

Agency Amendment Form

FDOT Project/Program Manager: Peter McGilvray				Date of Request: 05/12/2022			
Address: Florida Department of Transportation, 605 Suwannee St., M.S. 37, Tallahassee, FL 32399-0450							
_	ncy: Northwest Florida Water Marict (NWFWMD)	anagement Start Date: 6/6/2011	Start Date: 6/6/2011		End Date: 06/05/2022		
Agreement Type: Reimburse		Contract Number: BDN58	Contract Number: BDN58		Amendment Number: 7		
Ven	dor Number: F59131621024	Financial Number: 415064-	Financial Number: 415064-3-28-07				
Purpose of Amendment (check all applicable terms):							
	Request for No-Cost Time Exten	nsion through: <u>06/05/2023</u>	h: <u>06/05/2023</u>		Request for Overtime		
	Total amount for Advance Pay is	s increased/decreased by:	'decreased by:		Request for Travel		
	Total amount for Compensation	is increased/decreased by:	d/decreased by:		Request for Equipment Authorization		
	Request for Personnel Approval				Request to Modify Agreement Provisions		
Request for Sub-Consultant				Other (explain below)			
Approval of above selections requested. Provide 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 to the agreement until June 5, 2023.							
Article III, Paragraph A, which authorizes reimbursement to NWFWMD for five (5) year term, subsequently in Amendment 6 amended for an eleven (11) year term through June 5, 2022, is subsequently amended to authorize reimbursement to NWFWMD for a twelve (12) year term, through June 5, 2023.							
Article IV, Paragraph A, which limits the term to 5 years, unless terminated sooner, is amended to limit the terms to twelve (12) years. The intent of this modification is to authorize and maintain services supporting this contract through June 5, 2023.							
"I certify that the above requested action is necessary for the operation of this project and is in compliance with the terms of the executed agreement."							
ETAT Authorized Agency Signature:							
Luly Pende Executive Director #3/2022							
(signature) (title) (date)							
Ī	Compensation Element Description	Method of Compensation	Previous Amount	This Amendment Amount	Subtotal	Check if Estimate	
				This Amendment Total \$NO Changes	\$ NO Changes	tal	
Other Comments/Notes: Amendment adds no additional funding.							
"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 agreement and is necessary for the continued operation of this agreement."							
Department Action:							
FDOT Authorized Signature:							
	1 0 Em Admin 6/3/2022						
(signature) (title) (date)							
Attachments:							