

**LEE COUNTY BOARD OF COUNTY COMMISSIONERS**  
**AGENDA ITEM SUMMARY** **BLUE SHEET NO: 20031511-UTL**

**1. REQUESTED MOTION:**

**ACTION REQUESTED:**

Approve final acceptance, by Resolution, as a donation for one fire hydrant *servicing FIFTH THIRD BANK @ HEALTHPARK FL.* This is a Developer contributed asset project located northern most corner of Summerlin Road and Park Royal Drive.

**WHY ACTION IS NECESSARY:**

To provide fire protection to the recently constructed bank.

**WHAT ACTION ACCOMPLISHES:**

Places the fire hydrant into operation and complies with the Lee County Utilities Operations Manual.

**2. DEPARTMENTAL CATEGORY:**  
**COMMISSION DISTRICT #: 3**

C10B

**3. MEETING DATE:**

01-13-2004

**4. AGENDA:**

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

**5. REQUIREMENT/PURPOSE:**

- (Specify)*
- STATUTE \_\_\_\_\_
  - ORDINANCE \_\_\_\_\_
  - ADMIN. CODE \_\_\_\_\_
  - OTHER Res. \_\_\_\_\_

**6. REQUESTOR OF INFORMATION:**

- A. COMMISSIONER: \_\_\_\_\_
- B. DEPARTMENT: Lee County Public Works
- C. DIVISION/SECTION: Utilities Division
- BY: Rick Diaz, P. E. Utilities Director
- DATE: 12/24/03

**7. BACKGROUND:**


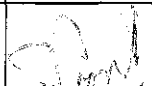

Fire hydrants do not require permission to construct by the Board, therefore, no previous Blue Sheet number is provided. The installation has been inspected for conformance to the Lee County Utilities Operations Manual. Satisfactory pressure and bacteriological testing has been completed. Record drawings have been received. Engineer's Certification of Completion has been provided---copy attached. Project Location Map---copy attached. Warranty has been provided---copy attached. Waiver of Lien has been provided---copy attached. Certification of Contributed Assets has been provided---copy attached. Potable water and sanitary sewer service is provided by Lee County Utilities via existing infrastructure located within the right-of-way of Park Royal Drive. 100% of the water connection/capacity fees have been paid.

No funds required.

SECTION 04    TOWNSHIP 465S    RANGE 24E    DISTRICT # 3    COMMISSIONER JUDAH

**MANAGEMENT RECOMMENDATIONS:**

**9. RECOMMENDED APPROVAL**

(A) DEPARTMENT DIRECTOR	(B) PURCH. OR CONTRACTS	(C) HUMAN RESOURCES	(D) OTHER	(E) COUNTY ATTORNEY	(F) BUDGET SERVICES				(G) COUNTY MANAGER
					OA	OM	Risk	GC	
 J. Lavender Date: 12/29/03	N/A Date:	N/A Date:	T.O. T. Osterhout Date: 12-24-03	 12/29/03 PM 12/29/03	12/29/03 PM 12/29/03	RK 12/29/03 SG 12/29/03	12/29/03 PM 12/29/03	12/29/03 PM 12/29/03	 J. Lavender Date: 12-29-03

**10. COMMISSION ACTION:**

- \_\_\_\_\_ APPROVED
- \_\_\_\_\_ DENIED
- \_\_\_\_\_ DEFERRED
- \_\_\_\_\_ OTHER

by CO. ATTY.  
 12/29/03  
 3:15 PM  
 CO. ATTY.  
 FORWARDED TO:  
 (4) Admin.  
 12-29-03

RECEIVED BY  
 COUNTY ADMIN: PM  
 12/29/03  
 COUNTY ADMIN  
 FORWARDED TO:  
 12/29/03

RESOLUTION NO. \_\_\_\_\_

RESOLUTION ESTABLISHING UTILITY ACCEPTANCE OF  
DEVELOPER CONTRIBUTED ASSETS  
IN LEE COUNTY, FLORIDA

WHEREAS, it is the desire of Fifth Third Bank, Florida, owner of record, to make a contribution to Lee County Utilities of water facilities (one fire hydrant), serving **"FIFTH THIRD BANK @ HEALTHPARK FLORIDA"**; and,

WHEREAS, Lee County Utilities requires proof of a Release of Lien, a Warranty (one-year) on all labor and materials, an accurate value of contributed assets, and right-of-way and/or easement-indemnity granted for all systems being contributed to Lee County utilities; and,

WHEREAS, all of the above information has been received and approved as complete by Lee County Utilities; and,

WHEREAS, Lee County Utilities has recommended to the Board of County Commissioners that the above-named system be accepted for ownership, operation, and maintenance.

