

## **Agency Amendment Form**

FDOT Project/Program Manager: P	Date of Request: 03/08/2018									
	ansportation, 605 Suwannee Street, M.S	5. 37, Tallahassee, F	lorida 32399	-0450						
Agency: Northwest Florida Water I District (NWFWMD))	Management Start Date: 04/15/2009	Start Date: 04/15/2009		End Date: 06/05/2018						
Agreement Type: Funding	Contract Number: 8DN58	Contract Number: 8DN58		Amendment Number: 4						
Vendor Number: F59131621024	Financial Number: 41506	Financial Number: 415064-3-28-07								
Purpose of Amendment (check all a	applicable terms):									
Request for No-Cost Time Extension thru: <u>06/05/2020</u>				Request fo	or Overtime					
Total amount for Advance Pay	is increased/decreased by:			Request fo	or Travel					
☐ Total amount for Compensation	on is increased/decreased by:			Request fo	or Equipment Autho	rization				
Request for Personnel Approve	ai		$\boxtimes$	Request to	Modify Agreemen	t Provisions				
Request for Sub-Consultant				Other (exp	plain below)					
Approval of above selections requested. The following is justification/explanation of the requested action:  The Funding Agreement (FA) between NWFWMD, Florida Department of Transportation (FDOT), and Federal Highway Administration (FHWA), which became effective June 6, 2011, which was subsequently amended to remove FHWA, is requesting a No-Cost Time Extension until June 5, 2020.										
Article III, Paragraph A, which authorizes reimbursement to NWFWMD for a five (5) year term, is amended to authorize reimbursement to NWFWMD for a nine (9) year term through June 5, 2020.										
Article IV, Paragraph A, which limits the term to 5 years, unless terminated sooner, is amended to limit the terms to 9 years. The intent of this modification is to authorize and maintain services supporting this contract through June 5, 2020.										
In addition, Article V Project Officers (A and B) are amendment to read as follows:										
A. Northwest Florida Water Janet Strutzel or designee 81 Water Management Di Havana Florida 32333 Tel: (850) 539-2641 Fax: (850) 539-2777										
B. Florida Department of Tra Peter McGilvray or designa 605 Suwannee Street, MS Tallahassee Florida 32399- Tel: (850) 414-4316 Fax: (850) 414-4443	ee 37									
	on is necessary for the operation of this pro	niect and is in compl	iance with the	tarms of th	o avacuted assesses	at //				
ETAT Authorized Agency Signature:	But the		ance with the	ternis or tr	3/19/18	nt."				
(signature)	(titlé)	0		(date)						
Compensation Element Description	Method of Compensation	Previous Amount	This Amer		Subtotal	Check if Estimate				
			This Amendn	nent Total	Agency Agreement	Total				
	\$NO Change	NO Change \$ NO Changes								
Other Comments/Notes:										
"I certify to that to the best of my knother continued operation of this agree	owledge and belief, the above requested	action is not in vio	lation of the	terms of th	e agreement and is	necessary for				



## STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

## **Agency Amendment Form**

Department Action:	Ø	APPROVED	DIS	APPROVE				
FDOT Authorized Sig	nature:							
(signature)	morn	State 6	invibracata)	Quality & Pe	rforminge Aminotator (date)	3/20/2018		
FHWA Authorized Signature	gnature (required only	if amendment char	nges agreement s	cope or increases fu	inding):			
NOT REQUIRED – FHWA Removed from Agreement with execution of NEPA Assignment Amendment Contract BDN58 Amendment A3 on 5/16/2017								
(signature)		(title)			(date)			

Attachments: