Agenda Item #: 3H-8

PALM BEACH COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM SUMMARY

Meeting Date: February 4, 2025	[X] Consent [] Workshop	[] Regular [] Public Hearing
Department: Facilities Development & Operation	ons	

I. EXECUTIVE BRIEF

Motion and Title: Staff recommends motion to approve:

- A. Amendment No. 1 to the contract for program management services (R2023-0143) (Contract) with AECOM Technical Services, Inc. (AECOM) to increase the raw labor rates by (3%), as allowed per the Contract; and
- **B.** Consultant Services Authorization (CSA) No. 2 to the Contract with AECOM for a not to exceed amount of \$176,310.80 for the retroactive period starting from January 1, 2025 to February 6, 2025 and a not to exceed amount of \$1,693,037 for the period starting from February 7, 2025 to February 6, 2026.

Summary: On February 7, 2023, the Board of County Commissioners (BCC) approved the Contract with AECOM to provide project management services necessary to assist the Palm Beach County (County) Facilities Development and Operations Department (FDO)/Capital improvements Division (CID), in administering and managing an expanded General Government Capital Program (GGCP). Other County construction departments may use this contract for program management services. This item will amend the Contract to include a 3% increase for raw labor rates, as allowed per the Contract, modify terms and conditions of the Contract and also authorize the project management services necessary for calendar year January 1, 2025 to February 6, 2026. Amendment No. 1 to the Contract (Amendment No. 1) sets new hourly rates (labor rates) for AECOM's personnel and subconsultants that will perform services during the term of the contract, beginning February 7, 2025. The contract allows the raw labor rates to be adjusted for the Consumer Price Index (CPI) up to 3% after the first two (2) years. Amendment No. 1 also deletes Section 6.4 of the Contract in its entirety and replaces it with a new Section 6.4 relating to Progress Payments and adds standard County provisions relating to Interactions with County Staff, Disclosure of Foreign Gifts and Contracts with Foreign Countries of Concern and Human Trafficking. CSA No. 2 to the Contract (CSA No. 2) authorizes a not to exceed amount of \$176,310.80 for the retroactive period starting from January 1, 2025 to February 6, 2025 and a not to exceed amount of \$1,693,037 for the period starting from February 7, 2025 to February 6, 2026. Staffing positions requested under CSA No. 2 include two (2) senior project managers, two (2) project managers (category 1), one (1) project manager (category 2), one (1) fiscal specialist, one (1) procurement/contract specialist, one (1) cost estimator and one (1) field representative (category 1). Compensation will depend on actual hours worked. There is no minimum amount of services or compensation guaranteed to AECOM's personnel. The Contract is set to expire on February 6, 2028. (Continued on Page 3)

Background & Justification: (Continued on Page 3)

Attachments:

- 1. Amendment No. 1
- 2. Budget Availability Statement with Breakdown by Fiscal Year Exhibits A-1 and A-2
- 3. CSA No. 2 with Exhibits A-1 and A-2
- 4. CSA History
- 5. Conflict of Interest Forms
- 6. Nongovernmental Entity Human Trafficking Affidavit
- 7. Certificate of Insurance

Recommended by:	Some C. agal lottos	1/28/25
	Department Director	Date
Approved by:	tall win	1/30/25
	County Administrator	Date

II. FISCAL IMPACT ANALYSIS

A.	Five Y	ear Summary o	f Fiscal Impact:				
Fisca	al Years		2025	2026	2027	2028	2029
Capi	ital Expe	enditures	<u>\$1,268,876</u>	\$600,473			
Exte Prog			·				***************************************
# AI	DITIO	L IMPACT NAL FTE (Cumulative)	<u>\$1,268,876</u>	\$600,473 ———	-0-	-0-	_0-
Is th	is item u	ded in Current Ising Federal Fu Ising State Fund	ınds?		Yes <u>X</u> Yes Yes	No NoX NoX	
Budg	get Acco <u>Fund</u>	unt No.: <u>Various</u>	Dept Various	<u>Unit</u>	Various	Object Var	<u>ious</u>
В.	Recom	mended Source	es of Funds/Sumn	nary of Fis	cal Impact:		
C.	Depart	tmental Fiscal F					
			III. <u>REVI</u>	EW COM	MENTS		
A.	OFMB	Fiscal and/or Court	Contract Develop 1/29/2025 H-1/28 w 1-29.25	1/2	UNICE I	MacMont and Control	1
В.	<u>(</u>	Sufficiency: nt County Attorn	1/29/25				
C.	Other 1	Department Re	view:				
	 Departs	ment Director	***************************************				

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

Page 3

Summary: This Contract was solicited pursuant to the requirements of the Equal Business Opportunity (EBO) Ordinance. The Affirmative Procurement Initiatives established for this contract on June 15, 2022 by the Goal Setting Committee are a 20% Small Business Enterprise (SBE) participation and a Minority/Women Business Enterprise (M/WBE) evaluation preference for African American and Women owned firms. AECOM committed to an SBE participation of 35%. SBE participation on this CSA is 25.59%. To date, the overall SBE participation on the contract is 31.63%. AECOM is a local business. Funding for this Contract is from various funds. (Capital Improvements Division) Countywide (MWJ)

Background & Justification: AECOM was selected on September 30, 2022 through a competitive proposal process, in accordance with the policies, procedures and ordinances of the County. FDO/CID has experienced an increase in the number of projects requiring project management support. This increased workload necessitates additional experienced staff for program management services. The County is now contracting with AECOM to supplement existing County staff to provide program management services.

\mathbf{AT}'	TACHMENT #1	

Project No. 2022-036869

AMENDMENT No. 1 TO THE CONTRACT FOR PROGRAM MANAGEMENT SERVICES

This is Amendment No. 1 dated February 4, 2025 to the Program Management Contract (R2023-0143) dated February 7, 2023 (the "Contract") 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 AECOM Technical Services, Inc., a Foreign Profit Corporation authorized to do business in the State of Florida, whose Federal Tax ID# is 95-2661922, hereinafter referred to as the PROGRAM MANAGER.

WITNESSETH

WHEREAS, the parties have entered into the Contract under which the PROGRAM MANAGER provides certain program management services to the COUNTY for various projects; and

WHEREAS, the parties hereto desire to amend the Contract to update certain contract terms.