NOW, THEREFORE, BE IT RESOLVED BY THE BOARD OF COUNTY COMMISSIONERS OF LEE COUNTY, FLORIDA, that the above facilities, for a contributed value of **\$2,500.00** is hereby ACCEPTED and acknowledged as an addition to Lee County Utilities.

THE FOREGOING RESOLUTION was offered by Commissioner \_\_\_\_\_ who moved for its adoption. The motion was seconded by Commissioner \_\_\_\_\_ and, upon being put to a vote, the vote was as follows:

- Commissioner Janes \_\_\_\_\_ (1)
- Commissioner St. Cerny: \_\_\_\_\_ (2)
- Commissioner Judah(C): \_\_\_\_\_ (3)
- Commissioner Coy: \_\_\_\_\_ (4)
- Commissioner Albion (V-C): \_\_\_\_\_ (5)

DULY PASSED AND ADOPTED this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

ATTEST:  
CHARLIE GREEN, CLERK

BOARD OF COUNTY COMMISSIONERS  
OF LEE COUNTY, FLORIDA

By: \_\_\_\_\_  
DEPUTY CLERK

By: \_\_\_\_\_  
CHAIRMAN

APPROVED AS TO FORM

\_\_\_\_\_  
OFFICE OF COUNTY OFFICE

COPY

LETTER OF COMPLETION

DATE: 10/08/03

Department of Lee County Utilities  
Division of Engineering  
Post Office Box 398  
Fort Myers, FL 33902

Gentlemen:

This is to certify that the fire hydrant located in  
Fifth Third Bank  
(Name of Development)

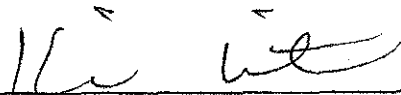
were designed by me and have been constructed in conformance with:  
**the approved plans and the approved specifications**

Upon completion of the work, we observed the following successful tests of the facilities:

**Bacteriological Test**

Very truly yours,

Kevin M. Winter, for Johnson Engineering, Inc.  
(Owner or Name of Corporation)

  
\_\_\_\_\_  
(Signature)

