



CITY OF DELRAY BEACH
100 NW 1st AVENUE, DELRAY BEACH, FL 33444

AMENDMENT NO. 1 TO
BW2018-005 CONSULTING AGREEMENT FOR MIGRATION OF NEW
SOFTWARE

BLACK & VEATCH CORPORATION

CITY OF DELRAY BEACH
AMENDMENT NO. 1 TO
GENERAL CONSULTING SERVICES

THIS AMENDMENT NO. 1 to the Consulting Agreement for Migration of New Software dated June 19, 2018, by and between City of Delray Beach, a municipal corporation of the State of Florida (hereinafter referred to as "City"), and Black & Veatch Corporation (hereinafter referred to as "Contractor") a Kansas corporation, authorized to do business in the State of Florida, is entered into this ____ day of ____, 2020.

WITNESSETH:

WHEREAS, on June 19, 2018, the City entered into an agreement with Black & Veatch Corporation for general consulting services for implementation of the Cityworks System (hereinafter referred to as the "Agreement"); and

WHEREAS, the Agreement was for only Phases I and II of the Cityworks System Implementation project; and

WHEREAS, the City desires to amend the Agreement to add Phases III and IV of the Cityworks System Implementation project for the not to exceed amount of Five Hundred Eleven Thousand Four Hundred Eighty Nine and 00/100 Dollars (\$511,489) for Phase III and One Hundred Thirty Eight Thousand Five Hundred Eleven and 00/100 Dollars (\$138,511) for Phase IV, for a total estimated amount of Six Hundred Fifty Thousand and 00/100 Dollars (\$650,000) as stated in Composite Exhibit "A", attached hereto and incorporated herein; and

WHEREAS, the parties seek to amend the Agreement to include Composite Exhibit "A", and

WHEREAS, Contractor agrees to provide the additional consulting services for Phases III and IV to City in accordance with the terms and conditions of the Agreement.

NOW, THEREFORE, the parties do agree to amend the Agreement:

1. The above recitals are true and correct and are incorporated herein.
2. The Agreement is hereby amended to include the attached Composite Exhibit "A," as a new Exhibit "C" to the Agreement, which represents the scope of work and compensation for the work to be completed as Phases III and IV.
3. Except as provided herein, all other terms and conditions of the Agreement remain in full force and effect and are hereby confirmed. The Agreement and this Amendment No. 1 represent the entire understanding between the parties on the issues contained herein, either written or oral, and may only be amended by written instrument signed by both parties.

[Remainder of page intentionally left blank]

IN WITNESS WHEREOF, the City and Contractor hereto have executed this Amendment as of the day and year first above written.

ATTEST:

CITY OF DELRAY BEACH

Katerri Johnson, City Clerk

BY:
Shelly Petrolia, Mayor

Approved as to form for legal sufficiency:

Lynn Gelin, City Attorney

CONTRACTOR



By:

Printed Name

Title

STATE OF Florida
COUNTY OF Broward

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization, this 6th day of March, 2020 by Rafael E. Frias III (name of person), as Associate Vice President (type of authority) for Black & Veatch Corp (name of party on behalf of whom instrument was executed).

Personally known ☒ OR Produced Identification
Type of Identification Produced _____

Notary Public - State of Florida



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/5/2020

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).

PRODUCER Lockton Companies 444 W. 47th Street, Suite 900 Kansas City MO 64112-1906	CONTACT NAME: Derek Spreser PHONE (A/C, No, Ext): 816-960-9060 E-MAIL ADDRESS: DSpreser@lockton.com FAX (A/C, No):
INSURED Black & Veatch Corporation 11401 Lamar Overland Park, KS 66211 United States	INSURER(S) AFFORDING COVERAGE INSURER A: Zurich American Insurance Company INSURER B: American Zurich Insurance Company INSURER C: Lexington Insurance Company INSURER D: INSURER E: INSURER F:
	NAIC # 16535 40142 19437

COVERAGES**CERTIFICATE NUMBER:** 369710**REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY			GLO 0139245 - Large Works/Small Works	11/1/2019	11/1/2020	EACH OCCURRENCE \$ \$1,000,000
A	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR				11/1/2019	11/1/2020	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ \$300,000
A	<input checked="" type="checkbox"/> Contractual			GLO 4641358 - Corporate	11/1/2019	11/1/2020	MED EXP (Any one person) \$ \$10,000
	<input checked="" type="checkbox"/> PD & C/O & XCU			GLO 4641367 - Divisional Works			PERSONAL & ADV INJURY \$ \$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE \$ \$2,000,000
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						PRODUCTS - COMP/OP AGG \$ \$2,000,000
	OTHER:						\$
A	AUTOMOBILE LIABILITY			BAP 4641355	11/1/2019	11/1/2020	COMBINED SINGLE LIMIT (Ea accident) \$ \$1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> OWNED AUTOS ONLY						BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS ONLY						PROPERTY DAMAGE (Per accident) \$
	<input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY						\$
	UMBRELLA LIAB						EACH OCCURRENCE \$
	EXCESS LIAB						AGGREGATE \$
	DED						\$
	RETENTION \$						\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC 0139244	11/1/2019	11/1/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER
B	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N		WC 4641353 (AOS)	11/1/2019	11/1/2020	E.L. EACH ACCIDENT \$ \$1,000,000
A	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A		WC 4641354 (ID, MA, WI)	11/1/2019	11/1/2020	E.L. DISEASE - EA EMPLOYEE \$ \$1,000,000
							E.L. DISEASE - POLICY LIMIT \$ \$1,000,000
C	Professional Liability			026030198	11/1/2019	11/1/2020	Professional Limit Each Claim and Annual Aggregate Limit: \$1,000,000

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

Project #: 199400; Project Name: General Services Agreement Dated 6/19/2018 Cartegraph to Cityworks System Migration/Implementation for Utilities;
Project Manager/Contact: Botero, Isabel

CERTIFICATE HOLDER

City of Delray Beach
150 NW 1st Ave.
Delray Beach, FL 33444
United States

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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ADDITIONAL REMARKS SCHEDULE

AGENCY Lockton Companies 444 W. 47th Street, Suite 900 Kansas City MO 64112-1906	NAMED INSURED Black & Veatch Corporation 11401 Lamar Overland Park, KS 66211 United States
EFFECTIVE DATE: 11/1/2019	

ADDITIONAL REMARKS

THIS ADDITIONAL REMARKS FORM IS A SCHEDULE TO ACORD FORM,
FORM NUMBER: 25 **FORM TITLE:** Certificate of Liability Insurance

The General Liability Policy provides primary and non-contributory coverage.

The Automobile Liability Policy provides primary and non-contributory coverage.

Please see page 2 for additional information

City of Delray Beach is included as an Additional Insured as applicable and required by executed, written contract on the following policies:
General Liability
Automobile Liability