

SUGGESTED AGENDA

TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS
PERRY, FLORIDA
REGULAR BOARD MEETING
MONDAY, APRIL 4, 2016
6:00 P.M.
201 E. GREEN STREET
TAYLOR COUNTY ADMINISTRATIVE COMPLEX
OLD POST OFFICE

NOTICE IS HEREBY GIVEN, PURSUANT TO FLORIDA STATUTES 286.0105, THAT ANY PERSONS DECIDING TO APPEAL ANY MATTER CONSIDERED AT THIS MEETING WILL NEED A RECORD OF THE MEETING AND MAY NEED TO ENSURE THAT A VERBATIM RECORD OF THE PROCEEDINGS IS MADE, WHICH RECORD INCLUDES THE TESTIMONY AND EVIDENCE UPON WHICH THE APPEAL IS TO BE BASED.

ANY PERSON WISHING TO ADDRESS THE BOARD REGARDING AN AGENDAED ITEM WILL BE GIVEN THREE (3) MINUTES FOR COMMENT. A COMMENTER MAY ONLY SPEAK ONE (1) TIME FOR EACH AGENDAED ITEM.

1. Prayer
2. Pledge of Allegiance
3. Approval of Agenda

COMMENTS AND CONCERNS FROM THE PUBLIC FOR NON-AGENDAED AND CONSENT AGENDA ITEMS:

CONSENT ITEMS:

4. EXAMINATION AND APPROVAL OF INVOICES.
5. THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON THE GRANT APPLICATION TO THE FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES, FLORIDA FOREST SERVICE, VOLUNTEER FIRE ASSISTANCE GRANT PROGRAM, AS AGENDAED BY MELODY COX, GRANTS DIRECTOR.

6. THE BOARD TO APPROVE FORM HUD-2880 WHICH IS REQUIRED ANNUALLY FOR COMMUNITY DEVELOPMENT BLOCK GRANT (CDBG) HOUSING REHABILITATION GRANT PROGRAM RECIPIENTS, AS AGENDAED BY THE GRANTS DIRECTOR.
7. THE BOARD TO APPROVE A REQUEST BY DAN SCHAPPER, CROSSPOINT BAPTIST FELLOWSHIP, TO HOLD A PUBLIC GATHERING ON THE STEPS OF THE COURTHOUSE (EAST SIDE) ON THURSDAY, MAY 5, 2016, (THE NATIONAL DAY OF PRAYER) AS AGENDAED BY DUSTIN HINKEL, COUNTY ADMINISTRATOR.
8. THE BOARD TO APPROVE A REQUEST TO REMOVE COUNTY ASSETS VALUED UNDER THE PURCHASING THRESHOLD OF \$1000 FROM COUNTY INVENTORY, AS AGENDAED BY THERESA COPELAND, IT DIRECTOR.
9. THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON A RENEWAL CONTRACT WITH DATAWORKS PLUS, FOR MAINTENANCE AND SUPPORT OF THE JAIL'S RAPID-ID SYSTEM, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

BIDS/PUBLIC HEARINGS:

10. THE BOARD TO RECEIVE PROPOSALS FOR ARCHITECTURAL SERVICES FOR THE DESIGN OF A COUNTY OWNED AND MAINTAINED COMMUNITY CENTER IN SHADY GROVE, FLORIDA, SET FOR THIS DATE AT 6:05 P.M., OR AS SOON THEREAFTER AS POSSIBLE.

ADVISORY COMMITTEE REPORTS:

11. THE BOARD TO CONSIDER APPOINTMENT OR RE-APPOINTMENT OF THREE (3) MEMBERS TO THE CONSTRUCTION INDUSTRY LICENSING BOARD, AS AGENDAED BY DANNY GRINER, BUILDING DIRECTOR.

