

MEMORANDUM

DATE: September 20, 2018

TO: ****ORIGINAL****
CITY CLERK

FROM: Shelby Dolan
Procurement Management Department

SUBJECT: Authorization to Release Contract

CONTRACT: #20170037 Amendment #4
CONTRACT TITLE: Mowing & Grounds Maintenance- Utilities
Department: Ogden, Re-pump Stations, City Homes
and Well Sites

VENDOR NAME: Treasure Coast Lawns, Inc.
VENDOR ADDRESS: 2674 Conifer Drive
CITY & STATE: Ft. Pierce, FL 34951

APPROVED BY COUNCIL: Not Required
-Amendment is to add (1) additional location for an annual amount of \$2,800.00.
The new annual contract total is \$56,692.96.

CONTRACT TERM: 07/01/2017 thru 06/30/2022

Please see the attached for (1) original contract for your records.

Thank you.

Contract Amendment #4

Contract #: 20170037

Date: 9-21-18

Contract Title: Mowing & Grounds Maintenance – Utilities Dept. – Ogden, Re-pump Stations, City Homes & Well Sites

Contractor's Name: Treasure Coast Lawns, Inc.

Current Expiration: 6/30/2022

Original Contract Amount: **\$44,387.72**

New Amendment #4: \$2,800.00

Revised Annual Cost: **\$56,692.96** (which includes CO#1- \$1,460.00; Amendment #1 - \$7,436.24; Amendment #2- \$3,600.00 & Amendment #3- (-\$2,991.00))

The following modifications to the Terms and Conditions contained in Contract # 20170037 between Treasure Coast Lawns, Inc. dated June 28, 2017 and the City of Port St. Lucie are hereby incorporated and made a part of that Contract effective October 1, 2018.

1. Addition of the following location effective October 1, 2018:

	Mowing and Grounds Maintenance Services	Type of Service	Rate per Mow	Annual Frequency	Annual Cost
1	PD Obstacle Course	Cuts and weed spraying for the mulch area	\$100.00	28	\$2,800.00
Total Amendment Amount					\$2,800.00

2. All other terms and conditions of the original contract and/or Addenda apply.

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IN WITNESS WHEREOF, the parties have executed this contract the day and year first above written.

CITY OF PORT ST. LUCIE FLORIDA

TREASURE COAST LAWNS, INC.

By: [Signature]
City Purchasing Agent

By: [Signature]
Authorized Representative

State of: FLORIDA

County of: ST. LUCIE

Before me personally appeared: Katherine Jagers
(please print)

Please check one:

Personally known

Produced Identification/Type of Identification FL DL

known to me to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that She executed said instrument for the purposes therein expressed.
(he/she)

WITNESS my hand and official seal, this 20th day of September, 2018.

[Signature]
Notary Signature

Notary Public State of Florida at Large

My Commission Expires: 1/25/21

