



May 7, 2018

HSQ Group, Inc.
1001 Yamato Road, Suite 105
Boca Raton, Florida 33431
Attn: Mr. Nour Shehadeh, Vice President

**RE: INTERSECTION IMPROVEMENTS ANNUAL SERVICES
CONTRACT ON A WORK TASK ORDER BASIS
RESOLUTION NO.: R2017-0779
CONTRACT DATED: JUNE 20, 2017**

Mr. Shehadeh:

This letter serves as your **"Notice to Proceed"** with the above referenced Annual Service Renewal, which was approved by the Board of County Commissioners (Board) on May 1, 2018 (R2018-0635).

The County User Departments will be in touch with you when your services are required.

If you have any questions, please feel free to contact Holly B. Knight, at 561-684-4122.

Sincerely,


Omelio A. Fernandez, P.E., Director
Roadway Production Division

OAF:jd

Attachment

pc: Administrative Services, Fiscal (NTP)
Contract Development & Control
Office of Small Business Assistance
Finance Department
CCNA File (w/original)
John Chesher, Director, Capital Improvements
James Stiles, Director, Water Utilities
Deborah L. Drum, Director of E.R.M
Bruce Pelly, Director, Department of Airports

ec: Omelio A. Fernandez, P.E., Director, Roadway Production Division
Morton L. Rose, P.E., Assistant Director, Roadway Production Division
Holly B. Knight, P.E., Contracts Section Manager, Roadway Production Division
Vanessa Jagoo, TA III, Roadway Production Division

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**Department of Engineering
and Public Works**

P.O. Box 21229
West Palm Beach, FL 33416-1229
(561) 684-4000
FAX: (561) 684-4050
www.pbcgov.com



**Palm Beach County
Board of County
Commissioners**

Melissa McKinlay, Mayor
Mack Bernard, Vice Mayor
Hal R. Valeche
Paulette Burdick
Dave Kerner
Steven L. Abrams
Mary Lou Berger

County Administrator

Verdenia C. Baker

*"An Equal Opportunity
Affirmative Action Employer"*

**FIRST AMENDMENT TO THE ANNUAL INTERSECTION IMPROVEMENTS
CONTRACT NO. R2017-0779
DATED JUNE 20, 2017, BY AND BETWEEN
HSQ GROUP, INC. AND PALM BEACH COUNTY**

THIS FIRST AMENDMENT to the Annual Intersection Improvements Contract dated June 20, 2017, (R2017-0779), hereinafter "CONTRACT" by and between HSQ Group, Inc., hereinafter "CONSULTANT" and the Board of County Commissioners of Palm Beach County, a political subdivision of the state of Florida, hereinafter, "COUNTY".

WITNESSETH

WHEREAS, on June 20, 2017, the CONSULTANT and COUNTY entered into a twelve month Annual Intersection Improvements Contract for engineering services and other related tasks throughout Palm Beach County; and

WHEREAS, the CONTRACT provides that the contract may be extended, at the COUNTY's option for a defined period of time, not to exceed thirty-six months total contract time, upon approval of the Board of County Commissioners; and

WHEREAS, this is the first of the two allowable one (1) year term CONTRACT extensions per section 4.1; and

WHEREAS, by this amendment, the CONSULTANT and the COUNTY mutually agree to amend the CONTRACT terms to extend the expiration date of the CONTRACT from June 19, 2018 to June 19, 2019, with all original terms, conditions and unit prices adhered to; and

WHEREAS, the original CONTRACT provides in section 5.3.2 that the rates may be adjusted by negotiation; and

WHEREAS, by this amendment, the CONSULTANT and the COUNTY mutually agree to amend the CONTRACT terms to modify the Fee Schedule of the CONTRACT to the revised Fee Schedule provided by the CONSULTANT dated January 16, 2018, and attached hereto as **Exhibit B1**; and

WHEREAS, by this amendment, the CONSULTANT and the COUNTY mutually agree to add to the CONTRACT SECTION 22 – **ADDITIONAL REPORTING**.

