

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

Blue Sheet No: 20041632

**1. REQUESTED MOTION**

**ACTION REQUESTED:** Authorize an extension, from December 31, 2004, to May 30, 2005, for Contract C-2421 between the Board of County Commissioners and Community Housing & Resources, Inc. (CHR).

**WHY ACTION IS NECESSARY:** This contract extension is technical in nature and will allow for more time for CHR to complete its contractual obligations to the county.

**WHAT ACTION ACCOMPLISHES:** Extends the grant award agreement, allowing additional time for CHR to use SHIP funds to construct Woodhaven – a 12 unit below market rate rental housing project on Sanibel.

**2. DEPARTMENTAL CATEGORY:** 04  
**COMMISSION DISTRICT #:** CW C4E

**3. MEETING DATE:** 12-14-2004

**4. AGENDA:**  
 CONSENT  
 ADMINISTRATIVE  
 APPEALS  
 PUBLIC  
 WALK ON  
 TIME REQUIRED:

**5. REQUIREMENT/PURPOSE:**  
(Specify)  
 STATUTE  
 ORDINANCE  
 ADMIN. CODE  
 OTHER

**6. REQUESTOR OF INFORMATION:**  
**A. COMMISSIONER** N/A  
**B. DEPARTMENT** Community Development  
**C. DIVISION** Planning  
 BY: Paul O'Connor, AICP, Planning Director  
 ROC 12/01/04

**7. BACKGROUND:**

Community Housing & Resources, Inc. (CHR) is a non-profit housing provider providing affordable rental housing in Lee County. The Board of County Commissioners approved a total of \$390,000 in SHIP funds for construction of Woodhaven – a 12 unit below market rate rental housing project on Sanibel. The grant agreement C-2421 (\$90,000) expires on December 31, 2004. However, due to the delays caused by recent hurricanes, CHR has requested an extension of its contract C-2421 to May 30, 2005.

Staff recommends that this amendment be granted and finds that: it is in compliance with the SHIP rules and regulations; it will ensure a timely completion of this project; and it fulfills the terms of the grant award agreement.

No additional SHIP dollars are required above those already granted.  
 Attachment: Proposed amendment to Contract C-2421.

**8. MANAGEMENT RECOMMENDATIONS:**

**9. RECOMMENDED APPROVAL:**

A Department Director	B Purchasing or Contracts	C Human Resources	D Other	E County Attorney	F Budget Services			G County Manager
Mary Fisher	Cindy Lopez 12/2/04	N/A	N/A	[Signature] 12/2/04	OA 12/2/04	QM 12/2/04	Risk 12/2/04	GC 12/2/04

**10. COMMISSION ACTION:**

APPROVED  
 DENIED  
 DEFERRED  
 OTHER

Rec. by CoAtty  
 Date: 12/2/04  
 Time: 9:20  
 Forwarded To:  
 Admin 12/2

RECEIVED BY  
 COUNTY ADMIN: [Signature]  
 12/2/04  
 COUNTY ADMIN  
 FORWARDED TO: [Signature]  
 12/2/04  
 4:30 PM

AMENDMENT TO THE  
AGREEMENT BETWEEN THE  
LEE COUNTY BOARD OF COUNTY COMMISSIONERS  
AND  
COMMUNITY HOUSING AND RESOURCES, INC. (CHR)

WITNESSETH:

WHEREAS, the referenced Parties to Contract No. C-2421 desire to amend the Contract pursuant to its Section I.A.

NOW, THEREFORE IN CONSIDERATION OF THE MUTUAL PROMISES STATED HEREIN, the referenced contract Section I.A. is amended as follows with new language underlined and amended language struck-through:

**EXHIBIT A**

- a. The Project, as approved for grant assistance, shall consist of the following authorized scope of Project work:
- Supplemental assistance for the construction of 12 rental units at Woodhaven, 7 very low income (\$35,000 = \$5,000 x 7 units), 3 low income (\$15,000 = \$5,000 x 3 units), 1 low income (\$15,000 = \$15,000 x 1 unit), and 1 moderate income (\$25,000 = \$25,000 x 1 unit) rental households to be completed by May 30, 2005 ~~December 31, 2004~~.

The Parties hereby executed this Amendment on \_\_\_\_\_, 2004.

