 10 to the Contract dated 12/17/19 (R2019-1897) (the "Contract") between Palm Beach County, a political subdivision of the State of Florida, by and through its Board of County Commissioners and the Consultant identified herein is for the consultant services described in Item 4 of this CSA.

1. CONSULTANT: OMNICOM CONSULTING GROUP, INC., whose Federal Tax ID# is 47-3435197.

2. History: Not applicable. This CSA is for a new project.

3. Services completed to date: Not applicable. This CSA is for a new project.

4. Description of Services to be provided by Consultant: Professional services shall include design phase services for the construction of a 400 foot self-supporting tower, equipment shelter, communications compound and emergency power systems for the West County Communications Tower Site Replacement project, as detailed on the attached proposal dated September 25, 2024. In the event of a conflict between the terms and conditions of the Contract and the terms and conditions of Consultant's proposal, the terms and conditions of the Contract shall control.

5. Compensation: The compensation to be paid to the Consultant for the requested services shall be: Lump Sum charge of **\$129,440.00**.

6. This CSA may be terminated, in whole or in part, by the County with or without cause in accordance with the Contract terms. In the event of termination not the fault of the Consultant, the Consultant shall be compensated for all services performed to termination date, together with reimbursable expenses (if applicable) then due in accordance with the Contract terms.

Consultant agrees to waive any and all claims for lost profits or anticipated future profits in the event of a termination with or without cause under this Contract.

7. If not previously provided or for a new project, the Consultant shall provide County with an executed Conflict of Interest Disclosure Form, attached hereto and incorporated herein.

8. All terms, conditions, and obligations of the original Contract, as amended, shall remain in full force and effect, unless specifically noted as follows:

E-VERIFY - EMPLOYMENT ELIGIBILITY

CONSULTANT warrants and represents that it is in compliance with section 448.095, Florida Statutes, as may be amended, and that it: (1) is registered with the E-Verify System (E-Verify.gov) uses the E-Verify System to electronically verify the employment eligibility of all newly hired workers; and (2) has verified that all of the CONSULTANT's subconsultants performing any duties and obligations under this Contract are registered with the E-Verify System and use the E-Verify System to electronically verify the employment eligibility of all newly hired workers.

CONSULTANT shall obtain from each of its subconsultants an affidavit stating that the subconsultant does not employ, contract with, or subcontract with an Unauthorized Alien, as that term is defined in section 448.095(1)(k), Florida Statutes, as may be amended. CONSULTANT shall maintain a copy of any such affidavit from a subconsultant for, at a minimum, the duration of the subcontract and any extension thereof. This provision shall not supersede any provision of this Contract which requires a longer retention period.

COUNTY shall terminate this Contract if it has a good faith belief that CONSULTANT has knowingly violated Section 448.09(1), Florida Statutes as may be amended.

If COUNTY has a good faith belief that CONSULTANT's subconsultant has knowingly violated Section 448.09(1), Florida Statutes, as may be amended, COUNTY shall notify CONSULTANT to terminate its contract with the subconsultant and CONSULTANT shall immediately terminate its contract with the subconsultant.

If COUNTY terminates this Contract pursuant to the above, CONSULTANT shall be barred from being awarded a future contract by COUNTY for a period of one (1) year from the date on which this Contract was terminated. In the event of such contract termination, CONSULTANT shall also be liable for any additional costs incurred by COUNTY as a result of the termination.

9. Time of Commencement: Consultant shall begin work immediately on the requested services upon receipt of this executed document which shall constitute official "Notice to Proceed".

10. EBO Program: No mandatory SBE subcontracting goal was applied by the Goal Setting Committee to this continuing contract due to the specialized nature of the services to be performed. The Consultant agreed to 15% SBE participation. SBE participation for this CSA is 0%. When added to the Consultant's participation to date, the resulting SBE participation is 0%.

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Project No. 2024-015781

Project Name: West County Communications Tower Site Replacement

IN WITNESS WHEREOF, this CSA is accepted, subject to the terms and conditions of the
aforementioned Contract.

ATTEST:
JOSEPH ABRUZZO, CLERK &
COMPTROLLER

PALM BEACH COUNTY,
A Political Subdivision of the State of Florida
BOARD OF COUNTY COMMISSIONERS

By _____
Deputy Clerk

By _____
Maria Sachs, Mayor

Date: _____

APPROVED AS TO
LEGAL SUFFICIENCY

APPROVED AS TO TERMS
AND CONDITIONS

By _____
Assistant County Attorney

By _____
Director - FD&O

WITNESS:

CONSULTANT: OMNICOM
CONSULTING GROUP, INC.