NOW, THEREFORE, in consideration of the mutual covenants, promises, and agreements herein contained, the parties agree as follows:

1. The above recitations are true and correct and incorporated herein.

2. The CONSULTANT warrants and represents that all of its employees are treated equally during employment without regard to race, color, religion, disability, sex, age, national origin, ancestry, marital status, familial status, sexual orientation, gender identity and expression, or genetic information pursuant to Palm Beach County Resolution R-2017-1770, as may be amended.
3. Add the following: SECTION 22 – **ADDITIONAL REPORTING**

COUNTY requires CONSULTANT to track during the CONTRACT, and report at the end of the CONTRACT, the county of residence of the Consultant's employees and its subconsultants' employees. CONSULTANT agrees to prepare and provide the required report with its request for final payment.
4. The CONTRACT, dated June 20, 2017, between the CONSULTANT and the COUNTY is hereby amended to extend the expiration date of the CONTRACT from June 19, 2018 to June 19, 2019.
5. The Fee Schedule shown as **Exhibit B** in the Original Contract is hereby modified as shown in the revised Fee Schedule provided by the CONSULTANT dated January 16, 2018, and attached hereto as **Exhibit B1**.
6. It is the intent of the parties hereto that this Amendment shall not become binding until the date executed by the COUNTY.
7. Except as provided herein, all other provisions of the Annual Intersection Improvements Contract dated June 20, 2017, hereby confirmed shall remain in full force and effect.

REMAINDER OF PAGE LEFT INTENTIONALLY BLANK

IN WITNESS WHEREOF, the parties have caused this Amendment to the Annual Intersection Improvements Contract (R2017-0779) to be executed and sealed this MAY 01 2018 day of _____, 20__.

OWNER: **R2018 0635**
Palm Beach County, Florida, a
Political Subdivision of the
State of Florida

CONSULTANT:
HSQ Group, Inc.
a Florida Corporation

BOARD OF COUNTY COMMISSIONERS

BY: Melissa McKinlay
Melissa McKinlay, Mayor

BY: Nour Shehadeh
Nour Shehadeh, P.E., Vice President

SEAL

CORPORATE SEAL

ATTEST:
Sharon R. Bock, Clerk & Comptroller
Circuit Court

ATTEST WITNESS:

BY: Jay Huebner, P.E.
(Print Name)

BY: Tracy Powell
(Print Name)
Tracy Powell
(Signature)

Jay Huebner
(Signature)

BY: BethAnn Shay
(Print Name)

APPROVED AS TO TERMS
AND CONDITIONS:

BethAnn Shay
(Signature)

BY: Omelio A. Fernandez
Omelio A. Fernandez, P.E.
Director of Roadway Production

APPROVED AS TO FORM &
LEGAL SUFFICIENCY:

BY: Yelizaveta B. Herman
Yelizaveta B. Herman,
Assistant County Attorney II



January 16, 2018
Ms. JaeAnn Dean, Technical Assistant I
Roadway Production Division / CCNA Section
2300 N. Jog Road, Suite 3W-33
West Palm Beach, FL 33411-2745

*Rates OK
HK*

Re: **Intersection Improvements Annual Services.**

Dear Ms. Dean:

The following is a list of new pay rates for HSQ Group, Inc. concerning the above referenced project. Please note that we do not use the same categories the County uses, however, the following rates match the County's categories as close as possible.

Fee Schedule effective dates from June 20, 2018 to June 19, 2019

- Engineer Intern (entry level with engineering degree) \$32.18 /hour
- Project Engineer \$42.23/hour
- Project Manager (PE w/5+ years of post-registration) \$51.50 /hour
- Senior Engineer (PE w/10+ years of post-registration experience) \$58.35 /hour

Survey Rate schedule

- Two-man crew \$52.50/hour
- Senior surveyor and mapper \$58.35/hour
- Surveyor and mapper \$47.35/hour
- Survey technician \$29.40/hour

The existing current multiplier is **2.749**, as per the original contract.

Should you have any questions please do not hesitate to call me. We look forward to working with you on this project.

Sincerely,
HSQ Group, Inc.

Nour Shehadeh, P.E.
Vice President



HSQGROU-01

GMASTERS

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/28/2017

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 have ADDITIONAL INSURED provisions or 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).