GENERAL BUSINESS:

12. THE BOARD TO HEAR AND CONSIDER THE BID COMMITTEE'S RECOMMENDATION REGARDING ITS' REVIEW OF THE REQUESTS FOR QUALIFICATIONS (RFQS) FOR CONSULTING SERVICES FOR A SPACE PLANNING/FACILITIES ASSESSMENT, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

COUNTY STAFF ITEMS:

13. THE BOARD TO RECEIVE AND APPROVE SUPPLEMENTAL AGREEMENT NO. 2 FROM THE FLORIDA DEPARTMENT OF TRANSPORTATION (FDOT) FOR THE WIDENING AND RESURFACING OF OSTEEN ROAD AND CONSIDER BID AWARD, PROJECT FUNDING, AND CEI SERVICES PROPOSAL, AS AGENDAED BY KENNETH DUDLEY, COUNTY ENGINEER.
14. THE BOARD TO REVIEW AND APPROVE THE BID COMMITTEE'S RECOMMENDATION FOR THE PURCHASE AND INSTALLATION OF HURRICANE SHUTTERS ON TWELVE (12) SINGLE FAMILY HOMES IN TAYLOR COUNTY, AS AGENDAED BY THE GRANTS DIRECTOR.

COUNTY ADMINISTRATOR ITEMS:

15. THE BOARD TO TASK THE COUNTY ADMINISTRATOR TO WORK WITH THE COUNTY ATTORNEY AND THE TOURIST DEVELOPMENT COUNCIL (TDC) TO DRAFT AN ORDINANCE AMENDING SECTION 70-1, TAYLOR COUNTY ORDINANCES, TO INCLUDE AN UPDATED TOURISM DEVELOPMENT PLAN AND AUTHORIZING THE REMAINING 2% ASSESSMENT ALLOWED BY STATUTE.
16. THE BOARD TO RECEIVE AN UPDATE FROM THE COUNTY ATTORNEY AND COUNTY ADMINISTRATOR REGARDING RESEARCH AND ACTIONS TAKEN PURSUANT TO A BOARD TASKING REGARDING ANDREWS LAKE ROAD.
17. THE COUNTY ADMINISTRATOR TO DISCUSS INFORMATIONAL ITEMS.

ADDITIONAL COMMENTS AND CONCERNS FROM THE PUBLIC FOR NON-AGENDAED ITEMS:

BOARD INFORMATIONAL ITEMS:

Motion to Adjourn

FOR YOUR INFORMATION:

- THE AGENDA AND ASSOCIATED DOCUMENTATION, IF APPLICABLE, IS AVAILABLE TO THE PUBLIC ON THE FOLLOWING WEBSITE: www.taylorcountygov.com
- IF YOU ARE A PERSON WITH A DISABILITY WHO NEEDS ANY ACCOMODATION IN ORDER TO PARTICIPATE IN THIS PROCEEDING, YOU ARE ENTITLED, AT NO COST TO YOU, TO THE PROVISION OF CERTAIN ASSISTANCE. PLEASE CONTACT MARGARET DUNN, ASSISTANT COUNTY ADMINISTRATOR, 201 E. GREEN STREET, PERRY, FLORIDA, 850-838-3500, EXT. 7, WITHIN TWO (2) WORKING DAYS OF THIS PROCEEDING.
- ANY PERSON WISHING TO ADDRESS THE BOARD REGARDING AN AGENDAED OR NON-AGENDAED ITEM WILL BE GIVEN THREE (3) MINUTES FOR COMMENT.
- BALLOTS USED TO APPOINT CITIZENS TO ADVISORY COMMITTEES AND ADVISORY BOARDS ARE AVAILABLE FOR PUBLIC INSPECTION AFTER THE MEETING AND ARE RETAINED AS PART OF THE PUBLIC RECORD.

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:


Board to ratify the County Administrator's signature on the grant application to the Florida Department of Agriculture and Consumer Services, Florida Forest Service, Volunteer Fire Assistance Grant Program.

