



Contract Number: CTN-PW-13\*365-01  
Effective Date: 8-19-13  
Term Date: \_\_\_\_\_  
Cost: ✓  
Revenue: ✓  
Total: \_\_\_\_\_ NTE: \_\_\_\_\_  
Action: \_\_\_\_\_  
Renewal By: 4-1-18  
Term: 7-2-18  
Reviewed by: VR

## **BOARD OF SUPERVISORS AGENDA ITEM SUMMARY**

Requested Board Meeting Date: August 19, 2013

### **ITEM SUMMARY, JUSTIFICATION &/or SPECIAL CONSIDERATIONS:**

On July 2, 2013, the Board of Supervisors approved two Agreements between the County and Community Healthcare Benefit Foundation of Pima County (CHBFPC) related to the Julian Wash section of the Urban Loop, the Agreement for the Development of the Julian Wash Multi-Use Path (CTN 13\*365) and the Escrow Agreement (CTN 13\*364). While finalizing the Julian Wash Agreements, County staff identified the amount of \$3,590,000 shown in the Agreements overstated the cost of the project by \$265,000. The management fee of \$265,000 was written in the Julian Wash Agreements as an addition to the project cost when in fact the amount was already included in the initial cost of the project.

This amendment will revise the amount written in the Agreements downward from \$3,590,000 to \$3,325,000 to reflect the actual costs of the project, inclusive of the management fee.

CONTRACT NUMBER (If applicable): CTN 13\*365

### **STAFF RECOMMENDATION(S):**

The Project Management Office recommends approving the Amendment to the Development Agreement.

CORPORATE HEADQUARTERS: Tucson, AZ

Page 1 of 2

To: CHH - 8-8-13 By Dept  
COB - 8-14-13  
Agenda 8-19-13  
Addendum  
(3)

PLG1213M0344PCQK07BD

Procure Dept 08/08/13 PM0335

CLERK OF BOARD USE ONLY: BOS MTG. \_\_\_\_\_

ITEM NO. \_\_\_\_\_

PIMA COUNTY COST: \$0 and/or REVENUE TO PIMA COUNTY: \$0

FUNDING SOURCE(S): \_\_\_\_\_

(i.e. General Fund, State Grant Fund, Federal Fund, Stadium D. Fund, etc.)

Advertised Public Hearing:

		YES	X	NO
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Board of Supervisors District:

1		2		3		4		5		All	X
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IMPACT:

IF APPROVED:

The Development Agreement will reflect the actual cost of the project.

IF DENIED:

The Development Agreement will reflect an overstated cost.

DEPARTMENT NAME: Public Works Administration

CONTACT PERSON: Nancy Cole / Lisa Matthews TELEPHONE NO.: (520) 724-6312 or 724-8396



All other provisions of the Contract, not specifically changed by this Amendment, shall remain in effect and be binding upon the parties.

IN WITNESS THEREOF, the parties have affixed their signatures to this Amendment on the dates written below.

**APPROVED:**

**COMMUNITY HEALTHCARE BENEFIT  
FOUNDATION OF PIMA COUNTY:**

\_\_\_\_\_  
Ramon Valadez, Chair  
Pima County Board of Supervisors

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name and Title (Please Print)

\_\_\_\_\_  
Date

**PIMA COUNTY FLOOD CONTROL DISTRICT**

\_\_\_\_\_  
Ramon Valadez, Chair  
PCFCD Board of Directors  
Date: \_\_\_\_\_

**ATTEST:**

\_\_\_\_\_  
Clerk of Board

\_\_\_\_\_  
Date

**APPROVED AS TO FORM:**

\_\_\_\_\_  
**REGINA NASSEN**  
Deputy County Attorney  
8-8-13  
\_\_\_\_\_  
Date

**APPROVED AS TO CONTENT:**

\_\_\_\_\_  
Nanette Slusser

\_\_\_\_\_  
Date