PRODUCER
Collinsworth, Alter, Fowler & French, LLC
8000 Governors Square Blvd
Suite 301
Miami Lakes, FL 33016

CONTACT NAME:
PHONE (A/C, No, Ext): (305) 822-7800
FAX (A/C, No): (305) 362-2443
E-MAIL ADDRESS:

INSURED
HSQ Group, Inc.
1489 Palmetto Park Road
Suite #340
Boca Raton, FL 33486

INSURER(S) AFFORDING COVERAGE
INSURER A: Hartford Casualty
INSURER B: Argonaut Insurance Company
INSURER C:
INSURER D:
INSURER E:
INSURER F:
NAIC # 29424

COVERAGES **CERTIFICATE NUMBER:** **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 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	TYPE OF INSURANCE	ADDITIONAL SUBR	POLICY NUMBER	POLICY EFF	POLICY EXP	LIMITS
(LTR)		(INSR) (BYD)		(MM/DD/YYYY)	(MM/DD/YYYY)	
A X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	X	21SBAIG1445	10/17/2017	10/17/2018	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Per occurrence) \$ 300,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 HIRED NONOWNED \$ 2,000,000
GEN'L AGGREGATE LIMIT APPLIES PER: X POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC						
OTHER:						
A	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS X HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY		21SBAIG1445	10/17/2017	10/17/2018	COMBINED SINGLE LIMIT (Per accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A X	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE		21SBAIG1445	10/17/2017	10/17/2018	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						
ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in FL) <input type="checkbox"/> Y/N <input type="checkbox"/> N/A						
If yes, describe under DESCRIPTION OF OPERATIONS below						
B	Prof Liab Claim Made		IAE4197350	06/03/2017	06/03/2018	PER STATUTE <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
B	Deductible \$20,000		IAE4197350	06/03/2017	06/03/2018	Each Claim \$ 2,000,000 Aggregate \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
PROFESSIONAL LIABILITY RETRO DATE - 1/18/2005

Palm Beach County Board of County Commissioners, a Political Subdivision of the State of Florida, its Officers, Employees & Agents are named additional insured, if required by written contract, as respects Commercial General Liability, for all projects insured is working on for Palm Beach County.

CERTIFICATE HOLDER

Palm Beach County
c/o Insurance Tracking Services, Inc. (ITS)
P.O. Box 20270
Long Beach, CA 90801

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/05/2018

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PRODUCER State Farm Marion Fazio Insurance Agency Inc. 805 George Bush Blvd Delray Beach FL 33483	CONTACT NAME: Marlon Fazio PHONE (A/C, No, Ext): 5612760330 FAX (A/C, No): 5612760960 E-MAIL ADDRESS: Marlon@marionfazio.com
	INSURER(S) AFFORDING COVERAGE INSURER A: State Farm Mutual Automobile Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
INSURED HSQ GROUP 1489 W PALM PK RD STE 340 BOCA RATON FL 33486	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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INSR LTR	TYPE OF INSURANCE	ADDL SUBR, USE ONLY	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:					EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY		C60 8364-E12-59A 994 2729-C06-59B 981 7635-C14-59C 439 6946-e02-58G	11/12/2017 03/06/2018 03/14/2018 11/02/2017	05/12/2018 09/08/2018 09/14/2018 05/02/2018	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 1,000,000 BODILY INJURY (Per accident) \$ 1,000,000 PROPERTY DAMAGE (Per accident) \$ 1,000,000
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> COV <input checked="" type="checkbox"/> RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y/N <input type="checkbox"/> N/A				<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

06 FORD F150 VIN: 1FTRX14W66NB80474 14 TOYOTA TACOMA VIN: 5TFTX4CN1EX038231
 06 TOYOTA TACOMA VIN: 5TETX22N46Z243428 11 JEEP COMPASS VIN: 1J4NT1FB1BD260022
 15 TOYOTA TACOMA VIN: 5TFUX4EN8FX035295 03/23/2018-09/23/2018
 15 JEEP CHEROKEE VIN: 1C4PJM CB4FW709679 12/05/2017-06/05/2018

CERTIFICATE HOLDER Palm Beach County C/O Insurance Tracking Services Inc. (ITS) PO BOX 202701 Long Beach, CA 90801	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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