

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
**LOCAL AGENCY PROGRAM
SUPPLEMENTAL AGREEMENT**

525-010-32
PROGRAM MANAGEMENT
08/19

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SUPPLEMENTAL NO.

7

FEDERAL ID NO. (FAIN)

6239-028-U; D620-073-B

CONTRACT NO.

ANT08

FEDERAL AWARD DATE

11/23/2004

FPN

250548-4-38-01; 250548-4-68-02

RECIPIENT DUNS NO.

079864898

Recipient, City of Key West, desires to supplement the original Agreement entered into and executed on December 12, 2004 as identified above. All provisions in the original Agreement and supplements, if any, remain in effect except as expressly modified by this supplement.

The changes to the Agreement and supplements, if any, are described as follows:

PROJECT DESCRIPTION

Name SR A1A/S. ROOSEVELT FROM BERTHA ST (STA 0+00) TO RIGGS WILDLIFE PRESER

Length 0.777 miles

Termini From Bertha Street to East End of Smathers Beach

Description of Work:

This project consists of the complete reconstruction of SR A1A (South Roosevelt Boulevard) from Bertha Street to the east end of Smathers Beach in the City of Key West. As part of this project, new drainage will be provided as well as signing and pavement markings.

Reason for Supplement and supporting engineering and/or cost analysis:

The attached "Adjusted Exhibit "B" Schedule of Financial Assistance" replaces the "Exhibit "B" Schedule of Financial Assistance", which was attached to Supplemental Agreement #6 executed on 12/8/2020.

This supplemental agreement is necessary to update Adjusted Exhibit "B" to reflect the removal of the phase 68-02 (FM# 250548-4-68-02) and the funds associated with the phase (\$180,000). As such, FAIN D620-073-B was dropped. Post design services will be performed under an FDOT contract.

This agreement incorporates Exhibit "F" Contract Payment Requirements and retains Attachment "A" – Local Agency Program Agreement and all Exhibits attached to Supplemental Agreement #6.

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ADJUSTED EXHIBIT "B" SCHEDULE OF FINANCIAL ASSISTANCE

RECIPIENT NAME & BILLING ADDRESS: City of Key West
1300 White Street
Key West FL 33040- 4854

FINANCIAL PROJECT NUMBER: 250548-4-38-01; 250548-4-68-02

PHASE OF WORK By Fiscal Year	FUNDING					
	(1) PREVIOUS TOTAL PROJECT FUNDS	(2) ADDITIONAL PROJECT FUNDS	(3) CURRENT TOTAL PROJECT FUNDS	(4) TOTAL LOCAL FUNDS	(5) TOTAL STATE FUNDS	(6) TOTAL FEDERAL FUNDS
Design						
FY: 2005 (Local Agency Program)	\$500,000.00		\$500,000.00			\$500,000.00
FY: 2009 (Local Agency Program)	\$96,940.00		\$96,940.00			\$96,940.00
FY: 2014 (Local Agency Program)	\$223,154.00		\$223,154.00			\$223,154.00
FY: 2016 (Local Agency Program)	\$60,288.00		\$60,288.00			\$60,288.00
FY: 2018 (Local Agency Program)	\$34,341.00		\$34,341.00			\$34,341.00
FY: 2019 (Local Agency Program)	\$162,802.00		\$162,802.00			\$162,802.00
FY: 2021 (Local Agency Program)	\$295,319.00		\$295,319.00			\$295,319.00
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total Design Cost	\$1,372,844.00	\$ 0.00	\$1,372,844.00	\$ 0.00	\$ 0.00	\$1,372,844.00
Right-of-Way						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total Right-of-Way Cost	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Construction						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total Construction Cost	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Construction Engineering and Inspection (CEI)						
FY: 2024 (Local Agency Program)	\$180,000.00	(\$180,000.00)				
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total CEI Cost	\$180,000.00	(\$180,000.00)	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
(Insert Phase)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
FY: (Insert Program Name)						
Total Phase Costs	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
TOTAL COST OF THE PROJECT	\$1,552,844.00	(\$180,000.00)	\$1,372,844.00	\$ 0.00	\$ 0.00	\$1,372,844.00

COST ANALYSIS CERTIFICATION AS REQUIRED BY SECTION 216.3475, FLORIDA STATUTES:

I certify that the cost for each line item budget category has been evaluated and determined to be allowable, reasonable, and necessary as required by Section 216.3475, F.S. Documentation is on file evidencing the methodology used and the conclusions reached.

Xiomara Nunez MBA, PMP
District Grant Manager Name

Signature Date

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
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IN WITNESS WHEREOF, the parties have executed this Agreement on the date last ascribed herein.

RECIPIENT City of Key West

STATE OF FLORIDA
DEPARTMENT OF TRANSPORTATION

By: _____

Name:

Title:

By: _____

Name:

Title:

Date: _____

Legal Review:

EXHIBIT F**CONTRACT PAYMENT REQUIREMENTS**
Florida Department of Financial Services, Reference Guide for State Expenditures
Cost Reimbursement Contracts

Invoices for cost reimbursement contracts must be supported by an itemized listing of expenditures by category (salary, travel, expenses, etc.). Supporting documentation shall be submitted for each amount for which reimbursement is being claimed indicating that the item has been paid. Documentation for each amount for which reimbursement is being claimed must indicate that the item has been paid. Check numbers may be provided in lieu of copies of actual checks. Each piece of documentation should clearly reflect the dates of service. Only expenditures for categories in the approved agreement budget may be reimbursed. These expenditures must be allowable (pursuant to law) and directly related to the services being provided.

Listed below are types and examples of supporting documentation for cost reimbursement agreements:

Salaries: Timesheets that support the hours worked on the project or activity must be kept. A payroll register, or similar documentation should be maintained. The payroll register should show gross salary charges, fringe benefits, other deductions and net pay. If an individual for whom reimbursement is being claimed is paid by the hour, a document reflecting the hours worked times the rate of pay will be acceptable.

Fringe benefits: Fringe benefits should be supported by invoices showing the amount paid on behalf of the employee, e.g., insurance premiums paid. If the contract specifically states that fringe benefits will be based on a specified percentage rather than the actual cost of fringe benefits, then the calculation for the fringe benefits amount must be shown. Exception: Governmental entities are not required to provide check numbers or copies of checks for fringe benefits.

Travel: Reimbursement for travel must be in accordance with s. 112.061, F.S., which includes submission of the claim on the approved state travel voucher along with supporting receipts and invoices.

Other direct costs: Reimbursement will be made based on paid invoices/receipts and proof of payment processing (cancelled/processed checks and bank statements). If nonexpendable property is purchased using state funds, the contract should include a provision for the transfer of the property to the State when services are terminated. Documentation must be provided to show compliance with DMS Rule 60A-1.017, F.A.C., regarding the requirements for contracts which include services and that provide for the contractor to purchase tangible personal property as defined in s. 273.02, F.S., for subsequent transfer to the State.

Indirect costs: If the contract stipulates that indirect costs will be paid based on a specified rate, then the calculation should be shown. Indirect costs must be in the approved agreement budget and the entity must be able to demonstrate that the costs are not duplicated elsewhere as direct costs. All indirect cost rates must be evaluated for reasonableness and for allowability and must be allocated consistently.

Contracts between state agencies may submit alternative documentation to substantiate the reimbursement request, which may be in the form of FLAIR reports or other detailed reports.

The Florida Department of Financial Services, online Reference Guide for State Expenditures can be found at this web address <https://www.myfloridacfo.com/Division/AA/Manuals/documents/ReferenceGuideforStateExpenditures.pdf>.