3629-19 Amd 3

THIRD AMENDMENT TO AGREEMENT BETWEEN THE CITY OF JACKSONVILLE AND ELLIS & ASSOCIATES, INC.

ENGINEERING TESTING SERVICES - PART B: SOIL BORINGS, UNDERWATER CONDITION SURVEYS, AND RELATED TESTING

day of ________, 2015, by and between the CITY OF JACKSONVILLE, a municipal corporation in Duval County, Florida (hereinafter the "CITY"), and ELLIS & ASSOCIATES, INC., a Florida profit corporation with principal address at 7064 Davis Creek Road, Jacksonville, Florida 32256 (hereinafter the "CONSULTANT"), for Engineering Testing Services - Part B: Soil Borings, Underwater Condition Surveys, and Related Testing (hereinafter the "Project").

RECITALS:

WHEREAS, on July 13, 2012, the parties made and entered into City of Jacksonville Contract No. 3629-19 (hereinafter the "Agreement") for the Project; and

WHEREAS, said Agreement has been amended two (2) times previously; and

WHEREAS, said Agreement should be amended by extending the period of service from July 31, 2015, to January 31, 2016, subject to earlier termination, at terms mutually agreeable to the parties, and with no increase in the maximum indebtedness, such maximum indebtedness remaining a not-to-exceed amount of \$250,000.00, with all other provisions, terms, and conditions of said Agreement remaining unchanged; now therefore

IN CONSIDERATION of the premises and of the mutual covenants and agreements hereinafter contained, the parties agree as follows:

1. The above-stated recitals are accurate, true, correct, and incorporated herein by this reference.

2. Section 2.02 in said Agreement is amended in part by extending the period of service from July 31, 2015, to January 31, 2016, subject to earlier termination, at terms mutually agreeable to the parties, and as amended shall read as follows:

"2.02. PERIOD OF SERVICE

This Agreement shall commence on said Effective Date and shall continue and remain in full force and effect thereafter until JANUARY 31, 2015, or earlier termination as provided in Section 6.1 hereof."

3. The total maximum indebtedness shall remain a not-to-exceed amount of \$250,000.00.

SAVE AND EXCEPT as expressly amended in this instrument, the provisions, terms, and conditions of said Agreement of July 13, 2012 (City of Jacksonville Contract No. 3629-19), as previously amended, shall remain unchanged and shall continue in full force and effect.

[Remainder of this page is intentionally left blank. Signature page follows immediately.]

IN WITNESS WHEREOF, the parties hereto have duly executed this Agreement the day and year

ATTEST: By Love McCain, Jr. Corporation Secretary	CITY OF JACKSONVILLE By Alvin Brown, Mayor Cleveland Ferguson III Deputy Chief Administrative Office For: Mayor Alvin Brown Under Authority of: Executive Order No. 2015-01
WITNESS:	ELLIS & ASSOCIATES, INC.
By Becky Kese Becky Kiser Type/Print Name Executive Operations Administrator Title	Signature Michael L. Lithman, P.E. Type / Print Name Executive Vice President Title

first above written.

Encumbrance and funding information for internal City use:
Account
Amount\$
This above stated amount is the maximum fixed monetary amount of the foregoing contract. It shall not be encumbered by the foregoing contract. It shall be encumbered by one (1) or more subsequently issued purchase(s) that must reference the foregoing Contract. All financial examinations and funds control checking will be made at the time such check request(s) are issued.
In accordance with Section 24.103(e), of the Ordinance Code of the City of Jacksonville, I do hereby certify that there is an unexpended, unencumbered and unimpounded balance in the appropriation sufficient to cover the foregoing agreement; provided however, this certification is not nor shall it be interpreted as an encumbrance of funding under this Contract. Actual encumbrance[s] shall be made by subsequent purchase order[s], as specified in said Contract. Director of Finance City Contract # 3629-19
Form Approve Ames RM- Can Corporate Secretary
Contract Encumbrance Data Sheet follows immediately.