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. Labor Rates. In accordance with Section 6.1, the Labor Rates (raw hourly rates) set forth in Exhibit C to the Contract have been updated and are replaced by the schedule of hourly labor rates by labor category as set forth in Exhibit A, which is attached hereto and incorporated.
- 2. Section 6.4. Section 6.4 of the Contract is deleted in its entirety and replaced with the following:

6.4 PROGRESS PAYMENTS

The PROGRAM MANAGER will bill the COUNTY monthly for services rendered. Failure by the Program Manager to timely submit invoices for services rendered will constitute a breach of the Standard of Care duty required pursuant to Sec. 8.1, herein.

3. Contract Modifications. The Contract is modified to add new sections as follows:

8.34 <u>INTERACTIONS WITH COUNTY STAFF</u>

In all interactions with County staff, PROGRAM MANAGER and its employees will conduct themselves in a professional manner at all times and treat County staff with respect and dignity. Use of offensive and demeaning language will not be tolerated. Failure to comply with this requirement will be considered a default under this Contract and may result in termination of this Contract.

Project No. 2022-036869

8.35 <u>DISCLOSURE OF FOREIGN GIFTS AND CONTRACTS WITH FOREIGN COUNTRIES OF CONCERN</u>

Pursuant to F.S. 286.101, as may be amended, by entering into a contract or performing any work in furtherance thereof, the PROGRAM MANAGER certifies that it has disclosed any current or prior interest of, any contract with, or any grant or gift received from a foreign country of concern where such interest, contract, or grant or gift has a value of \$50,000 or more and such interest existed at any time or such contract or grant or gift was received or in force at any time during the previous five (5) years.

8.36 <u>HUMAN TRAFFICKING AFFIDAVIT</u>

PROGRAM MANAGER warrants and represents that it does not use coercion for labor or services as defined in section 787.06, Florida Statutes, and has executed the Nongovernmental Entity Human Trafficking Affidavit.

- **4. Scrutinized Companies.** PROGRAM MANAGER certifies that it is still in compliance with the requirements pertaining to scrutinized companies under Florida Statutes Section 287.135.
- **5.** Confirmation. Except as specifically modified above, the terms and conditions of the Contract are hereby confirmed and remain in full force and effect.

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Project No. 2022-036869

IN WITNESS WHEREOF, the Board of County Commissioners of Palm Beach County, Florida has made and executed this Amendment on behalf of the COUNTY; and an authorized official of the PROGRAM MANAGER has made and executed this Amendment on behalf of the PROGRAM MANAGER.

ATTEST:

PALM BEACH COUNTY, a political subdivision of the State of Florida, BOARD OF COUNTY COMMISSIONERS

By:

Deputy Clerk

By:

Maria G. Marino, Mayor

APPROVED AS TO LEGAL SUFFICIENCY

APPROVED AS TO TERMS AND CONDITIONS

Isamí C. Ayala-Collazo, Director - FIDO

By: Assistant County Attorney

Project Name: Program Management Services - GGCP Project No. 2022-036869

WITNESS:

PROGRAM MANAGER: AECOM

Technical Services, Inc.

Project No. 2022-036869

EXHIBIT A LABOR RATES Beginning February 7, 2025

TITLE	MAXIMUM HOURLY RATE - Raw (\$/HR)	X	MULTIPLIER	=	MAXIMUM BILLING RATE (\$/HR)
Senior Project Manager	\$112.91	Х	1.8	=	\$203.23
Project Manager 1	\$68.36	Х	1.8	=	\$123.04
Project Manager 2	\$73.91	X	1.8	=	\$133.04
Field Representative 1	\$59.79	X	1.8	=	\$107.62
Fiscal Specialist	\$63.65	X	1.8		\$114.57
Procurement / Contract Specialist	\$35.01	X	2.0	=	\$70.01
Cost Estimator	\$76.38	Х	2.0	_	\$152.76

Notes:

Rates for Senior Project Manager and Project Manager shall be "field rates". The Program Manager's on-site personnel will be located in County offices at no charge and will be provided with the normal office amenities including supplies, office equipment, etc. Computer, cell phone, vehicle shall be included in billing rate. Raw labor rates listed are the maximum allowed but rate billed to County will be the actual payroll rate for each employee. Principal/Project Executive time shall not exceed 10% of total billable hours per month.

Project No. 2022-036869

Labor rates of Program Manager and any subconsultants shall not exceed the actual hourly raw labor rates for services rendered by personnel, multiplied by an overall overhead and profit factor (maximum of three). The labor rates and overhead and profit factors are subject to audit, upon request. Actual hours will be billed.

The hourly raw labor rates listed above shall remain in effect for at least one year from February 7, 2025. At the end of each one year period thereafter, if the cost of living index supports an increase, an increase of up to three percent (3%) may be allowed to the raw labor rates for each one year term thereafter. The overhead and profit factor (multiplier) will not be increased during the five-year term of the contract.

BUDGET AVAILABILITY STATEMENT

REQUEST DATE: 1/17/2025	REQUESTED	BY: David Hawke	PHONE: 561-233-0707
PROJECT TITLE: Program Mana			
(San	ne as CIP or IST, if ap	pplicable)	ICT DI ANDIDIC NO
ORIGINAL CONTRACT AMOU	INT: \$ n/a		IST PLANNING NO.:
REQUESTED AMOUNT: \$ 1,86	9,347.80		BCC RESOLUTION#: R2023-0143
CSA or CHANGE ORDER NUM	DER : 2		DATE: 2/7/2023
LOCATION: Various			
BUILDING NUMBER: Various			
DESCRIPTION OF WORK/SER	VICE LOCATION: V	/aries	
PROJECT/ W.O. NUMBER: 202	2-036869		
CONSULTANT/CONTRACTOR	:: AECOM Technica	l Services, Inc.	
PROVIDE A BRIEF STATE CONSULTANT/CONTRACTOR		SCOPE OF SERVI	CES TO BE PROVIDED BY THE
Project management services necessary to assist the Paln	n Beach County Facilities Developmen	nt and Operations Department, in admir	nistering and managing an expanded General Government Capital Program (Gr
CONSTRUCTION PROFESSIONAL SERV STAFF COSTS* EQUIP. / SUPPLIES CONTINGENCY TOTAL	\$ ICES \$ 1,869,347.80 \$ \$ \$		
by FD&O. Unless there is a change	in the scope of work, no arges will be billed as a	o additional staff charges actual and reconciled at	count will be charged upon receipt of this BAS is will be billed. If this BAS is for construction the end of the project. If the project requires ed upon project completion.
BUDGET ACCOUNT NUMBER	R(S) (Specify distribu	tion if more than one	and order in which funds are to be used):
FUND: Various	EPT: Various	UNIT: Various	OBJ: Various
State (source/type:) Amount \$)	☐ Infrastructure Sale ☐ Federal (source/ty	
Department:	De fle		
			