MEETING DATE REQUESTED:

April 4, 2016

Statement of Issue: Board to ratify the County Administrator's signature on the grant application requesting funding assistance from the Volunteer Fire Assistance Grant Program to provide turnout gear to our volunteer firefighters.

Recommended Action: Board to ratify the County Administrator's signature on the grant application to the Volunteer Fire Assistance Grant Program.

Fiscal Impact: The County is requesting funding assistance in the amount of \$4,033 and will be required to provide a match of \$4,033 for a total project cost of \$8,066. There is sufficient funding in the Volunteer Firefighters budget to cover the match. No additional funds are being requested from the Board.

Budgeted Expense: Sufficient funds are available in the approved Volunteer Firefighters budget.

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: Florida Forest Service has a limited amount of funding available to provide assistance to purchase equipment for volunteer firefighters in rural areas. The County has been very successful in the past obtaining funding assistance through this program.

Attachments: Volunteer Fire Assistance Grant Application, Assurance Form, and Certification Form.



ADAM H. PUTNAM
COMMISSIONER

Florida Department of Agriculture and Consumer Services
Florida Forest Service
VOLUNTEER FIRE ASSISTANCE GRANT APPLICATION

LEGAL NAME Taylor County Board of Commissioners		FORM OF ORGANIZATION: (Municipal, Fire District, Non-Profit, County) County	
ADDRESS 201 E. Green St.		IF COUNTY, LIST VFD'S BENEFITING FROM GRANT:	
CITY Perry		Shady Grove (North) and Keaton Beach (South)	
STATE FL	ZIP 32348		
COUNTY Taylor	COUNTY #		
EMPLOYER IDENTIFICATION NUMBER (EIN) 5 9 - 6 0 0 0 8 7 9			

IS FIRE DEPARTMENT LOCATED IN AN INCORPORATED TOWN? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> IF YES, NAME OF TOWN: _____ POPULATION OF TOWN: _____ PROTECTED AREA: EST. POPULATION: 8,000 SIZE: (SQ. MILES) 650	WHAT IS THE FIRE DEPARTMENT ISO RATING? 9 IS FIRE DEPARTMENT NIMS COMPLIANT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> CURRENT COOPERATIVE AGREEMENT WITH FFS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> DISTANCE OF CLOSEST MUTUAL AID FIRE DEPARTMENT: 18-35 NAME OF FIRE DEPARTMENT: City of Perry
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NUMBER OF FIREFIGHTERS: PAID: 12 VOLUNTEERS: 34 NO. OF INCIDENTS PAST YEAR: WILDLAND FIRE: 71 OTHER: 305 NO. OF FIREFIGHTERS CERTIFIED AS: WILDLAND FIREFIGHTER I 10 WILDLAND FIREFIGHTER II 5	HAS APPLICANT RECEIVED GRANT FUNDS FROM ANY SOURCE IN THE PAST 12 MONTHS? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> IF YES, WHERE? FL Division of Forestry AMOUNT: \$ 10,544 LIST TOTAL FUNDS RECEIVED FROM OTHER TAXING AUTHORITIES SUCH AS CITY, COUNTY, TAXING DISTRICTS (Past 12 Months) AMOUNT: \$ 28,562
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LIST OF FIREFIGHTING VEHICLES:			
TYPE	MAKE/YR.MODEL	PUMP CAPACITY (GPM)	WATER CAPACITY (GAL.)
Brush Truck	Ford 550/2005	120	300
Engine	Ford 550/2001	1250	1000
Engine	Chevy C360/1986	1000	1000
Engine	Ford 550/1999	1250	1000

ESTIMATED GRANT FUNDING REQUEST:		LIST OF EQUIPMENT OR SUPPLIES TO PURCHASE WITH GRANT FUNDS:	
FEDERAL	\$ 4,033	NUMBER	DESCRIPTION
APPLICANT	\$ 4,033		See Attached List
COUNTY	\$		
TOTAL	\$ 8,066		
(Federal not more than 50% of total. Applicant at least 50% of total in matching funds.)			
		Total:	\$8,066

We understand that this is a 50 percent maximum cost-share program (Cooperative Forestry Assistance Act of 1978, PL 95-313), and that funds on deposit up to 50 percent of the actual purchase price of the items approved will be committed to our project. TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL DATA IN THIS APPLICATION ARE TRUE AND CORRECT. THE GOVERNING BODY OF THE APPLICANT HAS DULY AUTHORIZED THIS DOCUMENT.