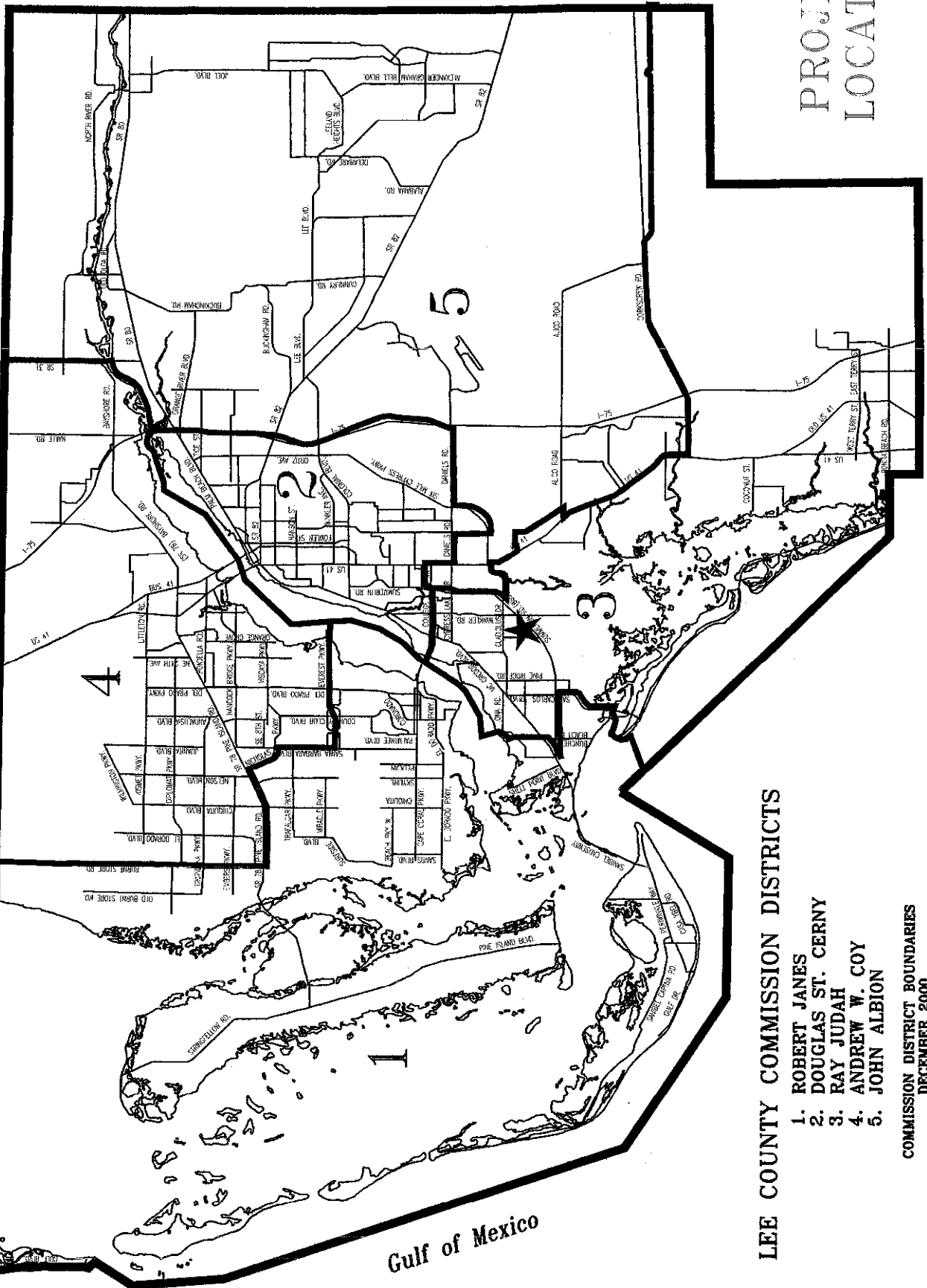
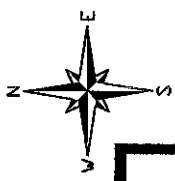
Project Engineer  
(Title)

(Seal of Engineering Firm)

FIFTH THIRD BANK @ HEALTHPARK FLORIDA  
 04-46-24-13-00000.0030  
 COMMISSION DISTRICT # 3 - RAY JUDAH

COPY

PROJECT  
 LOCATION



LEE COUNTY COMMISSION DISTRICTS

- 1. ROBERT JANES
- 2. DOUGLAS ST. CERNY
- 3. RAY JUDAH
- 4. ANDREW W. COY
- 5. JOHN ALBION

COMMISSION DISTRICT BOUNDARIES  
 DECEMBER 2000

Gulf of Mexico

COPY

FIFTH THIRD BANK AT HEALTHPARK FLORIDA

00000  
0010

SUMMERLIN RD (SR 869)

SUBJECT PROPERTY

34752  
073

00000  
0030

00000  
0040

RD (SR 869)

00000  
0100

04-46-24-13-00000.0030

00000  
0050

00000  
0060

000  
070

COPY

WARRANTY

THE UNDERSIGNED parties do hereby warrant and/or guaranty all work executed by the contractor on the water systems of Fifth Third Bank to be free from defects in material and workmanship for a period of one (1) year from the date of acceptance by the Lee County Board of County Commissioners. The undersigned parties further agree that they will, at their own expense, repair and replace all such defective work and all other work damaged by said defective work under this Warranty-Guaranty

It is furthermore understood that the consideration for the giving of this warranty and/or guaranty is the requirement by the General Conditions and Specifications under which the contract was let that such warranty and/or guaranty would be given.

James P. Murphy

(NAME OF OWNER/CONTRACTOR)

BY: James P. Murphy  
(SIGNATURE OF OWNER/CONTRACTOR)

FL Dr Lic.  
M 610455410490  
EXP 2-9-09

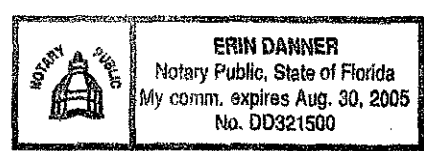
STATE OF FL )  
 ) SS:  
COUNTY OF LEE )

The foregoing instrument was signed and acknowledged before me this 19<sup>th</sup> day of SEPT, 2003 by James P. Murphy who has produced the following as identification - \_\_\_\_\_, and who did take an oath.