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Exhibit A-1 - Estimated Maximum Charges from January 1, 2025 to February 6, 2025

Multiplier	Title	Maxin Billing		Hours from Jan. 1st-Feb. 6th, 2025	Sul	Total
1.8	Senior Project Manager	\$	197.32	20	\$	3,946.40
1.8	Senior Project Manager	\$	197.32	216	\$	42,621.12
1.8	Project Manager I	\$	119.47	216	\$	25,805.52
1.8	Project Manager 1	\$	119.47	216	\$	25,805,52
1.8	Project Manager 2	\$	129.16	216	\$	27,898.56
1.8	Fiscal Specialist	\$	111.24	50	\$	5,562.00
2	Procurement / Contract Specialist	\$	67.98	216	\$	14,683.68
2	Cost Estimator	\$	148.32	50	\$	7,416.00
1.8	Field Representative 1	\$	104.50	216	\$	22,572.00

Total Estimated Maximum from Jan. 1st - Feb. 6th, 2025

\$ 176,310.80

Exhibit A-1- Estimated Maximum Charges from February 7, 2025 to September 30, 2025

Multiplier	Title	Billing Rate		Hours from Feb 7th -Sep 30th, 2025	Sub Total		
1.8	8 Senior Project Manager	\$	203.23	0	\$	-	
¥.	8 Senior Project Manager	\$	203.23	1343	\$	272,937.89	
1.	8 Project Manager 1	\$	123,04	1343	\$	165,242,72	
1,	8 Project Manager 1	\$	123,04	1343	\$	165,242,72	
1,	8 Project Manager 2	\$	133,04	1343	\$	178,672.72	
1,	8 Fiscal Specialist	\$	114.57	269	\$	30,819.33	
	2 Procurement / Contract Specialist	\$	70.01	1343	\$	94,023.43	
	2 Cost Estimator	\$	152.76	269	\$	41,092.44	
1.	8 Field Representative 1	\$	107.62	1343	\$	144,533.66	

Total Estimated Maximum from Feb 7-Sep 30th, 2025 \$ 1,092,564.91

Exhibit A-1 Total (January 1st, 2025 - Sep 30th, 2025)

\$ 3,946.40

\$ 315,559.01

\$ 191,048.24

\$ 191,048.24

\$ 206,571.28

\$ 36,381.33

\$ 108,707.11

\$ 48,508.44

\$ 167,105.66

1,268,875.71

Notes:

Rates of Senior Project Manager and Project Manager shall be "field rates". The Program Manager's onsite personnel will be located in County offices at no charge and will be provided with the normal office
amenities including supplies, office equipment, etc. Computer, cell phone, vehicle shall be included in
billing rate. Raw labor rates listed are the maximum allowed but rate billed to County will be actual
payroll rate for each employee. Principal/ Project Executive time shall not exceed 10% of total billable
lours per month. Labor rates of Program Manager and any subconsultants shall not exceed the actual
hourly raw labor rates for services rendered by personnel, multiplied by an overall overhead and profit
factor (maximum of three). The labor rates and overhead and profit factors are subject to audit, upon
request. Actual hours will be billed. The hourly raw labor rates listed above shall remain in effect for a
period of two years from the date of Contract execution. At the end of each one year period thereafter, if
the cost of living index supports and increase, an increase of up to three percent (3%) may be allowed to
the raw labor rates for each one year term thereafter. The overhead and profit factor (multiplier) will not be
increased during the five-year term contract.

Elec alas

2,564.91 \$

Breakdown by Fiscal Year 2026- October 1, 2025 - February 6, 2026

Exhibit A-2 - Estimated Maximum Charges from October 1, 2025 to February 6, 2026

Multiplier	Title	Maximum Billing Rate		Hours from Oct 1, 2025 - Feb. 6, 2026	Tot	al
1.8	Senior Project Manager	\$	203.23		\$	•
1.8	Senior Project Manager	\$	203.23	737	\$	149,780.51
1.8	Project Manager 1	\$	123.04	737	\$	90,680.48
1.8	Project Manager 1	\$	123.04	737	\$	90,680.48
1.8	Project Manager 2	\$	133.04	737	\$	98,050.48
1.8	Fiscal Specialist	\$	114.57	151	\$	17,300.07
2	Procurement / Contract Specialist	\$	70.01	737	\$	51,597.37
2	Cost Estimator	\$	152.76	151	\$	23,066.76
1.8	Field Representative 1	\$	107.62	737	\$	79,315.94

Grand Total Exhibit A-1 and Exhibit A- 2					
\$	3,946.40				
\$	465,339.52				
\$	281,728.72				
\$	281,728.72				
\$	304,621.76				
\$	53,681.40				
\$	160,304.48				
\$	71,575.20				
\$	246,421.60				

Total Estimated Maximum from Oct 1, 2025 - Feb 6, 2026

\$ 600,472.09

\$ 1,869,347.80

Notes:

Rates of Senior Project Manager and Project Manager shall be "field rates". The Program Manager's onsite personnel will be located in County offices at no charge and will be provided with the normal office
amenities including supplies, office equipment, etc. Computer, cell phone, vehicle shall be included in
billing rate. Raw labor rates listed are the maximum allowed but rate billed to County will be actual
payroll rate for each employee. Principal/ Project Executive time shall not exceed 10% of total billable
hours per month. Labor rates of Program Manager and any subconsultants shall not exceed the actual
hourly raw labor rates for services rendered by personnel, multiplied by an overall overhead and profit
factor (maximum of three). The labor rates and overhead and profit factors are subject to audit, upon
request. Actual hours will be billed. The hourly raw labor rates listed above shall remain in effect for at
least one year from February 7, 2025. At the end of each one year period thereafter, if the cost of living
index supports and increase, an increase of up to three percent (3%) may be allowed to the raw labor
rates for each one year term thereafter. The overhead and profit factor (multiplier) will not be increased
during the five-year term contract.

ATTACHMENT #3

CONSULTANT SERVICES AUTHORIZATION NO.2

AECOM TECHNICAL SERVICES, INC.

PROJECT MANAGEMENT SERVICES - GGCP PROJECT NO. 2022-036869 COUNTYWIDE

THIS CONSULTANT SERVICES AUTHORIZATION (CSA) NO.2 to the Contract dated 02/07/2023 (R-2023-0143) (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: AECOM Technical Services, Inc., whose Federal Tax ID# is 95-2661922.