Type Name of Authorized Representative Dustin Hinkel	Title County Administrator	Telephone Number: (850) 838-3500 ext107 FAX: (850) 838-3501
Signature of Authorized Representative	Date Signed and Submitted March 28, 2016	Email: dustin.hinkel@taylorcountygov.com

ASSURANCES — NON-CONSTRUCTION PROGRAMS

Note: Certain of these assurances may not be applicable to your project or program. If you have questions, please contact the awarding agency. Further, certain Federal awarding agencies may require applicants to certify to additional assurances. If such is the case, you will be notified.

As the duly authorized representative of the applicant I certify that the applicant:

1. Has the legal authority to apply for Federal assistance, and the institutional, managerial and financial capability (including funds sufficient to pay the non-Federal share of project costs) to ensure proper planning, management and completion of the project described in this application.
2. Will give the awarding agency, the Comptroller General of the United States, and if appropriate, the State, through any authorized representative, access to and the right to examine all records, books, papers, or documents related to the award; and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Will establish safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflict of interest, or personal gain.
4. Will initiate and complete the work within the applicable time frame after receipt of approval of the awarding agency.
5. Will comply with the Intergovernmental Personnel Act of 1970 (42 U.S.C. §§ 4728-4763) relating to prescribed standards for merit systems for programs funded under one of the nineteen statutes or regulations specified in Appendix A of OPM's Standards for a Merit System of Personnel Administration (5 C.F.R. 900, Subpart F).
6. Will comply with all Federal statutes relating to nondiscrimination. These include but are not limited to: (a) Title VI of the Civil Rights Act of 1964 (P.L. 88-352) which prohibits discrimination on the basis of race, color or national origin; (b) Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§ 1681-1683, and 1685-1686), which prohibits discrimination on the basis of sex; (c) Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), which prohibits discrimination on the basis of handicaps; (d) the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107), which prohibits discrimination on the basis of age;