Signature

By _____
Signature

Chris Monzingo, P.E., PMP

Name (type or print)

Tim Barrentine, PMP

Name (type or print)

President

Title

(Corporate Seal)



Department of State / Division of Corporations / Search Records / Search by Entity Name /

Detail by Entity Name

Florida Profit Corporation
 OMNICOM CONSULTING GROUP, INC.

Filing Information

Document Number P15000024647
FEI/EIN Number 47-3435197
Date Filed 03/16/2015
Effective Date 03/13/2015
State FL
Status ACTIVE
Last Event AMENDMENT
Event Date Filed 04/27/2015
Event Effective Date NONE

Principal Address

7788 McClure Drive
 Tallahassee, FL 32312


Changed: 01/12/2024

Mailing Address

7788 McClure Drive
 Tallahassee, FL 32312

Changed: 01/12/2024


Registered Agent Name & Address

BARRENTINE, TIM 
 7788 McClure Drive
 Tallahassee, FL 32312

Address Changed: 01/12/2024

Officer/Director Detail

Name & Address

Title P 
 Barrentine, Tim
 7788 McClure Drive
 Tallahassee, FL 32312

Title VP

Monzingo, Chris
7788 McClure Drive
Tallahassee, FL 32312

Annual Reports

Report Year	Filed Date
2022	01/31/2022
2023	02/16/2023
2024	01/12/2024

Document Images

01/12/2024 -- ANNUAL REPORT	View image in PDF format
02/16/2023 -- ANNUAL REPORT	View image in PDF format
01/31/2022 -- ANNUAL REPORT	View image in PDF format
01/27/2021 -- ANNUAL REPORT	View image in PDF format
01/10/2020 -- ANNUAL REPORT	View image in PDF format
02/11/2019 -- ANNUAL REPORT	View image in PDF format
01/19/2018 -- ANNUAL REPORT	View image in PDF format
08/21/2017 -- Reg. Agent Change	View image in PDF format
01/17/2017 -- ANNUAL REPORT	View image in PDF format
03/08/2016 -- ANNUAL REPORT	View image in PDF format
04/27/2015 -- Amendment	View image in PDF format
03/16/2015 -- Domestic Profit	View image in PDF format

Subcontractor Proposals

OEBO SCHEDULE 1

SOLICITATION/PROJECT/BID NAME: West County Communications Tower Site Replacement SOLICITATION/PROJECT/BID NO.: N/A 2024-015781
 SOLICITATION OPENING/SUBMITTAL DATE: N/A COUNTY DEPARTMENT: FDO/ESS

Section A PLEASE LIST THE DOLLAR AMOUNT OR PERCENTAGE OF WORK TO BE COMPLETED BY THE PRIME CONTRACTOR/CONSULTANT* ON THE PROJECT:

NAME OF PRIME RESPONDENT/BIDDER: Omnicom Consulting Group, Inc. ADDRESS: 7788 McClure Drive Tallahassee, FL 32308
 CONTACT PERSON: Chris Monzingo PHONE NO.: 850-212-4475 E-MAIL: cmonzingo@ogc-usa.com

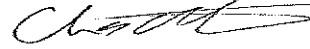
PRIME'S DOLLAR AMOUNT OR PERCENTAGE OF WORK: \$114,090.00
 *SMWBE Primes must include their percentage or dollar amount in the Total Participation line under section B. Non-SBE MBE WBE SBE

Section B PLEASE LIST THE DOLLAR AMOUNT OR PERCENTAGE OF WORK TO BE COMPLETED BY ALL SUBCONTRACTORS/SUBCONSULTANTS ON THE PROJECT BELOW:

Subcontractor/Sub consultant Name DIRECTION: List Firm Name, Address, & Provide PBC Vendor ID#. (https://www.pbcgov.org/pbcvendors)	(Check all Applicable Categories)				DOLLAR AMOUNT OR PERCENTAGE OF WORK					
	Non-SBE	MBE Minority Business	WBE Women Business	SBE Small Business	Black	Hispanic	Women	Caucasian	Asian	Other
1. TEP TEP OPCO, LLC	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				4,250		
2. WSP USA Environment & Infrastructure Inc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				6,600		
3. Terracon Consultants, Inc.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				4,500		
4.	<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"/>						