2. History: CSA# Not to Exceed Amount Approval Date Approved By
1 \$3,355,539.92 February 7, 2023 BCC (R2023-0144)

- 3. Services completed to date: CSA No.1 completed project management services for the period February 8, 2023 to December 31, 2023 and the period January 1, 2024 to December 31, 2024.
- **4. Description of Services to be provided by Consultant:** Project management services and provision of staff necessary, retroactively, for the period January 1, 2025 to February 6, 2025 and project management services and provision of staff necessary for the period February 7, 2025 to February 6, 2026 as detailed on the attached Exhibit A-1 and Exhibit A-2. In the event of a conflict between the terms and conditions of the Contract and the terms and conditions of Exhibit A-1 or Exhibit A-2, 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: a Not-To-Exceed amount of \$176,310.80 for the period January 1, 2025 to February 6, 2025 and a Not-To-Exceed amount of \$1,693,037.00 for the period February 7, 2025 to February 6, 2026.
- 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:

No changes.

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:

The API established for this contract is a mandatory minimum of 20% SBE participation. The Consultant in its contract committed to SBE participation of 35%. SBE participation for this CSA is 25.59%. When added to the Consultant's participation to date, the resulting SBE participation is 31.63%.

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Project No.: Project Management Services - GGCP Project Name: 2022-036869

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, FLORIDA, Political Subdivision of the State of Florida BOARD OF COUNTY COMMISSIONERS

Ву:	By:
Deputy Clerk	Maria G. Marino, Mayor
APPROVED AS TO LEGAL SUFFICIENCY:	APPROVED AS TO TERMS AND CONDITIONS:
By: County Attorney	By: Some C. Capal Collago, Director - FD&O
WITNESS FOR CONSTRUCTION MANAGER SIGNATURE:	CONSTRUCTION MANAGER: AECOM Technical Services, Inc.
Valence Petty Signature	Signature
Valerie Petty	PEDRO L. CAPESTANY
Name (type or print)	Name (type or print)
	VICE PRESIDENT

Form restricted 12/28/23 Non-Federal (EBO Program) - CSA/Supplement

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Exhibit A-1 - Estimated Maximum Charges from January 1, 2025 to February 6, 2025

Multiplier	Title	Billing Rate		Hours from Jan. 1st-Feb. 6th, 2025	Total		
1.	8 Senior Project Manager	\$	197.32	20	\$	3,946.40	
1.	8 Senior Project Manager	\$	197.32	216	\$	42,621.12	
1.	8 Project Manager 1	\$	119.47	216	\$	25,805.52	
1.	8 Project Manager 1	\$	119.47	216		25,805.52	
1.	8 Project Manager 2	\$	129.16	216	\$	27,898.56	
1.	8 Fiscal Specialist	\$	111.24	50	\$	5,562.00	
	Procurement / Contract Specialist	\$	67.98	216		14,683.68	
	2 Cost Estimator	\$	148.32	50	\$	7,416.00	
1.	8 Field Representative 1	\$	104.50	216	\$	22,572.00	

Total Estimated Maximum from Jan. 1st - Feb. 6th, 2025

176,310.80

Notes:

Rates of Senior Project Manager and Project Manager shall be "field rates". The Program Manager's onsite personnel will be located in County offices at no charge and will be provided with the normal office amenities including supplies, office equipment, etc. Computer, cell phone, vehicle shall be included in billing rate. Raw labor rates listed are the maximum allowed but rate billed to County will be actual payroll rate for each employee. Principal/ Project Executive time shall not exceed 10% of total billable hours per month. Labor rates of Program Manager and any subconsultants shall not exceed the actual hourly raw labor rates for services rendered by personnel, multiplied by an overall overhead and profit factor (maximum of three). The labor rates and overhead and profit factors are subject to audit, upon request. Actual hours will be billed. The hourly raw labor rates listed above shall remain in effect for a period of two years from the date of Contract execution. At the end of each one year period thereafter, if the cost of living index supports and increase, an increase of up to three percent (3%) may be allowed to the raw labor rates for each one year term thereafter. The overhead and profit factor (multiplier) will not be increased during the five-year term contract.

Exhibit A-2 - Estimated Maximum Charges from February 7, 2025 to February 6, 2026

Multiplier	Title	Maximum Billing Rate		Hours from Feb. 7th, 2025 - Feb. 6th, 2026	Tot	al
1.8	Senior Project Manager	\$	203.23	:	\$	-
1.8	Senior Project Manager	\$	203.23	2080	\$	422,718.40
1.8	Project Manager 1	\$	123.04	2080	\$	255,923.20
1.8	Project Manager 1	\$	123.04	2080	\$	255,923.20
1.8	Project Manager 2	\$	133.04	2080	\$	276,723.20
1.8	Fiscal Specialist	\$	114.57	420	\$	48,119.40
2	Procurement / Contract Specialist	\$	70.01	2080	\$	145,620.80
2	Cost Estimator	\$	152.76	420	\$	64,159.20
1.8	Field Representative 1	\$	107.62	2080	\$	223,849.60

Total Estimated Maximum from Feb. 7th, 2025 - Feb. 6th, 2026

\$ 1,693,037.00

Notes:

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Rates of Senior Project Manager and Project Manager shall be "field rates". The Program Manager's onsite personnel will be located in County offices at no charge and will be provided with the normal office amenities including supplies, office equipment, etc. Computer, cell phone, vehicle shall be included in billing rate. Raw labor rates listed are the maximum allowed but rate billed to County will be actual payroll rate for each employee. Principal/ Project Executive time shall not exceed 10% of total billable hours per month. Labor rates of Program Manager and any subconsultants shall not exceed the actual hourly raw labor rates for services rendered by personnel, multiplied by an overall overhead and profit factor (maximum of three). The labor rates and overhead and profit factors are subject to audit, upon request. Actual hours will be billed. The hourly raw labor rates listed above shall remain in effect for at least one year from February 7, 2025. At the end of each one year period thereafter, if the cost of living index supports and increase, an increase of up to three percent (3%) may be allowed to the raw labor rates for each one year term thereafter. The overhead and profit factor (multiplier) will not be increased during the five-year term contract.