CHARLIE GREEN, CLERK

BOARD OF COUNTY COMMISSIONERS  
LEE COUNTY, FLORIDA

BY \_\_\_\_\_  
DEPUTY CLERK

BY: \_\_\_\_\_  
CHAIRMAN

Judith Earle  
Witness (Signature)

BY: Jenise A. Hyatt  
Community Housing and Resources, Inc.

Judith Earle  
Witness (Name, Address)  
6962 Kimberly T  
Ft. Myers, FL 33919

Title: Executive Director

FEIN#: 59-2037788

Carole S. Gaidowski  
Witness (Signature)

Carole S. Gaidowski  
Witness (Name, Address)  
6725 Winkler Rd, 0103  
Ft. Myers, FL 33919

APPROVED AS TO FORM  
OFFICE OF COUNTY ATTORNEY

BY: \_\_\_\_\_  
Lee County Attorney's Office

<b>ACORD™ CERTIFICATE OF LIABILITY INSURANCE</b>		DATE (MM/DD/YYYY) 11/30/04
<b>PRODUCER</b> Sawyer Insurance, Inc. PO Box 9284 Fort Myers, FL 33902	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
<b>INSURED</b> Community Housing & Resources, Inc. 800 Dunlop Road Sanibel, FL 33957	<b>INSURERS AFFORDING COVERAGE</b> INSURER A: Bankers Insurance Company INSURER B: Everest National Insurance Company INSURER C: INSURER D: INSURER E:	<b>NAIC #</b>     

**COVERAGES**

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS								
A		<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CPP 09-4402554-05	05/19/04	05/19/05	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$								
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B		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER	2700008432941	01/01/05	01/01/06	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">WC STATUTORY LIMITS</td> <td style="width: 50%;">OTHER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$ 100,000</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$ 100,000</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$ 500,000</td> </tr> </table>	WC STATUTORY LIMITS	OTHER	E.L. EACH ACCIDENT	\$ 100,000	E.L. DISEASE - EA EMPLOYEE	\$ 100,000	E.L. DISEASE - POLICY LIMIT	\$ 500,000
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**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**  
 Certificate Holder is Additional Insured in regards to General Liability Only.  
  
 30-Day Notice of cancellaiton applies to Workers' Compensation.

<b>CERTIFICATE HOLDER</b> Lee County Board of County Commissioners Attention: Risk Management PO B ox 398 Fort Myers, FL 33901	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.  AUTHORIZED REPRESENTATIVE Mary Louise Self <i>Mary L. Self</i>
--	---

ACORD 25 (2001/08)

*Attn: Susan Strom*  
*Gen # 479-8319*



OLD REPUBLIC SURETY COMPANY  
P O BOX 4668  
WINTER PARK, FL 32793-4668

### CONTINUATION CERTIFICATE

BOND NUMBER	BOND DESCRIPTION	BOND AMOUNT	EFFECTIVE DATE	EXPIRATION DATE
OFL- 444835	BLANKET FIDELITY	100,000	9/07/2004	9/07/2005

**PRINCIPAL**  
 COMMUNITY HOUSING & RESOURCES, INC.  
 800 DUNLOP ROAD  
 SANIBEL, FL 33957

**OBIGEE**  
 SAME AS THE  
 PRINCIPAL

THIS BOND CONTINUES IN FORCE TO THE ABOVE EXPIRATION DATE CONDITIONED AND PROVIDED THAT THE LOSSES OR RECOVERIES ON IT AND ANY AND ALL ENDORSEMENTS SHALL NEVER EXCEED THE PENALTY SET FORTH IN THE BOND AND WHETHER THE LOSSES OR RECOVERIES ARE WITHIN THE FIRST AND/OR SUBSEQUENT OR WITHIN ANY EXTENSION OR RENEWAL PERIOD, PRESENT, PAST OR FUTURE. ALL OTHER TERMS AND CONDITIONS REMAIN UNCHANGED.

SIGNED AND DATED THIS SEVENTH DAY OF SEPTEMBER, 2004

92-2992  
 SAWYER INSURANCE, INC.  
 1412 ROYAL PALM SQ. BLVD-#104  
 P O BOX 9284  
 FORT MYERS, FL 33902

OLD REPUBLIC SURETY COMPANY  
SURETY

By \_\_\_\_\_

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 Attention: Risk Management  
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AUTHORIZED REPRESENTATIVE  
 Mary Louise Self *Mary Louise Self*

*Attn: Susan Strum  
 Carl # 479-8319*





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