(Please use additional sheets if necessary) Total \$15,350.00

Total Bid/Offer Price \$ 129,440.00 Total Certified S/M/WBE Participation \$ \$0.00

I hereby certify that the above information is accurate to the best of my knowledge:  Vice President
 Name & Authorized Signature Title

- Note:
- The amount listed on this form for a Subcontractor/sub consultant must be supported by price or percentage listed on the properly executed Schedule 2 or attached signed proposal.
 - Only those firms certified by Palm Beach County at the time of solicitation opening or due date are eligible to meet the established OEBO Affirmative Procurement Initiative (API). Please check the applicable box and list the dollar amount or percentage under the appropriate demographic category.
 - Modification of this form is not permitted and will be rejected upon submittal.

Palm Beach County Schedule 2

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: 2024-015781 West County 800 MHz Tower

SOLICITATION/PROJECT NAME: West County Communications Tower Site Replacement

Prime Contractor: Omnicom Consulting Group, Inc. Subcontractor: TEP OPCO, LLC

(Check box(s) that apply)

SBE WBE MBE M/WBE Non-S/M/WBE Date of Palm Beach County Certification (if applicable): _____

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

Column 1	Column 2	Column 3
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> African-American/Black <input type="checkbox"/> Asian American <input type="checkbox"/> Caucasian American	<input type="checkbox"/> Supplier
	<input type="checkbox"/> Hispanic American <input type="checkbox"/> 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
1	Geotechnical Exploration and Report	\$4,250.00			\$4,250.00

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: _____

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.

N/A Price or Percentage: 0%

Name of 2nd/3rd tier Subcontractor/subconsultant _____

Omnicom Consulting Group, Inc.

Print Name of Prime

By: 
Authorized Signature

Chris Monzingo

Print Name

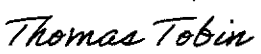
Vice President

Title

Date: 9/25/2024

TEP OPCO, LLC

Print Name of Subcontractor/subconsultant

By: 
Authorized Signature

Thomas Tobin

Print Name

Division Manager

Title

Date: 9/25/2024

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: 2024-015781
 SOLICITATION/PROJECT NAME: West County Communications Tower Site Replacement

Prime Contractor: Omnicom Consulting Group, Inc. Subcontractor: WSP USA Environment & Infrastructure Inc.

(Check box(s) that apply)

SBE WBE MBE M/WBE Non-S/M/WBE Date of Palm Beach County Certification (if applicable): _____

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

Column 1	Column 2	Column 3
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> African-American/Black <input type="checkbox"/> Asian American <input type="checkbox"/> Caucasian American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Native American	<input type="checkbox"/> Supplier

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
1	Construction Drawings / Construction Staking				\$6,600.00

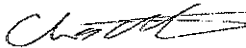
The undersigned Subcontractor/subconsultant is prepared to self-perform the above-described work in conjunction with the aforementioned project at the following total price or percentage: \$6,600.00

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.

N/A Price or Percentage: 0%
 Name of 2nd/3rd tier Subcontractor/subconsultant

Omnicom Consulting Group, Inc.

Print Name of Prime

By: 
 Authorized Signature

Chris Monzingo

Print Name

Vice President

Title

Date: 6/24/2024

WSP USA Environment & Infrastructure Inc.

Print Name of Subcontractor/subconsultant

By: 
 Authorized Signature

Clintonia . Sanders

Print Name

Project Manager

Title

Date: 6/24/24

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: 2024-015781
 SOLICITATION/PROJECT NAME: West County Communications Tower Site Replacement

Prime Contractor: Omnicom Consulting Group, Inc. Subcontractor: Terracon Consultants, Inc.

(Check box(es) that apply)

SBE WBE MBE M/WBE Non-S/M/WBE Date of Palm Beach County Certification (if applicable): _____

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

Column 1	Column 2	Column 3
<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> African-American/Black <input type="checkbox"/> Asian American <input type="checkbox"/> Hispanic American <input type="checkbox"/> Native American	<input type="checkbox"/> Caucasian American <input type="checkbox"/> Supplier

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
1	FCC NEPA Checklist / FCC 106	\$4,500			\$4,500

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: \$4,500

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.

