



JUL 08 2014

***Florida Department of Transportation***

**RICK SCOTT  
GOVERNOR**

605 Suwannee Street  
Tallahassee, FL 32399-0450

**ANANTH PRASAD, P.E.  
SECRETARY**

July 2, 2014

Ms. Carol Lynch, CAP  
Regulatory Support Bureau  
Regulation Division  
Southwest Florida Water Management District  
2379 Broad Street  
Brooksville, Florida 34604-6899

Re: Exhibit A-5 to SWFWMD Funding Agreement  
Contract Number BDF04  
Vendor Number: F590965067002  
Financial Number: 41506432809

Dear Ms. Lynch:

Attached is a signed original of Exhibit A-5 regarding the subject Funding Agreement. The Exhibit -5 extends Contract BDF04 from October 1, 2014 through March 31, 2015. This Exhibit will not additional funding to BDF04. Please append this approved Exhibit to the Funding Agreement.

If you have any questions, or need any additional information, please contact me at 850-414-5330 or by e-mail at [petaer.mcgilvray@dot.state.fl.us](mailto:petaer.mcgilvray@dot.state.fl.us). If I am not available, please contact Mary Harger at 850-414-5319 or by e-mail at [mary.harger@dot.state.fl.us](mailto:mary.harger@dot.state.fl.us).

Sincerely,

Peter McGilvray  
Project Screening & Technologies Administrator

PM/mh

Attachment

cc: Buddy Cunill  
David Rae  
Marjorie Bixby

### EXHIBIT A – Modification to Agreement

Peter McGilvray  
FDOT Project/Program Manager

May 20, 2014  
Date

Florida Department of Transportation  
605 Suwannee Street, M.S. 37  
Tallahassee, Florida 32399-0450  
Address

RE: Contract Number: BDF04  
Request Number: 5

Vendor Number: F590965067002  
Financial Number: 41506432809

Action Request: ☐ Personnel Approval ☐ Increased Compensation  
☐ Overtime ☐ Relocation  
☐ Travel ☐ Sub-Consultant  
☐ Equipment Authorization ☒ Time Extension  
☐ Increased Advance Pay

Approval of the above is requested. The following is justification/explanation of the requested action:

In order to maintain services and complete the negotiations on the new 5-year Funding Agreement for Southwest Florida Water Management District (SWFWMD), a 6 month time extension from October 1, 2014 through March 31, 2015 is requested. This is a no-cost time extension and will not require an increase in the funding amount of the Funding Agreement.

"I certify that the above requested action is necessary for the operation of this project and is in compliance with the terms of the project agreement."

  
ETAT Authorized Agency Signature/Date

Department Action

☒ APPROVED

☐ DISAPPROVE

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

"I certify to that to the best of my knowledge and belief, the above requested action is not in violation of the terms of the project agreement and is necessary for the operation of this project."

  
FDOT Authorized Signature/Date

  
FHWA Authorized Signature/Date

DISTRICT APPROVAL	INITIALS	DATE
LEGAL	<u>NAM</u>	<u>6/9/14</u>
RISK MGMT	<u>NIA</u>	
CONTRACTS	<u>gmr</u>	<u>6/10/14</u>
BUREAU CHIEF	<u>gmr</u>	<u>6-13-14</u>
DIRECTOR	<u>gmr</u>	<u>6/10/14</u>
GOVERNING BOARD	<u>NIA</u>	<u>gmr</u>