

RESOLUTION NO. 18-047

A RESOLUTION OF THE CITY COMMISSION OF THE CITY OF KEY WEST, FLORIDA, APPROVING THE ATTACHED "DEP AGREEMENT NO. LP44031 CHANGE ORDER NO. 1" TO THE "DEP AGREEMENT NO. 44031, STATE OF FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION, DIVISION OF WATER RESTORATION ASSISTANCE GRANT AGREEMENT" TO CHANGE THE NAME OF THE GRANT MANAGER IN PARAGRAPH 17; AUTHORIZING THE CITY MANAGER TO EXECUTE THE NECESSARY DOCUMENTS; PROVIDING FOR AN EFFECTIVE DATE

WHEREAS, in Resolution No. 17-124, the City Commission approved a DEP Agreement for Federal funding for Key West Stormwater Improvements.

NOW, THEREFORE, BE IT RESOLVED BY THE CITY COMMISSION OF THE CITY OF KEY WEST, FLORIDA, AS FOLLOWS:

Section 1: That the attached "DEP Agreement No. LP44031, Change Order No. 1" is hereby approved, to amend the Grant Manager named in Paragraph 17.

Section 2: That the City Manager is authorized to execute any necessary documents, upon advice and consent of the City Attorney.

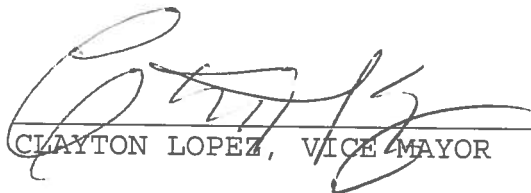
Section 3: That this Resolution shall go into effect immediately upon its passage and adoption and authentication by the signature of the Presiding Officer and the Clerk of the Commission.

Passed and adopted by the City Commission at a meeting held
this 6th day of February, 2018.

Authenticated by the Presiding Officer and Clerk of the
Commission on 7th day of February, 2018.

Filed with the Clerk on February 7, 2018.

Mayor Craig Cates	<u>Absent</u>
Vice Mayor Clayton Lopez	<u>Yes</u>
Commissioner Sam Kaufman	<u>Yes</u>
Commissioner Richard Payne	<u>Yes</u>
Commissioner Margaret Romero	<u>Yes</u>
Commissioner Billy Wardlow	<u>Yes</u>
Commissioner Jimmy Weekley	<u>Yes</u>


CLAYTON LOPEZ, VICE MAYOR

ATTEST:


CHERYL SMITH, CITY CLERK

DEP AGREEMENT No. LP44031
CHANGE ORDER NO. 1

CITY OF KEY WEST

This agreement entered into on May 17, 2017, is hereby revised as follows:

WHEREAS, the Department's Grant Manager requires update.

NOW, THEREFORE, in consideration of the mutual benefits to be derived herefrom, the DEPARTMENT and the GRANTEE do hereby agree as follows:

1. Paragraph 17 of the Agreement, is deleted and replaced as follows:

The Department's Grant Manager for this Agreement is identified below.

Arlene Acevedo, or Successor
Florida Department of Environmental Protection
Division of Water Restoration Assistance
3900 Commonwealth Boulevard
Tallahassee, Florida 32399-3000
Phone: (850) 245-2819
Email: Arlene.Acevedo@dep.state.fl.us

The Grantee's Grant Manager for this Agreement is identified below.

Carolyn Sheldon, or Successor
City of Key West
Senior Grants Administrator
PO Box 1409
Key West, Florida 33041
Phone: (305) 809-3741
Email: CSheldon@cityofkeywest-fl.gov

2. All other terms and conditions of the Agreement shall remain unchanged.

IN WITNESS WHEREOF, the parties have caused these presents to be duly executed, the day and year, last written below.

CITY OF KEY WEST

FLORIDA DEPARTMENT OF
ENVIRONMENTAL PROTECTION

By: Carolyn Sheldon
Grant Manager

By: _____
Program Administrator

Date: 2/8/18

Date: _____

FEID No. 59-6000346

Arlene Acevedo, DEP Grant Manager