OEBO SCHEDULE 1

SOLICITATION/PROJECT/BID NAME: Program Mar	nagement Ser	vices Contrac	:t -	SOLICITATION,	/PROJECT/BID	NO.: <u>#2022</u>	<u>:</u> -036869	······································	
1/1/2025 SOLICITATION OPENING/SUBMITTAL DATE:	5-2/6/2026			COUNTY DEPA	Faci	lities Development &	& Operations Departn	nent /Capital Imp	rovement
Section A PLEASE LIST THE DOLLAR AMOUNTAINE OF PRIME RESPONDENT/BIDDER: AECOM Te			TO BE CON				NSULTANT* ON s Blvd, Suite 600,		
CONTACT PERSON: Pedro L Capestany, PE,			_ PHONE	NO.: 703-6	26-5470	E-MAIL	. pedro.cap	estany@a	aecom.con
PRIME'S DOLLAR AMOUNT OR PERCENTAGE OF WOR SMWBE Primes must include their percentage or dollar am	74.41% RK:	Participation line u	nder section	_ Non-SB	E MBE	WBE SB	·E		
Section B PLEASE LIST THE DOLLAR AMOR				[
Subcontractor/Sub consultant Name	•	pplicable Categori 18E WBE	es) SBE		DOLLAR AN	MOUNT OR I	PERCENTAGE	E OF WORI	<u>K</u>
DIRECTION: List Firm Name, Address, & Provide PBC Vendor ID#. (https://www.pbcgov.org/pbcvendors)	Non-SBE Mi	nority Women siness Business	Small Business	Black	Hispanic	Women	Caucasian	Asian	Other
1. MCO Construction & Services, Inc.	50-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	V	V			13.18%			
2. Greywood Consulting Corp	N. M.	V	V			8.58%	***************************************	***************************************	-
"2" SBW & Associates, Inc.	No.	V Comment	~	3.83%		100 miles			
4.		X O STATE OF THE S	, income						
5.		The second secon	40.100						
(Please use additional sheets if necessary)			Total						
Total Bid/Offer Price \$ 1,869,347.80	_			Tota	al Certified S/M/\	NBE Participation	\$25. <u>59%</u>)	
hereby certify that the above information is accurate to the bes	t of my knowledge:	Pedro	L Cap	estany,	PE, SC	QS		ice President	•
			Name & Autho	orized Signature					Title

Note:

- 1. 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.
- 2. 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.
- 3. Modification of this form is not permitted and will be rejected upon submittal.

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: 2022-036869 SOLICITATION/PROJECT NAME: Program Management Services Contract Prime Contractor: AECOM Technical Services Subcontractor: MCO Construction and Services, 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 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. Item Description Quantity/ Contingencies/ Total Price/Percentage Item Units **Allowances** \$223,849.60 ction management services; Field inspections;document construction p Duration for the services in this CSA #2 from 1/1/2025 - 2/6/2025 \$22,572 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: \$246,421.60 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. Price or Percentage: Name of 2nd/3rd tier Subcontractor/subconsultant AECOM Technical Services, Inc. MCO Construction and Services, Inc. Print Namzo 27/05, Digitally signed by Zayas, Jay DN: cn=Zayas, Jay, ou=USARL2. Print Name of Sur or subcensultant email≔jay.zayas@aecom.com Date: 2024 12:30 09:14:55 -05'00' Authorized Signature Ann McNeil Jay Zayas Print Name Vice President President Title

