

# Contract Cover Sheet

*Note: Shaded areas are for County Executive review.*

| Department <b>Land &amp; Water Resources</b>  | Contract/Addendum # <b>12029C</b>   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
|---|---|--------------------------|----------|--|--|------------------------------|--------------------------|--------------------------------|--------------------------|-----------------------------------|--------------------------|------------------------------------|--------------------------|--|--------------------------|---|--------------------------|--|--------------------------|--------------------------------|--------------------------|
| 1. This contract, grant or addendum: <input checked="" type="checkbox"/> AWARDS <input type="checkbox"/> ACCEPTS  | <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Contract</th> <th style="width: 50%;">Addendum</th> </tr> <tr> <td colspan="2" style="text-align: center; font-size: small;">If Addendum, please include original contract number</td> </tr> <tr> <td><input type="checkbox"/> POS</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Grant</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Co Lease</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Co Lessor</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Intergovernmental</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Purchase of Property</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Property Sale</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td><input type="checkbox"/></td> </tr> </table> | Contract                 | Addendum | If Addendum, please include original contract number |  | <input type="checkbox"/> POS | <input type="checkbox"/> | <input type="checkbox"/> Grant | <input type="checkbox"/> | <input type="checkbox"/> Co Lease | <input type="checkbox"/> | <input type="checkbox"/> Co Lessor | <input type="checkbox"/> | <input type="checkbox"/> Intergovernmental | <input type="checkbox"/> | <input type="checkbox"/> Purchase of Property | <input type="checkbox"/> | <input type="checkbox"/> Property Sale | <input type="checkbox"/> | <input type="checkbox"/> Other | <input type="checkbox"/> |
| Contract  |   | Addendum                 |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| If Addendum, please include original contract number  |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> POS  |   | <input type="checkbox"/> |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> Grant  |   | <input type="checkbox"/> |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> Co Lease   | <input type="checkbox"/>  |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> Co Lessor  | <input type="checkbox"/>  |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> Intergovernmental  | <input type="checkbox"/>  |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> Purchase of Property   | <input type="checkbox"/>  |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> Property Sale  | <input type="checkbox"/>  |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| <input type="checkbox"/> Other  | <input type="checkbox"/>  |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 2. This contract is discretionary <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 3. Term of Contract or Addendum: <b>from signing to 12-31-2018</b>  |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 4. Amount of Contract or Addendum: <b>\$40,000</b>  |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 5. Purpose: <b>To add \$40,000 and extend contract to 12-31-2018 for nutrient concentration system consulting services. This will provide additional support during the final design, construction and commissioning phases as requested by the county.</b>           |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 6. Vendor or Funding Source: <b>Strand Associates Inc</b>   |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 7. MUNIS Vendor Code: <b>7467</b>   |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 8. Bid/RFP Number:  |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 9. If grant: Funds Positions? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Will require on-going or matching funds? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 10. Are funds included in the budget? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 11. Account No. & Amount, Org & Obj: <b>LWLEGACY 57308</b> Amount \$ <b>40,000</b><br>Account No. & Amount, Org & Obj: _____ Amount \$ _____<br>Account No. & Amount, Org & Obj: _____ Amount \$ _____  |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 12. If this contract awards funds, a purchase requisition is necessary. Enter requisition # & year <b>PO#20141533</b>   |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 13. Is a resolution needed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If yes, please attach a copy of the Resolution.<br>If Resolution has already been approved by the County Board, Resolution No. & date of adoption <b>2017 RES-092</b> |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 14. Does Domestic Partner equal benefits requirement apply? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |
| 15. Director's Approval: <i>Ken Poma</i>  |   |                          |          |  |  |                              |                          |                                |                          |                                   |                          |                                    |                          |  |                          |   |                          |  |                          |                                |                          |

| Contract Review/Approvals              |       |               |               | Vendor                        |
|--|-------|---------------|---------------|-------------------------------|
| Initials                               | Ftnt  | Date In       | Date Out      | Vendor Name                   |
| <i>Mg</i> Received                     | _____ | <b>6/8/17</b> | _____         | Strand Associates Inc         |
| <i>AK</i> Controller                   | _____ | _____         | <b>6/9/17</b> | Contact Person                |
| <i>[Signature]</i> Corporation Counsel | _____ | <b>6-9-17</b> | <b>6/9/17</b> | Randy Wirtz                   |
| <i>[Signature]</i> Risk Management     | _____ | <b>6/9/17</b> | <b>6/9/17</b> | Phone No.                     |
| <i>PCP</i> Purchasing                  | _____ | <b>6/9/17</b> | <b>6/9/17</b> | 608-251-4843                  |
| _____ County Executive                 | _____ | _____         | _____         | E-mail Address                |
|  |       |               |               | <b>randy.wirtz@strand.com</b> |

**Footnotes:**

1.