(e) the Drug Abuse Office and Treatment Act of 1972 (P.L. 92-255), as amended, relating to nondiscrimination on the basis of drug abuse; (f) the Comprehensive Alcohol Abuse and Alcoholism Prevention, Treatment and Rehabilitation Act of 1970 (P.L. 91-616), as amended, relating to nondiscrimination on the basis of alcohol abuse or alcoholism; (g) §§ 523 and 527 of the Public Health Service Act of 1912 (42 U.S.C. 290-dd-3 and 290 ee-3), as amended, relating to confidentiality of alcohol and drug abuse patient records; (h) Title VIII of the Civil Rights Act of 1968 (42 U.S.C. § 3601 et seq.), as amended, relating to nondiscrimination in the sale, rental or financing of housing; (i) any other nondiscrimination provisions in the specific statute(s) under which application for Federal assistance is being made; and (j) the requirements of any other nondiscrimination statute(s) which may apply to the application.
7. Will comply, or has already complied, with the requirements of Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 961-646) which provide for fair and equitable treatment of persons displaced or whose property is acquired as a result of Federal or federally assisted programs. These requirements apply to all interests in real property acquired for project purposes regardless of Federal participation in purchases.
8. Will comply with the provisions of the Health Act (5 U.S.C. §§ 1501-1508 and 7324-7328) which limit the political activities of employees whose principal employment activities are funded in whole or in part with Federal funds.
9. Will comply, as applicable, with the provisions of the Davis-Bacon Act (40 U.S.C. §§ 276a to 276a-7), the Copeland Act (40 U.S.C. § 276c and 18 U.S.C. §§ 874), and the Contract Work Hours and Safety Standards Act (40 U.S.C. §§ 327-333), regarding labor standards for federally assisted construction subagreements.
10. Will comply, if applicable, with flood insurance purchase requirements of Section 102 (a) of the Flood Disaster Protection Act of 1973 (P.L. 93-234) which requires recipients in a special flood hazard area to participate in the program and to purchase flood insurance if the total cost of insurable construction and acquisition of \$10,000 or more.
11. Will comply with environmental standards which may be prescribed pursuant to the following: (a) institution of environmental quality control measures under the National Environmental Policy Act of 1969 (P.L. 91-190) and Executive Order (EO) 11514; (b) notification of violating facilities pursuant to EO 11738; (c) protection of wetlands pursuant to EO 11990; (d) evaluation of flood hazards in floodplains in accordance with EO 11988; (e) assurance of project consistency with the approved State management program developed under the Coastal Zone Management Act of 1972 (16 U.S.C. §§ 1451 et seq.); (f) conformity of Federal actions to State (Clear Air) Implementation Plans under Section 176(c) of the Clear Air Act of 1955, as amended (42 U.S.C. § 7401 et seq.); (g) protection of underground sources of drinking water under the Safe Drinking Water Act of 1974, as amended, (P.L. 93-523); and (h) protection of endangered species under the Endangered Species Act of 1973, as amended, (P.L. 93-205).
12. Will comply with the Wild and Scenic Rivers Act of 1968 (16 U.S.C. §§ 1271 et seq.) related to protecting components or potential components of the national wild and scenic rivers system.

V, B-5 (02/05)

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13. Will assist the awarding agency in assuring compliance with Section 106 of the National Historic Preservation Act of 1966, as amended (16 U.S.C. 470), EO 11593 (identification and protection of historic properties), and the Archeological and Historic Preservation Act of 1974 (16 U.S.C. 469a-1 et seq.).

14. Will comply with P.L. 93-348 regarding the protection of human subjects involved in research, development, and related activities supported by this award of assistance.

15. Will comply with the Laboratory Animal Welfare Act of 1966 (P.L. 89-544, as amended, 7 U.S.C. 2131 et seq.) pertaining to the care, handling, and treatment of warm blooded animals held for

research, teaching, or other activities supported by this award of assistance.

16. Will comply with the Lead-Based Paint Poisoning Prevention Act (42 U.S.C. §§ 4801 et seq.) which prohibits the use of lead based paint in construction or rehabilitation of residence structures.

17. Will cause to be performed the required financial and compliance audits in accordance with the Single Audit Act of 1984.

18. Will comply with all applicable requirements of all other Federal laws, executive orders, regulations and policies governing this program.

SIGNATURE OF AUTHORIZED CERTIFYING OFFICIAL		TITLE
		County Administrator
APPLICANT ORGANIZATION Taylor County Board of County Commissioners		DATE SUBMITTED

V, B-6 (02/05)
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Standard Form 424B (9-03)
Prescribed by OMB Circular A-102

U. S. DEPARTMENT OF AGRICULTURE

*Certification Regarding Debarment, Suspension, and Other
Responsibility Matters - Primary Covered Transactions*

This certification is required by the regulations implementing Executive Order 12549, Debarment and Suspension, 7 CFR Part 3017, Section 3017.510, Participants' responsibilities. The regulations were published as Part IV of the January 30, 1989, *Federal Register* (pages 4722-4733). Copies of the regulations may be obtained by contacting the Department of Agriculture agency offering the proposed covered transaction.

(Before completing certification, read instructions on reverse.)