N/A Price or Percentage: 0%
 Name of 2nd/3rd tier Subcontractor/subconsultant

Omnicom Consulting Group, Inc.
 Print Name of Prime
 By: _____
 Authorized Signature
Chris Monzingo
 Print Name
Vice President
 Title
 Date: 7/1/2024

Terracon Consultants, Inc.
 Print Name of Subcontractor/subconsultant
 By: _____
 Authorized Signature
Brett Anderson
 Print Name
Group Manager
 Title
 Date: 7/1/2024

CONFLICT OF INTEREST DISCLOSURE FORM

PROJECT Public Safety Radio System Planning and Design Services on a Continuing Contract Basis

CONSULTANT represents that it presently has no interest, either direct or indirect, which would or could conflict in any manner with the performance of services for the County, except as follows:

N/A

(Attach additional sheets as needed.)

CONSULTANT further represents that no person having any interest shall be employed for said performance. By signing below, CONSULTANT certifies that the information contained herein is true and correct and constitutes all current potential conflicts of interest which may influence or appear to influence CONSULTANT'S judgment or quality of services being provided to the County.

CONSULTANT shall promptly notify the COUNTY in writing by certified mail of all potential conflicts of interest that may arise in the future through any prospective business association, interest or other circumstance which may influence or appear to influence CONSULTANT'S judgment or quality of services being provided to the County. Such written notification shall identify the prospective business association, interest or circumstance, the nature of work that CONSULTANT may undertake and request an opinion of the COUNTY as to whether the association, interest or circumstance would, in the opinion of the COUNTY, constitute an unacceptable conflict of interest if entered into by the CONSULTANT.

If, in the sole opinion of the COUNTY, the prospective business association, interest or circumstance of CONSULTANT would constitute an unacceptable conflict of interest to the COUNTY, the COUNTY shall so state in the notification and the CONSULTANT shall not enter into said association, interest or circumstance.

THIS DISCLOSURE is submitted by Tim Barrentine, as
(Name of Individual)

President, of Omnicom Consulting Group, Inc.
(Title/Position) (Firm Name of Consultant)

who hereby certifies that the information stated above is true and correct. Further, it is hereby acknowledged that any misrepresentation by the Consultant on this Disclosure is considered an unethical business practice and is grounds for sanctions against future County business with the Consultant.

Tim Barrentine
(Signature)

10/28/19
(Date)

CONFLICT OF INTEREST DISCLOSURE FORM

(Must be completed by Proposer and any subconsultants and returned with proposal)

PALM BEACH COUNTY CONFLICT OF INTEREST DISCLOSURE FORM

CONSULTANT/SUBCONSULTANT represents that it presently has no interest, either direct or indirect, which would or could conflict in any manner with the performance of services for the County, except as follows:

N/A

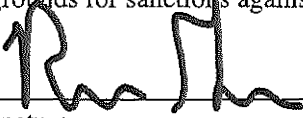
(Attach additional sheets as needed.)

CONSULTANT/SUBCONSULTANT further represents that no person having any interest shall be employed for said performance. By signing below, CONSULTANT/SUBCONSULTANT certifies that the information contained herein is true and correct and constitutes all current potential conflicts of interest which may influence or appear to influence CONSULTANT/SUBCONSULTANT’S judgment or quality of services being provided to the County.

CONSULTANT/SUBCONSULTANT shall promptly notify the COUNTY in writing by certified mail of all potential conflicts of interest that may arise in the future through any prospective business association, interest or other circumstance which may influence or appear to influence CONSULTANT/SUBCONSULTANT’S judgment or quality of services being provided to the County. Such written notification shall identify the prospective business association, interest or circumstance, the nature of work that CONSULTANT/SUBCONSULTANT may undertake and request an opinion of the COUNTY as to whether the association, interest or circumstance would, in the opinion of the COUNTY, constitute an unacceptable conflict of interest if entered into by the CONSULTANT/SUBCONSULTANT.

If, in the sole opinion of the COUNTY, the prospective business association, interest or circumstance of CONSULTANT/SUBCONSULTANT would constitute an unacceptable conflict of interest to the COUNTY, the COUNTY shall so state in the notification and the CONSULTANT/SUBCONSULTANT shall not enter into said association, interest or circumstance.

This DISCLOSURE is submitted by (Name of Individual:) Ronald E. Glover, PE, SE, as (Title/Position:) Director of (Name of Firm:) Tep Opco (dba Tower Engineering Professionals, Inc) who hereby certifies that any misrepresentation by the CONSULTANT/SUBCONSULTANT on this Disclosure is considered an unethical business practice and is grounds for sanctions against future County business with the CONSULTANT/SUBCONSULTANT.