2.

|  |  |
|--|--|
| <b>Return to:</b><br>Name/Title: Janet Crary/Account Clerk II<br>Phone: 224-3757<br>E-mail Address: crary@countyofdane.com | <b>Dept.:</b> Land & Water Resources<br><b>Mail Address:</b> 5201 Fen Oak Dr., Room 208<br>Madison, WI 53718 |
|--|--|

**Certification**

The attached contract: [check as many as apply]

- conforms to Dane County's standard Purchase of Services Agreement form in all respects
- conforms to Dane County's standard Purchase of Services Agreement form with modifications and is accompanied by a revision copy<sup>1</sup>
- is a non-standard contract which has been reviewed or developed by corporation counsel and which has not been changed since that review/development
- is a non-standard contract previously review or developed by corporation counsel which has been changed since that review/development; it is accompanied by a revision copy<sup>1</sup>
- is a non-standard contract not previously reviewed by corporation counsel; it is accompanied by a revision copy
- contains non-standard/indemnification language which has been reviewed or developed by risk management and which has not been changed since that review/development
- contains non-standard insurance/indemnification language which has been changed since review/development or which has not been previously seen by risk management; it is accompanied by a revision copy
- contains non-standard affirmative action/equal opportunity language which has been reviewed or developed by contract compliance and which has not been changed since that review/development
- contains non-standard affirmative action/equal opportunity language which has been changed since the earlier review/development by contract compliance or which has not been previously seen by contract compliance; it is accompanied by a revision copy<sup>1</sup>

Date: 6-7-17 Signed: Kevin Connors  
 Telephone Number 224-3731 Print Name: Kevin Connors

**Major Contracts Review (DCO Sect. 25.20)** This review applies only to contracts which both exceed \$100,000 in disbursements or receipts and which require county board review and approval.

**Executive Summary** (attach additional pages, if needed).

1. **Department Head**  Contract is in the best interest of the County.  
Describe any deviations from the standard contracting process and any changes to the standard Purchase of Services Form Agreement.

Date: 6-7-17 Signature: Kevin Connors

2. **Director of Administration**  Contract is in the best interest of the County.  
Comments:

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

3. **Corporation Counsel**  Contract is in the best interest of the County.  
Comments:

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

<sup>1</sup> A revision copy is a copy of the contract which shows the changes from the standard contract or previously revised/developed contract by means of overstrikes (indicating deletions from the standard language) and underlining (showing additions to the standard language).

**COUNTY OF DANE**  
**Amendment No. 3 to the**  
**Purchase of Services Agreement**  
**dated August 21, 2014**

THIS IS AMENDMENT NO. 3 TO THE REFERENCED AGREEMENT, made and entered into, by and between the County of Dane (hereafter referred to as "COUNTY") and Strand Associates Inc.® (hereafter, "PROVIDER")

**WITNESSETH:**

WHEREAS COUNTY and PROVIDER mutually agree that the following provisions are hereby incorporated into and made a part of the original Agreement for process support and permitting assistance for the Springfield Digester Nutrient Concentration System.

Under Expiration Date, CHANGE December 31, 2016, to "December 31, 2018."

In SCHEDULE "A," after Phase One–RFP/Contract Process Support, ADD the following

"Amendment No. 3:

- \* Provide additional support during the final design, construction, and commissioning phases as requested by COUNTY, including the following:
  - Review design submittals from the Nutrient Concentration System contractor, including process, electrical, structural, and site/civil submittals. Provide comments on the design submittals to COUNTY for COUNTY's consideration related to the project. PROVIDER does not have authority to change the construction or related contracts, and are providing this service to COUNTY for COUNTY's consideration and follow-up.
  - Review performance testing requirements, proposed testing plans, and data from performance testing.
  - Provide one person on site during start-up and commissioning to observe the equipment start-ups and system performance testing. Forty hours are budgeted for this activity. In furnishing observation services, PROVIDER's efforts will be directed toward determining for COUNTY that the completed project will, in general, conform to the Contract Documents; but PROVIDER will not supervise, direct, or have control over the contractor's work and will not be responsible for the contractor's construction means, methods, techniques, sequences, procedures, or health and safety precautions or programs, or for the contractor's failure to perform the construction work in accordance with the Contract Documents.
  - Develop a brief commissioning report that summarizes the activities, testing, concerns, and PROVIDER's opinion regarding whether the performance testing met the stipulated performance requirements. PROVIDER cannot certify that requirements have been met. The System supplier will be required by COUNTY to certify that performance requirements have been met, and PROVIDER will offer an opinion with respect to supplier's certification."

In SCHEDULE "A," after Phase Two–Permitting, ADD the following:

"Amendment No. 3:

- \* Review the draft WPDES permits, fact sheets, and related correspondence and provide comments to COUNTY."

In SCHEDULE "B"

Under item I., ADD the following:

"\$40,000 - Amendment No. 3 Services"

Under item III., CHANGE \$77,700 to "\$117,700."

IN WITNESS WHEREOF, COUNTY and PROVIDER, by their respective authorized agents, have caused this Amendment to be executed, effective as of the date by which all parties hereto have affixed their respective signatures, as indicated below.

**FOR PROVIDER:**

Date Signed: 5/29/17 *Matthew S. Richards*  
MATTHEW S. RICHARDS, Corporate Secretary

Date Signed: 5/30/17 *Rachael A. Funder*

\*\*\*

**FOR COUNTY:**

Date Signed: \_\_\_\_\_  
JOSEPH PARISI, County Executive

Date Signed: \_\_\_\_\_  
SCOTT MCDONNELL, County Clerk

\*[print name and title, below signature line of any person signing this document]

rev. 04/13