

**Lee County Board Of County Commissioners
Agenda Item Summary**

Blue Sheet No. 20030626

1. REQUESTED MOTION:

ACTION REQUESTED: Approve Supplemental Task Authorization No. 7 to Contract #2408, with Bean Whitaker, Lutz & Kareh Inc., for the Survey of all section corners and quarter corners in T45S R24E, for a total not-to-exceed amount of \$100,000.00.

WHY ACTION IS NECESSARY: Board approval required.

WHAT ACTION ACCOMPLISHES: This project will provide GPS coordinates and documentation for all 169 section corners and quarter corners in township 45, range 24.

2. DEPARTMENTAL CATEGORY:

09. Transportation

COMMISSION DISTRICT #:

C9B

3. MEETING DATE:

07-01-2003

4. AGENDA:

- CONSENT
- ADMINISTRATIVE
- APPEALS
- PUBLIC
- WALK ON
- TIME REQUIRED:

5. REQUIREMENT/PURPOSE:
(Specify)

- STATUTE
- ORDINANCE
- ADMIN. CODE *AC-4-4*
- OTHER

6. REQUESTOR OF INFORMATION:

- A. COMMISSIONER
- B. DEPARTMENT *Transportation*
- C. DIVISION
- BY: *Scott Gilbertson, Director*

7. BACKGROUND:

Approval is required for this Supplemental Task Authorizations (STA) No. 7 under CN-02-26, Miscellaneous Surveying and Mapping Services, Lee County Contract #2408 for the project known as survey of all section corners and quarter corners in T45S R24E in the not-to-exceed amount of \$100,000.00 to Bean Whitaker Lutz & Kareh Inc.

This project will provide GPS coordinates and documentation for all 169 section corners and quarter corners in township 45, range 24.

Funds are available from account string: 20404030100.506510

Attachments: 1. STA #7 for execution

8. MANAGEMENT RECOMMENDATIONS:

9. RECOMMENDED APPROVAL:

A Department Director	B Purchasing or Contracts	C Human Resources	D Other	E County Attorney	F Budget Services <i>6/17/03</i>				G County Manager
					OA	OM	Risk	GC	
<i>6/13/03</i>	<i>[Signature]</i>	N/A	<i>BAO 6/16/03</i>	<i>Andrea Traser</i>	<i>[Signature] 6-17-03</i>	<i>[Signature] 6/17/03</i>	<i>[Signature] 6/17/03</i>	<i>[Signature] 6-17-03</i>	<i>[Signature] 6-13-03</i>

10. COMMISSION ACTION:

- APPROVED
- DENIED
- DEFERRED
- OTHER

Rec. by CoAtty
 Date: *6/16/03*
 Time: *3:05 p.m.*
 Forwarded To: *Budget*
6/17/03 2:00pm

RECEIVED BY
 COUNTY ADMIN. *EW*
6/17/03
 COUNTY ADMIN.
 FORWARDED TO:
6/18/03 5:00

LEE COUNTY PROFESSIONAL SERVICE/SERVICE PROVIDER AGREEMENT
CHANGE ORDER/SUPPLEMENTAL TASK AUTHORIZATION

Change Order
 Supplemental Task Authorization

NO.: 7

(A Change Order or Supplemental Task Authorization Requires Approval by the Department Director for Expenditures Under \$25,000 or Approval by the County Manager for Expenditures Between \$25,000 and \$50,000 or Approval by the Board of County Commissioners for Expenditures over \$50,000)

CONTRACT/PROJECT NAME: Surveying & Mapping Services - Section Corner Program

CONSULTANT: Bean, Whitaker, Lutz & Kareh, Inc.

PROJECT NO.: 4040

SOLICIT NO.: CN-02-26

CONTRACT NO.: 2408 ACCOUNT NO.: N/A

REQUESTED BY: Art Parsons, Project Manager

DATE OF REQUEST: 5/1/03

Upon the completion and execution of this Change Order or Supplemental Task Authorization by both parties the Consultant/Provider is authorized to and shall proceed with the following:

EXHIBIT "CO/STA-A: SCOPE OF PROFESSIONAL SERVICE: DATED: 5/1/03

EXHIBIT "CO/STA-B: COMPENSATION & METHOD OF PAYMENT: DATED: 5/1/03

EXHIBIT "CO/STA-C: TIME AND SCHEDULE OF PERFORMANCE: DATED: 5/1/03

EXHIBIT "CO/STA-D: CONSULTANT'S/PROVIDERS ASSOCIATED
SUB-CONSULTANT(S)/SUB-CONTRACTORS: DATED: 5/1/03

EXHIBIT "CO/STA-E: PROJECT GUIDELINES AND CRITERIA: DATED: 5/1/03

It is understood and agreed that the acceptance of this modification by the CONSULTANT/PROVIDER constitutes an accord and satisfaction.