12/26/24

Revised 09/17/2019

Date: 12/26/2024

OEBO LETTER OF INTENT - SCHEDULE 2

SOLICITATION/PROJECT NAME: Program Management Services Contract Prime Contractor: AECOM Technical Services Subcontractor: Greywood Consulting Corp (Check box(s) that apply) SBE WBE MBE MM/WBE Non-S/M/WBE Date of Palm Beach County Certification (if applicable): Nov 5, 2026 VS0000006710 The undersigned affirms they are the following (select one from each column if applicable): Column 3 Male Female Mf/Can-American/Black Asian American Caucasian American Supplier	any tier) both pa	eted Schedule 2 is a binding document between the Pranch and should be treated as such. The Schedule 2 shall rities recognize this Schedule as a binding documents/subconsultants, must properly execute this docoroposal.	contain bol ment. All	ded language Subcontracto	indicating that by sors/subconsultants,	igning the Schedule 2, including any tiered
SOLICITATION/PROJECT NAME: Program Management Services Contract Prime Contractor: AECOM Technical Services Subcontractor: Greywood Consulting Corp (Check box(s) that apply) SEE WBE MWBE MN/WBE Mon-S/M/WBE Date of Palm Beach Country Certification (if applicable). Nov 5, 2026 WS00000006710 The undersigned affirms they are the following (select one from each column if applicable): Column 3 Column 3 Male Pemale Planting Primary Prima	SOLICITA	TION/PROJECT NUMBER: 2022-036869				
Check box(s) that apply			nt Servic	es Contra	act	,
Check box(s) that apply	Drings Co	AECOM Technical Servi	ces	Gr	evwood Co	nsulting Corn
The undersigned affirms they are the following (select one from each column if applicable): Column 1 Column 2 Column 3 Male			Subce	ontractor:		
The undersigned affirms they are the following (select one from each column if applicable): Column 1 Column 2 Affican-American/Black Asian American Caucasian American Supplier Affican-American Native American Caucasian American Supplier Affican-American Native American Native American Supplier Affican-American Native American Native American Supplier Affican-American Native American Native American Native American Supplier Affican-American Native American Native Am	☑SBE [□WBE □MBE □M/WBE □Non-S/M/WBE Da	ate of Palm B	each County C	ertification (if applic	abie):
Column 3 Male Female	The unde	ersigned affirms they are the following (select one from	each columi	if applicable)	p.	VS0000006710
Hispanic American Native A				· · · upp · · · · · · · · · ·	•	Column 3
properly executed Schedule 2 for any \$\forall NVMBE} 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. \$\forall NVMBE credit will only be given for the areas in which the \$\forall NVMBE is certified. A detailed proposal may be attached to a properly executed Schedule 2. Line	□Male [asian American	□Supplier
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: \$160,304.48 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. AECOM Technical Services, Inc. Print Name of 2nd/3nd tier Subcontractor/subconsultant AECOM Technical Services, Inc. Print Name of 2nd/3nd tier Subcontractor/subconsultant	properly e to be perf	executed Schedule 2 for any <u>S/M/WBE</u> participation may resul ormed or items supplied with the dollar amount and/or perce	t in that parti ntage for eacl	cipation not bein n work item. S/I	ng counted. Specify in M/WBE credit will only	detail, the scope of work
Project immengement services in this CSA #2 from 1/1/2025 - 2/6/2025 \$14,683.68	1	Item Description	Unit Price	l 1		Total Price/Percentage
Duration for the services in this CSA #2 from 1/1/2025 - 2/6/2025 Duration for the services in this CSA #2 from 1/1/2025 - 2/6/2025 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: ### S160,304.48 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	11000	Project management services including contract review, procurement support and project management support		Onics	Anowances	\$145,620,80
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: \$160,304.48 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. Price or Percentage: Price or Percentage: Print Name of Print Name of Print Name of Print Name of Subcontractor/subconsultant Authorized Signature Jay Zayas Print Name Vice President Title 12/26/2024 12/26/2024						¥145,020.00
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: \$160,304.48 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. Price or Percentage: Price or Percentage: Print Name of Znd/3rd tier Subcontractor/subconsultant AECOM Technical Services, Inc. Print Name of Znd/3rd tier Subcontractor/subconsultant By: Jay Authorized Signature Jay Zayas Print Name Vice President Title 12/26/2024		Duration for the services in this CSA #2 from 1/1/2025 - 2/6/2025				\$14.683.68
AECOM Technical Services, Inc. Print Name of Prayas, Digashy signed by 23918, Jay Authorized Signature Jay Zayas Print Name Jay Zayas Print Name Vice President Title 12/26/2024 Title 12/26/2024						
AECOM Technical Services, Inc. Print Name of Prayas, Digashy signed by 23918, Jay Authorized Signature Jay Zayas Print Name Jay Zayas Print Name Vice President Title 12/26/2024 Title 12/26/2024						
AECOM Technical Services, Inc. Print Name of Prayas, Digashy signed by 23918, Jay Authorized Signature Jay Zayas Print Name Jay Zayas Print Name Vice President Title 12/26/2024 Title 12/26/2024						
AECOM Technical Services, Inc. Print Name of Print Name of Print Name of Jay Zayas, Jay Discriptions, Jay On: one Zoyas, Jay			rm the above-	described work	in conjunction with the	e aforementioned project
AECOM Technical Services, Inc. Print Name of Payas, Digitally signed by Zayas, Jay, Div. cer-Zayas, Jay, Out-USARI 2, on Date: 2024 12:30 09 25:15-05:00 By: Authorized Signature Jay Zayas Print Name Vice President Title 12/26/2024 Greywood Consulting Corp Print Name of Subcontractor/subconsultant By: Authorized Signature Lorna Anderson Print Name Print Name Print Name 12/26/2024	amount be	elow accompanied by a separate properly executed Schedule	e 2.			ne business name and the
Print Name of Piayas, By:	Na	ine or ¿/5.4 tier subcontractor/subconsultant				
By:		· · · · · · · · · · · · · · · · · · ·	Gr	eywood	Consulting	Corp
Authorized Signature Jay Zayas Print Name Vice President Title 12/26/2024 By: Authorized Signature Authorized Signature Lorna Anderson Print Name Print Name 12/26/2024		amalinia traus Anna and an anna an anna	Print N	/	/ 1 /	
Jay Zayas Print Name Vice President Title 12/26/2024 Lorna Anderson Print Name Print Name 12/26/2024		ву:	Ву:	/	<u> </u>	
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Revised 09/17/2019

both pa	eted Schedule 2 is a binding document between the P and should be treated as such. The Schedule 2 shall arties recognize this Schedule as a binding docuractors/subconsultants, must properly execute this docuroposal.	contain bolument. All	ded language i Subcontracto	indicating that by rs/subconsultants,	signing the Schedule 2, including any tiered
SOLICITA	ATION/PROJECT NUMBER: 2022-036869				
	ATION/PROJECT NAME: Program Management Ser	vices Cont	ract		4000
Prime Co	ontractor: AECOM Technical Services			SBW & Asso	ociates, Inc.
_	ox(s) that apply) □ WBE □ MBE □ M/WBE □ Non-S/M/WBE □	ate of Palm B	each County C	ertification (if appli	cable):
The und	ersigned affirms they are the following (select one from <u>Column 2</u>	each columi	if applicable)	:	Column 3
□Male I	☑ Female ☑ African-American/Black ☐ ☐ Hispanic American ☐	lAsian Ameri lNative Amer		sian American	□Supplier
properly of to be perf	E PARTICIPATION — S/M/WBE Primes must document all wor executed Schedule 2 for any S/M/WBE participation may resu formed or items supplied with the dollar amount and/or percess S/M/WBE is certified. A detailed proposal may be attached to the proposal may	It in that parti entage for eac to a properly e	cipation not beir h work item. S/I xecuted Schedu	ng counted. Specify in M/WBE credit will on le 2.	n detail, the scope of work ly be given for the areas in
Item	Item Description	Unit Price	Quantity/ Units	Contingencies/ Allowances	Total Price/Percentage
	Administration of contracts; payment request processes				\$64,159.20
	and other contract administration support tasks such as quality control				
	Duration for the services in this CSA #2, regarding 1-year contract extension, from 277/2025-2/8/2025		'		
	Duration for the services in this CSA #2 from 1/1/2025 - 2/6/2025				\$7,416
		\ \			
at the foll	rsigned Subcontractor/subconsultant is prepared to self-perfo owing total price or percentage: \$71,575.20 ersigned intends to subcontract any portion of this work to a	another Subco			NI SANS KANDAN SANSAN SANSA
	elow accompanied by a separate properly executed Schedul		or Percentage:		
	AECOM Technical Services, Inc.			/ & Associate	
	Print Name of PrinZayas, Digitally signed by Zayas, Jay DN: cn=Zayas, Jay, ou=USARL2,	Print N	lame of Subcont	ractor/subconsultan	t
	By: Jay email=jay.zayas@aecom.com Date: 2024.12.30 09:28:11 -05'00'	Ву:		Javin L. Wal	lker
	Authorized Signature	,	Au	thorized Signature	-
	Jay Zayas		Ja	vin L. Walker	
	Vice President	Print !		Oma a i al a se t	
			<u> </u>	President	
	Title 12/26/2024	Title	r~		2004
	12/26/2024 Date:	Date:	Dece	ember 26th, 2	2024
				Rev	vised 09/17/2019

CSA History

Project Name: Project Management Services - GGCP Project Manager: David Hawke

Contract Amount: Project Number: 2022-036869

API Established: 20% SBE Project Management Firm: AECOM Technical Services, Inc.