- (1) The prospective primary participant certifies to the best of its knowledge and belief, that it and its principals:
 - (a) are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency;
 - (b) have not within a three-year period preceding this proposal been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (Federal, State or Local) transaction or contract under a public transaction; violation of Federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property;
 - (c) are not presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or Local) with commission of any of the offenses enumerated in paragraph (1)(b) of this certification; and
 - (d) have not within a three-year period preceding this application/proposal had one or more public transactions (Federal, State or Local) terminated for cause or default.
- (2) Where the prospective primary participant is unable to certify to any of the statements in this certification, such prospective participant shall attach an explanation to this proposal.

<small>ORGANIZATION NAME</small>	<small>PR/AWARD NUMBER OR PROJECT NAME</small>
Taylor County Board of County Commissioners	
<small>NAME AND TITLE OF AUTHORIZED REPRESENTATIVE</small>	
Dustin Hinkel, County Administrator	
<small>SIGNATURE</small>	<small>DATE</small>

INSTRUCTIONS FOR CERTIFICATION

1. By signing and submitting this form, the prospective primary participant is providing the certification set out on the reverse side in accordance with these instructions.
2. The inability of a person to provide the certification required below will not necessarily result in denial of participation in this covered transaction. The prospective participant shall submit an explanation of why it cannot provide the certification set out on this form. The certification or explanation will be considered in connection with the department or agency's determination whether to enter into this transaction. However, failure of the prospective primary participant to furnish a certification or an explanation shall disqualify such person from participation in this transaction.
3. The certification in this clause is a material representation of fact upon which reliance was placed when the department or agency determined to enter into this transaction. If it is later determined that the prospective primary participant knowingly rendered an erroneous certification, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.
4. The prospective primary participant shall provide immediate written notice to the department or agency to whom this proposal is submitted if at any time the prospective primary participant learns that its certification was erroneous when submitted or has become erroneous by reason of changed circumstances.
5. The terms "covered transaction," "debarred," "suspended," "ineligible," "lower tier covered transaction," "participant," "person," "primary covered transaction," "principal," "proposal," and "voluntarily excluded," as used in this clause, have the meanings set out in the Definitions and Coverage sections of the rules implementing Executive Order 12549. You may contact the department or agency to which this proposal is being submitted for assistance in obtaining a copy of those regulations.
6. The prospective primary participant agrees by submitting this form that, should the proposed covered transaction be entered into, it shall not knowingly enter into any lower tier covered transaction with a person who is debarred, suspended, declared ineligible, or voluntarily excluded from participation in this covered transaction, unless authorized by the department or agency entering into this transaction.
7. The prospective primary participant further agrees by submitting this form that it will include this clause titled "Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion - Lower Tier Covered Transactions," provided by the department or agency entering into this covered transaction, without modification, in all lower tier covered transactions and in all solicitations for lower tier covered transactions.
8. A participant in a covered transaction may rely upon a certification of a prospective participant in a lower tier covered transaction that it is not debarred, suspended, ineligible, or voluntarily excluded from the covered transaction, unless it knows that the certification is erroneous. A participant may decide the method and frequency by which it determines the eligibility of its principals. Each participant may, but is not required to, check the Nonprocurement List.
9. Nothing contained in the foregoing shall be construed to require establishment of a system of records in order to render in good faith the certification required by this clause. The knowledge and information of a participant is not required to exceed that which is normally possessed by a prudent person in the ordinary course of business dealings.
10. Except for transactions authorized under paragraph 6 of these instructions, if a participant in a covered transaction knowingly enters into a lower tier covered transaction with a person who is suspended, debarred, ineligible, or voluntarily excluded from participation in this transaction, in addition to other remedies available to the Federal Government, the department or agency may terminate this transaction for cause or default.