RECOMMENDED:

ACCEPTED:

COUNTY APPROVAL:

By: _____
Department Director Date

By: [Signature]
Consultant/Provider

By: _____
Department Director

By: [Signature] 5/6/03
Contracts Mgmt Date

Date Accepted: 5-6-03

(Under \$25,000)
Date Approved: _____

Corporate Seal

APPROVED:

By: _____
County Manager (Between
(\$25,000 and under \$50,000)
Date Approved: _____

By: _____
*County Attorney's Office Date

By: _____
Chairman
Board of County Commissioners
Date Approved: _____

*County Attorney signature needed
for over Board level expenditures only.

- CHANGE ORDER AGREEMENT No. _____
or
 SUPPLEMENTAL TASK AUTHORIZATION No. 7

EXHIBIT "CO/STA-A"

Date: 5/1/03

SCOPE OF PROFESSIONAL SERVICES

for Surveying & Mapping Services - Section Corner Program
(Enter Project Name from Page 1 of the
Change Order or Supplemental Task Authorization)

SECTION 1.00 CHANGE(S) TO PROFESSIONAL SERVICES

The "Scope of Professional Services" as set forth in Exhibit "A" of the Professional Services Agreement, or Service Provider Agreement, referred to hereinbefore is hereby supplemented, changed or authorized, so that the CONSULTANT or SERVICE PROVIDER, shall provide and perform the following professional services, tasks, or work as a supplement to, change to, or authorized to, the scope of services previously agreed to and authorized:

SCOPE OF SERVICES

GENERAL

The purpose of this survey is for the Restoration and Perpetuation of Section and Quarter Section Corners within the Public Land Survey System in Lee County Florida. This survey will provide field verified survey information on corners reported as or used for Section and Quarter Section Corners in Township 45 South, Range 24 East lying southerly and easterly of the Caloosahatchee River in Lee County, Florida. Work will be limited to areas requested by Lee County Department of Transportation. This survey information will be compiled and incorporated into an interactive map by Lee County. The expected use for this survey information is for improving and enhancing existing mapping accuracy in Lee County. The improved mapping accuracy will allow for a more accurate location of public facilities, such as utilities, roads, traffic facilities and numerous other topographical features. The use for this survey information will also enhance GIS mapping accuracy for property appraisal valuation in Lee County, Florida. Lee County to provide a compiled list including copies of the existing Certified Corner Records (CCR) of the areas to be verified.

TASKS

The Consultant shall perform all services, work and/or items necessary to complete the following tasks:

TASK 1.0 INFORMATION REVIEW

1. Surveyor to review compiled list of Certified Corner Records and create a Base Map of the township to identify location of existing corner records.
2. The labeling of the corners on the base map will indicate if corners are already in the target horizontal datum (NAD '83/90) and if the corner coordinate positions appear to be based on acceptable survey accuracy. The base map will include an associated data base file (EXCEL) which contains corner attributes such as CCR identification number, date of CCR filing, company filing the CCR, corner location (see DEP indexing system), type of corner identified (concrete monument and description, etc.) any coordinates and estimated source information/accuracy and summary evaluation of known problems/conflicts with each corner. Problems and conflicts refer to areas where there may be more than one monument marking a GLO corner or other conflicts that may be uncovered or disclosed during this review.

TASK 2.0 SURVEY VERIFICATION:

From the existing list, Base Map and data base, the surveyor will field verify and provide the following:

1. Locate the corner as shown on CCR. (If the corner is lost or destroyed and cannot be replaced from references, notify the county that the corner could not be verified. Additional work on lost or destroyed corners will be covered under a separate County authorization).
2. Verify coordinate values as shown on the CCR or other reference source provided by the county. If there are no coordinate values on record, the surveyor will provide coordinates using GPS in the NAD 1983 (1990 adjustment) datum.