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 6/16/2015

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

	certificate holder in lieu of such endorsement(s).												
PRC	DUCE	R					CONTA NAME:	Joanie	Newton				
		-Hazel and Asso					PHONE [A/C, No. Ext):904-398-1234 [A/C, No.):904-396-7432						
10739 Deerwood Park Blvd. Suite 200						E-MAIL Abbress:mn@greenehazel.com						0 1 102	
Jac	le ∠i ksor	ville FL 32256										NAIC #	
Juac	1001	14110 1 L 32230					INSURER(S) AFFORDING COVERAGE						NAIC#
IN 61	JRED						INSURER A: Westfield Insurance Company					24112	
				ELLI	S-4		INSURER B : Continental Casualty Company					20443	
Ellis & Associates, Inc.						INSURER C:Bridgefield Employers Ins. Co.					10701		
		avis Creek Road	a				INSURER D:					:	
Jacksonville FL 32256							INSURER E :						
							INSURER F:						
COVERAGES CERTIFICATE NUMBER: 658293248							REVISION NUMBER:						
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD											ICY PERIOD		
0	INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.												
INSR LTR		TYPE OF INS	URANCE		SÜBR	PÓLICY NUMBER	POLICY EFF POLICY EXP (MM/DD/YYYY) LIMITS						
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	x	1	EDAL HADILIYY	1	1]		DAMAGE TO RENTE	D I		
	<u> </u>	COMMERCIAL GENE							1	PREMISES (Ea occur	rence)	\$500,00	
	\vdash	CLAIMS-MADE	X OCCUR						1	MED EXP (Any one person) \$10,000			
										PERSONAL & ADV IN	JURY	\$1,000,	000
										GENERAL AGGREGA	ATE	\$2,000,	000
	GEN	N'L AGGREGATE LIMIT			1					PRODUCTS - COMPA	OP AGG	\$2,000,	000
		POLICY X PRO-	LOC									\$	
Α	AU1	OMOBILE LIABILITY		Υ		CMM4196885		12/31/2014	12/31/2015	COMBINED SINGLE (Ea accident)	LIMIT	s1,000,	000
	X	ANY AUTO								BODILY INJURY (Per		\$	
		ALL OWNED	SCHEDULED							BODILY INJURY (Per		\$	
	x	AUTOS X	AUTOS NON-OWNED AUTOS	1						PROPERTY DAMAGE	-	<u>s</u>	
	<u> </u>	HIRED AUTOS X	AUTOS							(Per accident)	,		
			l.								\$		
Α	X	UMBRELLA LIAB X OCCUR CMM4196885		CMM4196885		12/31/2014	12/31/2015	EACH OCCURRENCE \$5,000,000		000			
		EXCESS LIAB	CLAIMS-MADE							AGGREGATE		\$5,000,	000
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C WORKERS COMPENSATION Y 38660				38660		1/1/2015	1/1/2016	X WC STATU- TORY LIMITS	OTH-				
AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE (1						E.L. EACH ACCIDEN		\$1,000,	nnn	
ANY PROPRIETOR/PARTNER/EXECUTIVE NOTIFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			N/A			-							
										DISEASE - EA EMPLOYEE \$1,000,000 DISEASE - POLICY LIMIT \$1,000,000			
				,			1.						
B Professional Liability Including Pollution Liability Retro Date - 7/31/2008 MCH288291440				MCH288291440		7/31/2014		Per Claim Aggregate Deductible	5	\$1,000,0 \$2,000,0 \$50,000	100		
DES	CRIPT	TON OF OPERATIONS	/ LOCATIONS / VEHIC	LES /	Attach	i ACORD 101, Additional Remarks :	Schedule	, if more space !	s required)				
						-Part B: Soil Borings, Ur				and Polated To	etina C	ity of	
Jac	leci. ksor	wille listed as A	dditional Insure	d with	resi	pect to General Liability,	Autor	mobile I iabi	litv Valuable	and Related Te	31119. C	ity Oi). Wav	ier of
Sub	roaa	ation in favor of	City of Jackson	ville \	vith r	espect to General Liabil	itv & V	Vorkers Cor	npensation.	or apora Emilit w	,,00,	, • • · · ·	101 01
Subrogation in favor of City of Jacksonville with respect to General Liability & Workers Compensation.													
CERTIFICATE HOLDER							CANCELLATION						
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							SHO	OULD ANY OF	THE ABOVE D	ESCRIBED POLICI	ES BE CA	ANCELL	ED BEFORE
						THE	EXPIRATIO	N DATE TH	EREOF, NOTICE				
City of Jacksonville						ACCORDANCE WITH THE POLICY PROVISIONS.							
214 N Hogan Street Jacksonville FL 32202													
Jacksonville LT 24404					AUTHORIZED REPRESENTATIVE								
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