MES - FLORIDA
3789 62nd Avenue North
Pinellas Park, FL 33781

Telephone.....: 727-521-2135
Fax.....: 727-525-1819



Ship To:
TAYLOR COUNTY FIRE DEPT
501 Industrial Park Dr
Perry, FL 32347

Contact: Chief Cassel
Phone: 850-838-3522

Bill To:
TAYLOR COUNTY FD
Board of Cnty Commissioner
Suite 102, 108 N. Jefferson St
Perry, FL 32347

Quotation

Number.....: QT_00372434-2
Date.....: 10/27/2015
Page.....: 1 of 1
Sales order.....
Requisition.....
Your ref.....
Our ref.....: jmontgomer
Quotation deadline.....: 11/24/2015
Payment.....: Net 30
Sales Rep.....: jmontgomer
Terms of delivery.....: Supplier Pays Freight

Item number	Description	Size	Color	Quantity	Unit	Unit price	Amount
CVNG-804-822-41-KBT	VERIDIAN CUSTOM COAT AS PER SPEC'S			4.00	EA	740.00	2,960.00
TVNG-804-822-41-KBT	VERIDIAN CUSTOM TROUSER AS PER SPEC'S			4.00	EA	510.00	2,040.00
CMF14	TITAN 14" Leather Bunker Boot	10.0EEE	BLACK	4.00	EA	267.00	1,068.00
LF DECAL 725C	Leather Front with Decal Cowhide/Elkskin Glove Gauntlet	6in Large		4.00	EA	50.00	200.00
PACII-DS-FDN	100% NOMEX DOUBLE LAYER, DOUBLE SEAM CONSTRUCTION, FULL DRAP			4.00	EA	22.00	88.00
HT-TRA-EV1-ST.PETE	Honeywell EV1 Traditional Helmet—(St. Pete, FL)		BLACK	4.00	EA	250.00	1,000.00

This Quotation is subject to any applicable sales tax and shipping & handling charges that may apply.
Tax and shipping charges are considered estimated and will be re-calculated at the time of shipment to ensure they take into account the most current local tax information.

Sales balance	Total discount	S&H	Sales tax	Total
7,556.00	0.00	0.00	0.00	7,556.00 USD

1 additional 510.00
+ tax 51.00
8,066.00

All returns must be processed within 30 days of receipt and require a return authorization number and are subject to a restocking fee.
Custom orders are not returnable. Effective tax rate will be applicable at the time of invoice.

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to approve Form HUD-2880 which is required annually for Community Development Block Grant (CDBG) housing rehabilitation grant program recipients.

MEETING DATE REQUESTED:

April 4, 2016

Statement of Issue: Board to approve Form HUD-2880 required for the CDBG housing rehabilitation program.

Recommended Action: Board of approve Form HUD-2880.

Fiscal Impact: This reporting is required by the CDBG Program. The County received and is currently administering a CDBG grant in the amount of \$750,000.

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The County is required to submit the Form HUD 2880 annually when having an open CDBG grant. The Form discloses who has received payment with the grant funds and for what project or activity.

Attachments: Form HUD-2880.

Applicant/Recipient Disclosure/Update Report

U.S. Department of Housing
and Urban Development

OMB Approval No. 2510-0011 (exp. 11/30/2018)

Instructions. (See Public Reporting Statement and Privacy Act Statement and detailed instructions on page 2.)

Applicant/Recipient Information

Indicate whether this is an Initial Report ☐ or an Update Report ☐

1. Applicant/Recipient Name, Address, and Phone (include area code):

Taylor County BOCC, P.O. Box 620, Perry, FL 32347

(850) 838-3500

3. HUD Program Name

Florida Small Cities CDBG Program, CFDA 14.228

2. Social Security Number or
Employer ID Number:

596000879

4. Amount of HUD Assistance
Requested/Received

\$750,000.00

5. State the name and location (street address, City and State) of the project or activity:

Housing Rehabilitation/One-for-One Replacement in the unincorporated parts of the County

Part I Threshold Determinations

1. Are you applying for assistance for a specific project or activity? These terms do not include formula grants, such as public housing operating subsidy or CDBG block grants. (For further information see 24 CFR Sec. 4.3).

