STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION STATE-FUNDED GRANT SUPPLEMENTAL AGREEMENT

SUPPLEMENTAL NO. 1 1	
CONTRACT NO.	
<u>G1995</u> FPN	-
437046 1 54 01	

Recipient: Pinellas County

June 9, 2020 This Supplemental Agreement ("Supplemental"), dated ______ arises from arises from the desire to supplement the State-Funded Grant Agreement ("Agreement") entered into and executed on 6/11/2019 as identified above. All provisions in the Agreement and supplements, if any, remain in effect except as expressly modified by this Supplemental.

The parties agree that the Agreement is to be amended and supplemented as follows:

The State Funded Grant Agreement funding amount is decreased to match the total construction amount.

Reason for this Supplemental and supporting engineering and/or cost analysis:

This Supplemental Agreement is to decrease the funding amount to match the total construction & CEI cost.

Total Construction & CEI cost \$1,613,248

FDOT Participation \$806,624

Local Participation \$806,624

Pinellas County will notify the Department of any Change Orders whether or not the Department is participating in them. Change order will not be implemented until the Department has granted approval.

Exhibit B, Schedule of Financial Assistant & Exhibit D, State Financial Assistant, of the original agreement referenced above are hereby deleted and replaced by Exhibit B & Exhibit D, attached to this Supplemental.

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION STATE-FUNDED GRANT SUPPLEMENTAL AGREEMENT

525-010-60 PROGRAM MANAGEMENT 12/18 Page 2 of 2

IN WITNESS WHEREOF, the parties have caused these presents to be executed the day and year first above written.

RECIPIENT: Pinellas County		F FLORIDA /IENT OF TRANSPORTATION
By: Name: Pat Gerard Title: Chair	By: Name: Title:	Richard Moss 6/9/2020 7:50 AM Richard Moss, P.E. Director of Transportation Development
ATTEST: Ken Burke, Clerk of the Circuit Court By: By: Deputy Clerk	By: Name:	Legal Review: DocuSigned by: Samuel Hunderson Samuel Thenderson
APPROVED AS TO FORM Office of County Attorney		
Office of the County Attorney		

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION STATE-FUNDED GRANT AGREEMENT EXHIBIT "B" SCHEDULE OF FINANCIAL ASSISTANCE

525-010-60 PROGRAM MANAGEMENT 09/17 Page 1 of 2

RECIPIENT NAME & BILLING ADDRESS: <u>Pinellas County</u> <u>Public Works Department</u> <u>14 S Fort Harrison Avenue, 4th Floor</u>

Clearwater, Florida 33756

FINANCIAL PROJECT NUMBER: 437046 1 54 01

I. PHASE OF WORK by Fiscal Year:	FY 2019	FY	FY	TOTAL
Design- Phase 34	\$ 0.00	\$ 0.00	\$ 0.00	\$0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	or \$	% or \$ 0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	or \$	% or \$ 0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	% or \$	% or \$ 0.00
Local Participation (Any applicable waiver noted in Exhibit "A")	% or \$ 0.00	% or \$ 0.00	% or \$ 0.00	% or \$0.00
In-Kind Contribution	\$	\$	\$	\$ 0.00
Cash	\$	\$	\$	\$ 0.00
Combination In-Kind/Cash	\$	\$	\$	\$ 0.00
Right of Way- Phase 44	\$ 0.00	\$ 0.00	\$ 0.00	\$0.00
Maximum Department Participation - (Insert Program Name)	% or \$	or \$	% or \$	% or \$ 0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	or \$	% or \$ 0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	% or \$	% or \$ 0.00
Local Participation (Any applicable waiver noted in Exhibit "A")	% or \$ 0.00	% or \$ 0.00	% or \$ 0.00	% or \$0.00
In-Kind Contribution	\$	\$	\$	\$ 0.00
Cash	\$	\$ 0.00	\$	\$ 0.00
Combination In-Kind/Cash	\$	\$	\$	\$ 0.00
Construction/CEI - Phase 54	\$ 1,613,248.00	\$ 0.00	\$ 0.00	\$1,613,248.00
Maximum Department Participation - (<u>State Funded Grant</u> <u>Agreement- CIGP</u>)	% or \$ 806,624.00	% or \$	% or \$	% or \$ 806,624.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	% or \$	% or \$ 0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	% or \$	% or \$ 0.00
Local Participation (Any applicable waiver noted in Exhibit "A")	% or \$ 806,624.00	% or \$ 0.00	% or \$ 0.00	% or \$806,624.00
In-Kind Contribution	\$	\$	\$	\$ 0.00
Cash	\$ 806,624.00	\$	\$	\$ 806,624.00
Combination In-Kind/Cash	\$	\$	\$	\$ 0.00

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION STATE-FUNDED GRANT AGREEMENT EXHIBIT "B" SCHEDULE OF FINANCIAL ASSISTANCE

525-010-60 PROGRAM MANAGEMENT 09/17 Page **2** of **2**

Insert Phase and Number (if applicable)	\$ 0.00	\$ 0.00	\$ 0.00	\$0.00
Maximum Department Participation - (Insert Program Name)	or \$	% or \$	% or \$	% or \$ 0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	% or \$	% or \$ 0.00
Maximum Department Participation - (Insert Program Name)	% or \$	% or \$	or \$	% or \$ 0.00
Local Participation (Any applicable waiver noted in Exhibit "A")	% or \$ 0.00	% or \$ 0.00	% or \$ 0.00	% or \$0.00
In-Kind Contribution	\$	\$	\$	\$ 0.00
Cash	\$	\$	\$	\$ 0.00
Combination In-Kind/Cash	\$	\$	\$	\$ 0.00
II. TOTAL PROJECT COST:	\$1,613,248.00	\$0.00	\$0.00	\$1,613,248.00

COST ANALYSIS CERTIFICATION AS REQUIRED BY SECTION 216.3475, FLORIDA STATUTES:

I certify that the cost for each line item budget category has been evaluated and determined to be allowable, reasonable, and necessary as required by Section 216.3475, F.S. Documentation is on file evidencing the methodology used and the conclusions reached.

Tamara Perez

District Grant Manager Name

—DocuSigned by: Tamara Perez 6/11/2020

Signature 2464C143C.

Date

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

EXHIBIT D

STATE FINANCIAL ASSISTANCE (FLORIDA SINGLE AUDIT ACT)

THE STATE RESOURCES AWARDED PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

State Project Title	🛛 County Incentive Grant Program (CIGP), (CSFA 55.008)
and CSFA	Small County Outreach Program (SCOP), (CSFA 55.009)
Number:	Small County Road Assistance Program (SCRAP), (CSFA 55.016)
	Transportation Regional Incentive Program (TRIP), (CSFA 55.026)
	Insert Program Name, Insert CSFA Number

*Award Amount: \$806,624.00

*The state award amount may change with supplemental agreements

Specific project information for CSFA Number is provided at: https://apps.fldfs.com/fsaa/searchCatalog.aspx

COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT TO THIS AGREEMENT:

State Project Compliance Requirements for CSFA Number are provided at: <u>https://apps.fldfs.com/fsaa/searchCompliance.aspx</u>

The State Projects Compliance Supplement is provided at: <u>https://apps.fldfs.com/fsaa/compliance.aspx</u>