TASK 3.0 DELIVERABLES

1. The surveyor to provide the county with a recovery sheet (hard copy and digital) for each section and quarter section corner verified. The recovery sheet to include the following:
 - a.) Name of the surveyor, firm performing the recovery work and date.
 - b.) Corner identification.
 - c.) Reference information (if applicable from CCR).
 - d.) Coordinate values NAD 1983 (1990 Adjustment).
 - e.) General information.
2. Digital file of updated township basemap tied to NAD 1983 (1990 Adjustment) Coordinate System.
 3. EXCEL file containing attribute data.

*Attach additional pages, if needed.

CHANGE ORDER AGREEMENT No.
 SUPPLEMENTAL ^{or} TASK AUTHORIZATION No. 7_

EXHIBIT "CO/STA-B"

Date: 5/1/03

COMPENSATION AND METHOD OF PAYMENT

for Surveying & Mapping Services - Section Corner Program

(Enter Project Name from Page 1 of the
Change Order or Supplemental Task Authorization)

SECTION 1.00 CHANGE(S) IN COMPENSATION

The compensation the CONSULTANT, or SERVICE PROVIDER, shall be entitled to receive for providing and performing the supplemented, changed or authorized services, tasks, or work as set forth and enumerated in the Scope of Services set forth in this CHANGE ORDER OR SUPPLEMENTAL TASK AUTHORIZATION AGREEMENT, Exhibit "CO/STA-A", attached hereto shall be as follows:

NOTE: A Lump Sum (L.S.) or Not-to-Exceed (N.T.E.) amount of compensation to be paid the CONSULTANT should be established and set forth below for each task or sub-task described and authorized in Exhibit "S/COA-A". In accordance with Professional Services Agreement Article 5.03(2) "Method of Payment", tasks to be paid on a Work-in-Progress payment basis should be identified (WIPP).

Task Number	Task Title	Amount of Compensation	Indicate Basis of Compensation LS or NTE	If Applicable Indicate (W.I.P.P.)
1	Information Review	\$20,000.00+/-		
2	Survey Verification	\$60,000.00+/-		
3	Deliverables	\$20,000.00+/-		
TOTAL		\$100,000.00	NTE	

(Unless list is continued on next page)

CHANGE ORDER AGREEMENT No. _____
or
 SUPPLEMENTAL TASK AUTHORIZATION No. 7

SECTION 2.00 SUMMARY OF CHANGE(S) IN COMPENSATION

Pursuant to and in consideration of the change(s) in the Scope of Professional Services set forth in the CHANGE ORDER or AGREEMENT, Exhibit "CO/STA-A", the compensation the COUNTY has previously agreed to pay to the CONSULTANT, or SERVICE PROVIDER, as set forth in Exhibit "B" of the Professional Services Agreement, or Service Provider Agreement, shall be changed to be as follows:

Section/Task Number	Section/Task Name	Compensation In the Basic Agreement	Adjustment(s) by Previous CO or STA Nos.	Adjustment(s) Due to this CO or STA	Summary of Changed Compensation
1	Thompson Parcel		\$4,000.00		
2	Conservation Lands Program - Parcel 121		\$7,500.00		
3	Conservation Lands Program - Parcel 121		\$1,600.00		
4	Fort Myers Beach Elementary School		\$2,500.00		
5	Matlacha Park		\$ 800.00		
6	Charleston Park		\$2,000.00		
7	Section Corner Program			\$100,000.00	
TOTAL					\$118,400.00

CHANGE ORDER AGREEMENT No. _____

SUPPLEMENTAL TASK AUTHORIZATION No. 7

EXHIBIT "CO/STA-C"

Date: 5/1/03

TIME AND SCHEDULE OF PERFORMANCE

for Surveying & Mapping Services - Section Corner Program

(Enter Project Name from Page 1 of the
Change Order or Supplemental Task Authorization Agreement)

SECTION 1.00 CHANGES FOR THIS CHANGE ORDER OR SUPPLEMENTAL TASK
AUTHORIZATION AGREEMENT

The time and schedule of completion for the various phases or tasks required to provide and perform the services, tasks, or work set forth in this CHANGE ORDER or SUPPLEMENTAL TASK AUTHORIZATION AGREEMENT, Exhibit "CO/STA-A", entitled "Scope of Professional Services" attached hereto is as follows:

Phase and/or Task Reference as Enumerated in EXHIBIT ↔A↔	Name or Title of Phase and/or Task	Number of Calendar Days For Completion of Each Phase and/or Task	Cumulative Number of Calendar Days For Completion from Date of Notice to Proceed For this CO or STA
1	Information Review	60	60
2	Survey Verification	120	150
3	Deliverables	60	180

CHANGE ORDER AGREEMENT No. _____

SUPPLEMENTAL TASK AUTHORIZATION No. 7

EXHIBIT "CO/STA-C"

Date: 5/1/03

TIME AND SCHEDULE OF PERFORMANCE

for Surveying & Mapping Services - Section Corner Program

(Enter Project Name from Page 1 of the
Change Order or Supplemental Task Authorization Agreement)

**SECTION 2.00 SUMMARY OF THE IMPACT OF CHANGE(S) IN PROFESSIONAL SERVICES ON
THE OVERALL PROJECT TIME AND SCHEDULE OF PERFORMANCE**

Pursuant to and in consideration of the changes in the Scope of Professional Services in this CHANGE ORDER or SUPPLEMENTAL TASK AUTHORIZATION AGREEMENT, Exhibit "CO/STA-A", the time and schedule the COUNTY and the CONSULTANT, or SERVICE PROVIDER, has previously agreed to for all of the work to be done under this Professional Services Agreement, or Service Provider Agreement, shall be changed to be as follows:

Phase and/or Task Reference as Enumerated in EXHIBIT [A] and EXHIBIT [CO/ STA-A] N/A	Name or Title of Phase and/or Task	Number of Calendar Days For Completion of Each Phase and/or Task	Cumulative Number of Calendar Days For Completion From Date of Notice to Proceed

CHANGE ORDER AGREEMENT No. _____

SUPPLEMENTAL TASK AUTHORIZATION No. 7

EXHIBIT "CO/STA-D"

Date: 5/1/03

CONSULTANT'S, OR SERVICE PROVIDER'S, ASSOCIATED SUB-CONSULTANT(S) AND SUBCONTRACTOR(S)

for Surveying & Mapping Services - Section Corner Program

(Enter Project Name from Page 1 of the
Change Order or Supplemental Task Authorization Agreement)

CONSULTANT, or SERVICE PROVIDER, intends to engage the following sub-consultant(s) and/or sub-contractor(s) to assist the CONSULTANT, or SERVICE PROVIDER, in providing and performing the services, tasks, or work required under this CHANGE ORDER, or SUPPLEMENTAL TASK AUTHORIZATION AGREEMENT.

(If none, enter the word "none" in the space below.)

Service and/or Work to be Provided or Performed	Name and Address of Individual or Firm	Disadvantaged, Minority or Women Business Enterprise, (If Yes, Indicate Type)			Sub-Consultant Services are Exempted from Prime Consultant's Insurance Coverage	
		Yes	No	Type	Yes	No
Consulting	Jeff Cooner & Associates, Inc.		X		X	

CHANGE ORDER AGREEMENT No. _____

or

SUPPLEMENTAL TASK AUTHORIZATION No. 7

EXHIBIT "CO/STA-E"

Date: 5/1/03

PROJECT GUIDELINES AND CRITERIA

for Surveying & Mapping Services - Section Corner Program

(Enter Project Name from Page 1 of the
Change Order or Supplemental Task Authorization Agreement)

As a supplement, or change, to the Project Guidelines and Criteria set forth in the Professional Services Agreement, or Service Provider Agreement, Exhibit "E", the COUNTY has established the following Guidelines, Criteria, Goals, Objectives, Constraints, Schedule, Budget, and/or Requirements which shall serve as a guide to the CONSULTANT, or SERVICE PROVIDER, in performing the professional services, tasks, or work to be provided pursuant to the professional services set forth hereinbefore in CHANGE ORDER or SUPPLEMENTAL TASK AUTHORIZATION AGREEMENT, Exhibit "CO/STA-A", attached hereto:

(If none, enter the word "None" in the space below.)

ITEM No. 1

None