Erin Danner  
Notary Public Signature

Erin Danner  
Printed Name of Notary Public

(Notary Seal & Commission Number)



**COPIED**  
**WAIVER AND RELEASE OF LIEN**  
**UPON FINAL PAYMENT**

The undersigned lienor, in consideration of the final payment in the amount of Two Thousand Five Hundred and 00/100 dollars (\$2,500.00) hereby waives and releases its lien and right to claim a lien for labor, services, or materials furnished to Fifth Third Bank on the job of Fifth Third Bank to the following described property:

Fifth Third Bank water distribution system  
(Name of Development/Project) (Facilities Constructed)

Health Park Florida 04-46-24-13-00000.0030  
(Location) (Strap # or Section, Township & Range)  
(Please provide full name and location of development and a description of the utility system constructed).

*see Dr. LLC  
MB10455410490  
exp 2-9-09*

Dated on: September , 2003

By: James P. Murphy Owner  
(Signature of Authorized Representative)

J.P. Murphy, Inc.  
(Name of Firm or Corporation)

By: James P. Murphy  
(Print Name of Authorized Representative)

#2 Pepita Street  
(Address of Firm or Corporation)

Title: Owner

Ft. Myers Beach, FL 33931-  
(City, State & Zip Of Firm Or Corporation)

Phone #: (239)463-4806 Ext.

Fax#: (239)463-3872

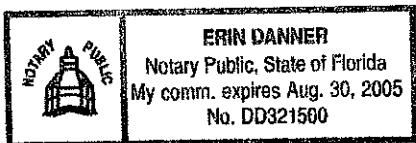
STATE OF FL )  
 ) SS:  
COUNTY OF LEE )

The foregoing instrument was signed and acknowledged before me this for ~~15~~ day of 9/19, 2003 by \_\_\_\_\_ who has produced the following as identification ✓, and who did take an oath.

Erin Danner  
(Notary Public Signature)

(Notary Seal & Commission Number)

Erin Danner  
(Printed Name of Notary Public)



COPY

**CERTIFICATION OF CONTRIBUTORY ASSETS**

PROJECT NAME: FIFTH THIRD BANK

STRAP NUMBER: 044624 13 00000.0030

LOCATION: HEALTH PARK FLORIDA

OWNER'S NAME: FIFTH THIRD BANK

OWNER'S ADDRESS: 999 VANDERBILT BEACH ROAD

OWNER'S ADDRESS: NAPLES, FL 34101-

TYPE UTILITY SYSTEM: WATER  
(list water, sewer and effluent reuse separately)

**DESCRIPTION AND COST OF MATERIAL, LABOR, AND SERVICES**

Please list each element of the system from the drop-down list provided.

<u>ITEM</u>	<u>SIZE</u>	<u>QUANTITY</u>	<u>UNIT</u>	<u>UNIT COST</u>	<u>TOTAL</u>
FIRE HYDRANT ASSEMBLY	6"	1.0	EA	\$2,500.00	\$2,500.00
<b><u>TOTAL</u></b>					<b>\$2,500.00</b>

(If more space is required, use additional forms(s)).



I do hereby certify that the quantities of material and services described above are a true and accurate representation of the as-installed cost of the system being contributed to Lee County and corresponds with the record drawings.

CERTIFYING: *REC'D - L.C. 11/04/03 2:47 P. 2-909*

X *James P. Murphy*  
(Signature of Certifying Agent)

JAMES P. MURPHY, OWNER  
(Name & Title of Certifying Agent)

J.P. MURPHY, INC.  
(Name of Firm or Corporation)

#2 PEPITA STREET  
(Address of Firm or Corporation)

FT. MYERS BEACH, FL 33931 -

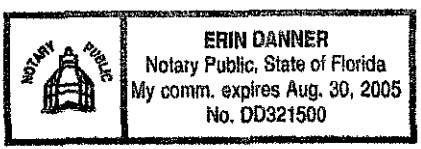
STATE OF FL )  
                  ) SS:  
COUNTY OF LEE )

The foregoing instrument was signed and acknowledged before me this 21 day of 9/19/2003 by \_\_\_\_\_ who has produced the following as identification - REC'D - L.C., and who did take an oath.

*Erin Danner*  
Notary Public Signature

Erin Danner  
Printed Name of Notary Public

DD321500  
Notary Commission Number



(NOTARY SEAL)