

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

Blue Sheet No. 20050747

1. ACTION REQUESTED/PURPOSE:

Request Board approve Change Order #3 to RFP 03-03 ADA Paratransit Services, Contract No. 2534, with Goodwheels, Inc. to change the fee schedule rates through June 30, 2006. The rates paid Goodwheels remain the same, however the amount paid to Lee County from Goodwheels will increase \$2 per trip. Estimated annual expenditure is \$120,000.

2. WHAT ACTION ACCOMPLISHES:

Goodwheels, Inc. and Lee County Transit will be able to transport ADA and non-ADA passengers to provide a more efficient and cost effective coordinated transportation system within Lee County.

3. MANAGEMENT RECOMMENDATION: Recommend Approval of Change Order #3.

4. Departmental Category: <u>C6A</u>		5. Meeting Date: <u>06-28-2005</u>
6. Agenda: <input checked="" type="checkbox"/> Consent <input type="checkbox"/> Administrative <input type="checkbox"/> Appeals <input type="checkbox"/> Public <input type="checkbox"/> Walk-On	7. Requirement/Purpose: (specify)	
	<input type="checkbox"/> Statute	<input type="checkbox"/>
	<input type="checkbox"/> Ordinance	<input type="checkbox"/>
	<input type="checkbox"/> Admin. Code	<input type="checkbox"/>
	<input type="checkbox"/> Other	<input type="checkbox"/>
		8. Request Initiated:
		Commissioner <u>All Districts</u>
		Department <u>Independent Division</u>
		Division <u>Lee Tran</u>
		By: <u>Steven L. Myers, Director</u>

9. Background:

The Board awarded RFP 03-03 to Goodwheels, Inc and a Notice to Proceed was issued on July 1, 2003 through June 30, 2006. On January 18, 2005, the Board approved Change Order #2 increasing the rates until March 31, 2005, and directed Staff to provide the service in house. On February 1, 2005, LeeTran began providing ADA service with county personnel. This change order allows for trip coordination. Approximately 800 ADA passengers would be transported by Goodwheels, Inc. and approximately 400 non-ADA passengers would be transported by LeeTran. The actual monthly expenditure is \$10,000, which is offset by a credit from Goodwheels for reimbursement of passenger fares and passenger trips that LeeTran provides for them. The net amount paid to Goodwheels each month is approximately \$2,000.

Funds have been budgeted in KI5440148600.503490.08 (Independent Division, Transit Operating, Other Contracted Service, ADA.)

10. Review for Scheduling:

Department Director	Purchasing or Contracts	Human Resources	Other	County Attorney	Budget Services				County Manager/P.W. Director
					Analyst	Risk	Grants	Mgr.	
<u>Steven L. Myers</u> 6/13/05	<u>[Signature]</u>	N/A	N/A		<u>[Signature]</u> 6/16/05	<u>[Signature]</u> 6/16/05	<u>[Signature]</u> 6/16/05	<u>[Signature]</u> 6/16/05	<u>[Signature]</u>

11. Commission Action:

- Approved
- Deferred
- Denied
- Other

Rec. by CoAtty

Date: 6/14/05

Time: 9:00 AM

Forwarded To:
Co. Mgr.

6/14/05 9:30 AM

RECEIVED BY
COUNTY ADMIN: [Signature]

6-14-05

9:30

COUNTY ADMIN
FORWARDED TO: [Signature]

[Signature]

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

Change Order
 Supplemental Task Authorization

NO.: 3

(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: ADA Paratransit Services

CONSULTANT: Goodwheels, Inc. PROJECT NO.: _____

SOLICIT NO.: RFP-03-03 CONTRACT NO.: 2534 ACCOUNT NO.: KI5440148600.503490.08

REQUESTED BY: Steven L. Myers, LeeTran DATE OF REQUEST: April 1, 2005

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: April 1, 2005
- EXHIBIT "CO/STA-B: COMPENSATION & METHOD OF PAYMENT: DATED: April 1, 2005
- EXHIBIT "CO/STA-C: TIME AND SCHEDULE OF PERFORMANCE: DATED: April 1, 2005
- EXHIBIT "CO/STA-D: CONSULTANT'S/PROVIDERS ASSOCIATED
SUB-CONSULTANT(S)/SUB-CONTRACTORS: DATED: April 1, 2005
- EXHIBIT "CO/STA-E: PROJECT GUIDELINES AND CRITERIA: DATED: April 1, 2005