SBE Goal: 35.0% Contract Date: February 7, 2023

Resoluti	on Number: R2		Total	5,224,887.72	1,652,740.25	31.63%		
CSA#	CSA Amount	SBE Amount	Requested By	Request Date	Services	Approved	Appr'd By	SBE %
Orig.	0.000				ORIGINAL CONTRACT	7-Feb-28	B(6)C	#DIV/0!
1	3,355,539.92	1,174,438.97			Services 2/8/23 to 12/31/23 and 1/1/24 to 12/31/24	7-Feb-23	всс	35.00%
2	1,869,347.80	478,301.28						25.59%
								#DIV/01
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 					44			
	5 004 007 70	4 050 740 05						31.63%
Tetal	5,224,887.72	1,652,740.25						ONE 110-1/0
			1			<u> </u>		



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:) Pedro L Capestany, PE, SQS, as (Title/Position:) Vice President of (Name of Firm:) AECOM Technical Services, 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
1/3/2025 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.)
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:) ANN MCNEUL, as (Title/Position:) President of (Name of Firm:) MCOCONSTRUCTION SAXS INCOMEDIA 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 Signature
Signature 12 16 29 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:) Lorna Anderson , as (Title/Position:) President of (Name of Firm:) Greywood Consulting Corp. 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.
Lorun anderson
Signature
December 19, 2024
Date

ATTACHMENT #6

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 <u>AECOM Technical Services</u>, <u>Inc.</u> (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.

283	Pedro L. Capestany, Vice President
(signature of officer or representative)	(printed name and title of officer or representative)
State of Florida, County of Palm Beach	
Sworn to and subscribed before me by me this, 5 day of DECFMNER	eans of physical presence or online notarization 2024, by MOND CAPESIANY.
Personally known GOR produced identi	fication
Type of identification produced	•
NØTARY PUBLIC	
My Commission Expires:	
State of Florida at large	JANICE BROWN Notary Public - State of Florida Commission # HH 058982 My Comm. Expires Jan 28, 2025 Bonded through National Notary Assn.

(Notary Seal)

ATTACHMENT #7



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01/21/2025

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 have ADDITIONAL INSURED provisions or 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).

PRO	DUCER				CONTAC NAME:	CT March	I U.S. Operations	2		:
	Marsh Risk & Insurance Services CA License #0437153				PHONE	200.00	66-4664	FAX (A/C, No):	212-94	0 0522
	633 W. Fifth Street, Suite 1200				IA/C, No E-MAIL	<u> </u>			2 2-34	0-0000 :
	Los Angeles, CA 90071				ADDRE		geles.CertReque			: I
O114	Attn: LosAngeles, CertRequest@Marsh.Com					***************************************		DING COVERAGE		NAIC#
	01348564-STND-GAUE-24-25			10 2022	INSURE	RA: ACE Amer	<u>ican Insurance C</u>	ompany		22667
INSU	AECOM				INSURE	RB: N/A				N/A
	AECOM Technical Services, Inc.				INSURE	RC: Illinois Unio	on Insurance Co			27960 :
	2 Alhambra Plaza, Suite 900 Coral Gables, FL 33134				INSURE	RD;				
					INSURE	RE:				
					INSURE	RF:				:
CO	VERAGES CER	TIFIC	ATE	NUMBER:	LOS-	002644371-10		REVISION NUMBER:		
IN CI	HIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY KCLUSIONS AND CONDITIONS OF SUCH	EQUIR PERT. POLIC	EMEI AIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORDI LIMITS SHOWN MAY HAVE	OF AN'	Y CONTRACT THE POLICIES	OR OTHER DESCRIBED	OCCUMENT WITH RESPEC	T TO	WEIGH THIS : I
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LiMiT	Ś	<u> </u>
A	X COMMERCIAL GENERAL LIABILITY	INSU	AAAD	HDO G47343045		04/01/2024	04/01/2025	EACH OCCURRENCE	\$	2,000,000
	CLAIMS-MADE X OCCUR					- no neven	- 110 112020	DAMAGE TO RENTED		
	OLAIMIS-IMADE [X] OCCUR							PREMISES (Ea occurrence)	\$	2,000,000 5,000
								MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	3,000,000
	X POLICY PRO-							PRODUCTS - COMP/OP AGG	\$	3,000,000
	OTHER:								\$:
Α	AUTOMOBILE LIABILITY			ISA H1073888A		04/01/2024	04/01/2025	COMBINED SINGLE LIMIT (Ea accident)	\$	2,000,000
	X ANY AUTO					-		BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE	\$	
	AUTOS ONET							(Per accident)	\$:
	UMBRELLA LIAB OCCUR							E NOVE O CONTRACTOR		:
	- CCCOR							EACH OCCURRENCE	\$	
	OCANINO-IVIADE	1						AGGREGATE	\$	
A	DED RETENTION \$			WLR C50718748 (AOS)		04/01/2024	04/01/2025	. PED OTH	\$: :
A	AND EMPLOYERS' LIABILITY Y/N			, ,				X PER STATUTE ER		
^	ANYPROPRIETOR/PARTNER/EXECUTIVE N	N/A		SCF C50718852 (WI Retro)		04/01/2024	04/01/2025	E.L. EACH ACCIDENT	\$	2,000,000
	(Mandatory in NH) If yes, describe under							E.L. DISEASE - EA EMPLOYEE	\$	2,000,000
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	2,000,000
С	ARCHITECTS & ENG.			EON G21654693 005		04/01/2024	04/01/2025	Per Claim/Agg		1,000,000
	PROFESSIONAL LIAB.			"CLAIMS MADE"				Defense Included		
								GOTOTO THOICEGE		
RE: Pain perfo	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC Program Management Services - GGCP Project No. Beach County Board of County Commissioners, a formed by or on behalf of the named insured and whe en contract with respect to GL, AL and WC.	: 2022-0 Political	36869 Subdiv	i. vision of the State of Florida, its Offic	cers, Emp	loyees and Agent	s are named as a	dditional insured for GL coverage,	but only a	as respects work ere required by
<u> </u>	DIFFORTELIALBER		-							· · · · · · · · · · · · · · · · · · ·
CEI	RTIFICATE HOLDER				CANC	ELLATION				·
	Palm Beach County Board of County Commissioners c/o Capital Improvements Division 2623 Vista Parkway West Palm Beach, FL 33411				THE	EXPIRATION	N DATE THE	ESCRIBED POLICIES BE CA EREOF, NOTICE WILL E Y PROVISIONS.		
	rreatr aint Death, FL 33411						_			

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Marsh Risk & Insurance Services

ACORD 25 (2016/03)

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Endorsement Number: 11

COMMERCIAL AUTO CA 04 44 10 13

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

AUTO DEALERS COVERAGE FORM BUSINESS AUTO COVERAGE FORM MOTOR CARRIER COVERAGE FORM

With respect to coverage provided by this endorsement, the provisions of the Coverage Form apply unless modified by the endorsement.

