

AGREEMENT

THIS AGREEMENT is made and entered into by and between the City of Delray Beach, a Florida municipal corporation ("City"), whose address is 100 NW 1st Avenue, Delray Beach, Florida 33444, and **REDEVELOPMENT MANAGEMENT ASSOCIATES, LLC, D/B/A RMA**, a Florida corporation (hereafter referred to as "Contractor"), whose address is 2302 E. Atlantic Blvd., Pompano Beach, FL 33062.

WHEREAS, the City desires to retain the services of the Contractor to provide the goods and services in accordance with the City's Request for Proposals No. 2017-075, and the Contractor's response thereto, all of which are incorporated herein by reference.

NOW, THEREFORE, in consideration of the mutual covenants and promises hereafter set forth, the Contractor and the City agree as follows:

ARTICLE 1. INCORPORATION OF REQUEST FOR PROPOSALS

The terms and conditions of this Agreement shall include and incorporate the terms, conditions, and specifications set forth in the City's Request for Proposals No. 2017-075 and the Contractor's response thereto, including all documentation required thereunder.

ARTICLE 2. DESCRIPTION OF GOODS OR SCOPE OF SERVICES

The Contractor shall provide the goods and/or perform those services identified in the specifications accompanying the City's Request for Proposals, which are incorporated herein by reference.

ARTICLE 3. COMPENSATION

The City shall pay to the Contractor, in compliance with the Pricing Schedule attached hereto and incorporated herein, according to the terms and specifications of the referenced Request for Proposal.

ARTICLE 4. MISCELLANEOUS PROVISIONS

a. Notice Format. All notices or other written communications required, contemplated, or permitted under this Agreement shall be in writing and shall be hand delivered, telecommunicated, or mailed by registered or certified mail (postage prepaid), return receipt requested, to the following addresses:

- i. As to the City: City of Delray Beach
100 NW 1st Street
Delray Beach, Florida 33444
Attn: City Manager
Email: Lauzier@mydelraybeach.com
- ii. with a copy to: City of Delray Beach

200 NW 1st Street
Delray Beach, Florida 33444
Attn: City Attorney
Email: LohmanM@mydelraybeach.com

- iii. As to the Contractor: Redevelopment Management Associates, LLC, d/b/a/
RMA
2302 E. Atlantic Blvd.
Pompano Beach, FL 33062
Attn.: Max Wemyss, Urban Planner

b. Headings. The headings contained in this Agreement are for convenience of reference only, and shall not limit or otherwise affect in any way the meaning or interpretation of this Agreement.

c. Effective Date. The effective date of this Agreement shall be as of the date it has been executed by both the parties hereto.

ARTICLE 5. CONTRACT TERM

The Contract and Agreement shall be effective for five (5) years, with two (2) one year renewal options as of the effective date of this Agreement, and shall expire on _____, _____.

(The remainder of this page is intentionally left blank)

IN WITNESS WHEREOF, the parties have executed this Agreement on the dates hereinafter written.

CITY OF DELRAY BEACH, FLORIDA

[SEAL]

By: _____
Mark Lauzier, City Manager

ATTEST:

By: _____
Katerri Johnson, City Clerk

APPROVED AS TO FORM AND
LEGAL SUFFICIENCY

By: _____
R. Max Lohman, City Attorney

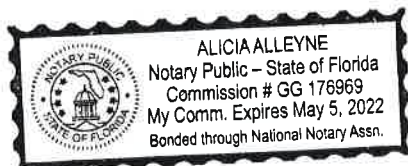
CONTRACTOR

[SEAL]

By: _____
KIM BRIESEMEISTER
Printed Name
PRINCIPAL
Title

STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 21 day of MARCH, 2018, by KIM BRIESEMEISTER, as PRINCIPAL (name of officer or agent, title of officer or agent), of Redevelopment Management Associates, LLC (name of corporation acknowledging), a Florida (state or place of incorporation) corporation, on behalf of the corporation. He/She is personally known to me or has produced (type of identification) as identification



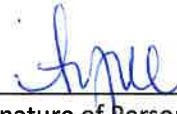
Notary Public – State of Florida

CORPORATE ACKNOWLEDGEMENT

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 21 day of MARCH, 2018, by KIM BRIESEMEISTER (name of officer or agent, title of officer or agent), of FLORIDA (state or place of incorporation, on behalf of the corporation. He/She is (personally known to me) (or has produced identification) and has used his/her _____ (type of identification) as identification.



Signature of Person Taking
Acknowledgment



Name of Acknowledger Typed,
Printed or Stamped

PRICING SCHEDULE

RFP 2017-075 – Agreement for General Planning Services
Hourly Rates – Standard

Position/Staff		Standard Rate
Administrative	Administrative Assistant	\$75
Principals/Directors	Directors Principals Principal Planner	\$185
Senior Professionals	Sr. Architect Sr. CAD Tech Sr. Engineer Sr. Landscape Arch Sr. Planner LA Designer III Controller	\$150
Professionals	Engineer Designer/Int. Arch Landscape Arch Project Manager Interior Designer Inspector	\$125
Associate Professionals	Drafter GIS Urban Design Assistant	\$100
Misc. Services	Estimator Spec. Writer Field Inspector	\$85