Signature

08/21/2024

Date

CONFLICT OF INTEREST DISCLOSURE FORM
(Must be completed by Proposer and any subconsultants and returned with proposal)

PALM BEACH COUNTY CONFLICT OF INTEREST DISCLOSURE FORM

CONSULTANT/SUBCONSULTANT represents that it presently has no interest, either direct or indirect, which would or could conflict in any manner with the performance of services for the County, except as follows:

(Attach additional sheets as needed.)

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This DISCLOSURE is submitted by (Name of Individual:) Clintonia F. Sanders, as (Title/Position:) Project Manager of (Name of Firm:) WSP USA Environment & Infrastructure Inc. who hereby certifies that any misrepresentation by the CONSULTANT/SUBCONSULTANT on this Disclosure is considered an unethical business practice and is grounds for sanctions against future County business with the CONSULTANT/SUBCONSULTANT.



Signature

8/26/24
Date

CONFLICT OF INTEREST DISCLOSURE FORM
(Must be completed by Proposer and any subconsultants and returned with proposal)

PALM BEACH COUNTY CONFLICT OF INTEREST DISCLOSURE FORM

CONSULTANT/SUBCONSULTANT represents that it presently has no interest, either direct or indirect, which would or could conflict in any manner with the performance of services for the County, except as follows:

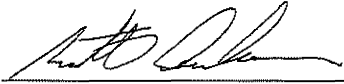
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If, in the sole opinion of the COUNTY, the prospective business association, interest or circumstance of CONSULTANT/SUBCONSULTANT would constitute an unacceptable conflict of interest to the COUNTY, the COUNTY shall so state in the notification and the CONSULTANT/SUBCONSULTANT shall not enter into said association, interest or circumstance.

This DISCLOSURE is submitted by (Name of Individual:) Brett Anderson, as (Title/Position:) Group Manager of (Name of Firm:) Terracon Consultants, Inc. who hereby certifies that any misrepresentation by the CONSULTANT/SUBCONSULTANT on this Disclosure is considered an unethical business practice and is grounds for sanctions against future County business with the CONSULTANT/SUBCONSULTANT.



Signature

August 21, 2024

Date



**Palm Beach County
Compliance Summary Report**

Vendor Number	Vendor Name	AM Best Rating	Insurance Carrier	Policy #	Eff. Date	Exp. Date	Coverage	Contract Number	Contract Name
DX00001085	Omnicom Consulting Group, Inc.		Compliant						
		A++g , XV	Travelers Casualty Insurance Company of America	6606w267103tl124	4/7/2024	4/7/2025	General Liability		
		NR , 0	Underwriters at Lloyd's London (IL)	0002012041024	4/7/2024	4/7/2025	Professional Liability		
		A++g , XV	Travelers Casualty Insurance Company of America	UB9J8404072447G	4/7/2024	4/7/2025	Workers Comp		

Risk Profile : Standard - Professional Services
Required Additional Insured : Palm Beach County Board of County Commissioners
Ownership Entity :

NONGOVERNMENTAL ENTITY HUMAN TRAFFICKING AFFIDAVIT
Section 787.06(13), Florida Statutes

THIS AFFIDAVIT MUST BE SIGNED AND NOTARIZED

I, the undersigned, am an officer or representative of Omnicom Consulting Group, Inc.
(ENTITY) and attest that the ENTITY does not use coercion for labor or services as defined in
section 787.06, Florida Statutes.

**Under penalty of perjury, I hereby declare and affirm that the above stated facts are true
and correct.**

Jim Barrentine
(signature of officer or representative)

Tim Barrentine, President
(printed name and title of officer or representative)

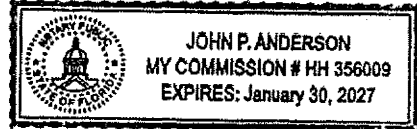
State of Florida, County of Palm Beach

Sworn to and subscribed before me by means of physical presence or online notarization
this, 1st day of October, by Timothy Barrentine

Personally known OR produced identification .

Type of identification produced Driver License.

[Signature]
NOTARY PUBLIC
My Commission Expires: January 30, 2027
State of Florida at large



(Notary Seal)