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

RECOMMENDED:

By: Steven L Myers 6/13/05
Department Director Date

ACCEPTED:

By: Gayle Bryant
Consultant/Provider
(Print Name) G. L. BRYANT

COUNTY APPROVAL:

By: _____
Department Director
(Print Name) _____
(Under \$25,000)

By: Cindy Hogan 6/16/05
Contracts Mgr Date

Date Accepted: 15 JUN 05

Date Approved: _____

Corporate Seal

APPROVED:

By: _____
*County Attorney's Office Date

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

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

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

- CHANGE ORDER AGREEMENT No. 3
or
 SUPPLEMENTAL TASK AUTHORIZATION No. _____

EXHIBIT "CO/STA-A"

Date: April 1, 2005

SCOPE OF PROFESSIONAL SERVICES

for RFP 03-03 ADA PARATRANSIT SERVICES

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:

This change order provides for coordination of trips between the CTC, Goodwheels, Inc., and LeeTran to provide a more efficient transportation network, adds a task for billing fares, increases the trip cost paid to LeeTran by Goodwheels by \$2 per trip, and extends the contract through June 30, 2006.

All other terms and conditions apply, as written in the original agreement dated May 13, 2003.

*Attach additional pages, if needed.

CHANGE ORDER AGREEMENT No. 3
 or
 SUPPLEMENTAL TASK AUTHORIZATION No.

EXHIBIT "CO/STA-B"

Date: April 1, 2005

COMPENSATION AND METHOD OF PAYMENT

for RFP 03-03 ADA Paratransit Services

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.)
Task #	ADA Passengers transported by Goodwheels	Unit Cost		
1a	Individual Ambulatory	\$ 24.10		WIPP
1b	Individual Wheelchair	\$ 29.13		WIPP
1c	Group Ambulatory	\$ 16.55		WIPP
1d	Group Wheelchair	\$ 20.31		WIPP
	Non-ADA Passengers transported by LeeTran			
2a	Individual Ambulatory	\$ (24.10)		WIPP
2b	Individual Wheelchair	\$ (29.13)		WIPP
2c	Group Ambulatory	\$ (16.55)		WIPP
2d	Group Wheelchair	\$ (20.31)		WIPP
	Passenger Fares			
3a	Fares \$2	\$ 2.00		
3b	Fares \$1	\$ 1.00		WIPP
3c	Fare Credit \$2	\$ (2.00)		WIPP
3d	Fare Credit \$1	\$ (1.00)		WIPP
TOTAL				

(Unless list is continued on next page)

- CHANGE ORDER AGREEMENT No. 3
or
 SUPPLEMENTAL TASK AUTHORIZATION No. _____

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
TOTAL					

CHANGE ORDER AGREEMENT No. 3
 or
 SUPPLEMENTAL TASK AUTHORIZATION No. _____

EXHIBIT "CO/STA-C"

TIME AND SCHEDULE OF PERFORMANCE

Date: April 1, 2005

for RFP 03-03 ADA PARATRANSIT SERVICES

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
1a 1b 1c 1d	ADA Passengers transported by Goodwheels Individual Ambulatory Individual Wheelchair Group Ambulatory Group Wheelchair		Effective April 1, 2005, thru June 3, 2006.
2a 2b 2c 2d	Non-ADA Passengers transported by LeeTran Individual Ambulatory Individual Wheelchair Group Ambulatory Group Wheelchair		
3a 3b 3c 3d	Passenger Fares Fares \$2 Fares \$1 Fare Credit \$2 Fare Credit \$1		

CHANGE ORDER AGREEMENT No. 3
 SUPPLEMENTAL TASK AUTHORIZATION No. _____

EXHIBIT "CO/STA-D"

Date: April 1, 2005

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

for RFP -3-03 ADA PARATRANSIT SERVICES

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
	NONE					

CHANGE ORDER AGREEMENT No. 3

SUPPLEMENTAL TASK AUTHORIZATION No. _____
or

EXHIBIT "CO/STA-E"

Date: April 1, 2005

PROJECT GUIDELINES AND CRITERIA

for RFP 03-03 ADA PARATRANSIT SERVICES

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