This endorsement changes the policy effective on the inception date of the policy unless another date is indicated below.

Named Insured:	AECOM		
Endorsement Eff	ective Date:		

SCHEDULE

Name(s) Of Person(s) Or Organization(s):

Any person or organization against whom you have agreed to waive your right of recovery in a written contract, provided such contract was executed prior to the date of loss.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The Transfer Of Rights Of Recovery Against Others To Us condition does not apply to the person(s) or organization(s) shown in the Schedule, but only to the extent that subrogation is waived prior to the "accident" or the "loss" under a contract with that person or organization.

POLICY NUMBER: HDO G47343045

COMMERCIAL GENERAL LIABILITY CG 20 10 12 19

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location(s) Of Covered Operations
Any Owner, Lessee or Contractor whom you have agreed to include as an additional insured under a written contract, provided such contract was executed prior to the date of loss.	All locations where you are performing ongoing operations for such additional insured pursuant to any such written contract.

- A. Section II Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:
 - 1. Your acts or omissions; or
 - The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured(s) at the location(s) designated above.

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to "bodily injury" or "property damage" occurring after:

- All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
- 2. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.
- C. With respect to the insurance afforded to these additional insureds, the following is added to Section III Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we

will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- 2. Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

COMMERCIAL GENERAL LIABILITY CG 20 37 12 19

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – COMPLETED OPERATIONS

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s)	Location And Description Of Completed Operations
Any person or organization whom you have agreed to include as an additional insured under a written contract, provided such contract was executed prior to the date of loss	All locations where you perform work for such additional insured pursuant to any such written contract.
Information required to complete this Schedule, if not sh	

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury" or "property damage" caused, in whole or in part, by "your work" at the location designated and described in the Schedule of this endorsement performed for that additional insured and included in the "products-completed operations hazard".

However:

- The insurance afforded to such additional insured only applies to the extent permitted by law; and
- If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to Section III – Limits Of Insurance:

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

- 1. Required by the contract or agreement; or
- Available under the applicable limits of insurance;

whichever is less.

This endorsement shall not increase the applicable limits of insurance.

Endorsement Number: 17

COMMERCIAL GENERAL LIABILITY CG 24 04 12 19

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US (WAIVER OF SUBROGATION)

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART ELECTRONIC DATA LIABILITY COVERAGE PART LIQUOR LIABILITY COVERAGE PART POLLUTION LIABILITY COVERAGE PART DESIGNATED SITES POLLUTION LIABILITY LIMITED COVERAGE PART DESIGNATED SITES PRODUCTS/COMPLETED OPERATIONS LIABILITY COVERAGE PART RAILROAD PROTECTIVE LIABILITY COVERAGE PART UNDERGROUND STORAGE TANK POLICY DESIGNATED TANKS

SCHEDULE

Name Of Person(s) Or Organization(s): Any person or organization against whom you have agreed to waive your right of recovery in a written contract, provided such contract was executed prior to the date of loss.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

The following is added to Paragraph 8. Transfer Of Rights Of Recovery Against Others To Us of Section IV – Conditions:

We waive any right of recovery against the person(s) or organization(s) shown in the Schedule above because of payments we make under this Coverage Part. Such waiver by us applies only to the extent that the insured has waived its right of recovery against such person(s) or organization(s) prior to loss. This endorsement applies only to the person(s) or organization(s) shown in the Schedule above.

Workers' Compensation and Employers' Liability Policy

Named Insured AECOM 999 TOWN & COUNTRY ROAD ORANGE, CA 92868	Endorsement Number
	Policy Number
	Symbol: WLR Number: C50718748
Policy Period	Effective Date of Endorsement
04-01-2024 TO 04-01-2025	04-01-2024
Issued By (Name of Insurance Company)	
ACE AMERICAN INSURANCE COMPANY	
Insert the policy number. The remainder of the information is to	be completed only when this endorsement is issued subsequent to the preparation of the policy.

WAIVER OF OUR RIGHT TO RECOVER FROM OTHERS ENDORSEMENT

We have the right to recover our payments from anyone liable for an injury covered by this policy. We will not enforce our right against the person or organization named in the Schedule. This agreement applies only to the extent that you perform work under a written contract that requires you to obtain this agreement from us.

This agreement shall not operate directly or indirectly to benefit any one not named in the Schedule.

Schedule

ANY PERSON OR ORGANIZATION AGAINST WHOM YOU HAVE AGREED TO WAIVE YOUR RIGHT OF RECOVERY IN A WRITTEN CONTRACT, PROVIDED SUCH CONTRACT WAS EXECUTED PRIOR TO THE DATE OF LOSS.

For the states of CA, UT, TX, refer to state specific endorsements. This endorsement is not applicable in KY, NH, and NJ.

The endorsement does not apply to policies in Missouri where the employer is in the construction group of code classifications. According to Section 287.150(6) of the Missouri statutes, a contractual provision purporting to waive subrogation rights against public policy and void where one party to the contract is an employer in the construction group of code classifications.

For Kansas, use of this endorsement is limited by the Kansas Fairness in Private Construction Contract Act(K.S.A.. 16-1801 through 16-1807 and any amendments thereto) and the Kansas Fairness in Public Construction Contract Act(K.S.A 16-1901 through 16-1908 and any amendments thereto). According to the Acts a provision in a contract for private or public construction purporting to waive subrogation rights for losses or claims covered or paid by liability or workers compensation insurance shall be against public policy and shall be void and unenforceable except that, subject to the Acts, a contract may require waiver of subrogation for losses or claims paid by a consolidated or wrap-up insurance program.

Authorized Representative

WC 00 03 13 (11/05) Ptd. U.S.A. Copyright 1982-83, National Council on Compensation

RFP ATTACHMENT F 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.)
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 DISCLOSURI is submitted by (Name of Individual:) Javin L. Walker as (Title/Position:) President of (Name of Firm:) "2"SBW & Associates, Inc.
August 8, 2022 Date
RFP Attachment P/Page 1 of 1