☐ Yes ☒ No

2. Have you received or do you expect to receive assistance within the jurisdiction of the Department (HUD), involving the project or activity in this application, in excess of \$200,000 during this fiscal year (Oct. 1 - Sep. 30)? For further information, see 24 CFR Sec. 4.9

☒ Yes ☐ No

If you answered "No" to either question 1 or 2, **Stop!** You do not need to complete the remainder of this form. **However,** you must sign the certification at the end of the report.

Part II Other Government Assistance Provided or Requested / Expected Sources and Use of Funds.

Such assistance includes, but is not limited to, any grant, loan, subsidy, guarantee, insurance, payment, credit, or tax benefit.

Department/State/Local Agency Name and Address	Type of Assistance	Amount Requested/Provided	Expected Uses of the Funds
Taylor County - SHIP Funds	SHIP Funds	\$125,000.00	One-for-One Replacement

(Note: Use Additional pages if necessary.)

Part III Interested Parties. You must disclose:

- All developers, contractors, or consultants involved in the application for the assistance or in the planning, development, or implementation of the project or activity and
- any other person who has a financial interest in the project or activity for which the assistance is sought that exceeds \$50,000 or 10 percent of the assistance (whichever is lower).

Alphabetical list of all persons with a reportable financial interest in the project or activity (For individuals, give the last name first)	Social Security No. or Employee ID No.	Type of Participation in Project/Activity	Financial Interest in Project/Activity (\$ and %)
Jordan & Associates	45-3819385	CDBG Administration	\$95,625.00
FLA Homes Inc.	59-3231259	Housing Rehab 1-for-1	\$466,129.00
Jerry Walters Construction Inc.	33-1075972	1 for 1 Replacement	\$79,145.00
J. G. Parker Enterprises, Inc.	59-3561692	1 for 1 Replacement	\$63,950.00

(Note: Use Additional pages if necessary.)

Certification

Warning: If you knowingly make a false statement on this form, you may be subject to civil or criminal penalties under Section 1001 of Title 18 of the United States Code. In addition, any person who knowingly and materially violates any required disclosures of information, including intentional non-disclosure, is subject to civil money penalty not to exceed \$10,000 for each violation.

I certify that this information is true and complete.

Signature:

Date: (mm/dd/yyyy)

X

Jody Devane, Chairmain
Taylor County Board of County Commissioners
201 East Green Street
Perry, Florida 32347

Form Prepared by:
Jordan & Associates
P.O. Box 65579, Orange Park FL 32065

Public reporting burden for this collection of information is estimated to average 2.0 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. This agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless that collection displays a valid OMB control number.

Privacy Act Statement. Except for Social Security Numbers (SSNs) and Employer Identification Numbers (EINs), the Department of Housing and Urban Development (HUD) is authorized to collect all the information required by this form under section 102 of the Department of Housing and Urban Development Reform Act of 1989, 42 U.S.C. 3531. Disclosure of SSNs and EINs is voluntary. HUD is authorized to collect this information under the Housing and Community Development Act of 1987 42 U.S.C.3543 (a). The SSN or EIN is used as a unique identifier. The information you provide will enable HUD to carry out its responsibilities under Sections 102(b), (c), and (d) of the Department of Housing and Urban Development Reform Act of 1989, Pub. L. 101-235, approved December 15, 1989. These provisions will help ensure greater accountability and integrity in the provision of certain types of assistance administered by HUD. They will also help ensure that HUD assistance for a specific housing project under Section 102(d) is not more than is necessary to make the project feasible after taking account of other government assistance. HUD will make available to the public all applicant disclosure reports for five years in the case of applications for competitive assistance, and for generally three years in the case of other applications. Update reports will be made available along with the disclosure reports, but in no case for a period generally less than three years. All reports, both initial reports and update reports, will be made available in accordance with the Freedom of Information Act (5 U.S.C. §552) and HUD's implementing regulations at 24 CFR Part 15. HUD will use the information in evaluating individual assistance applications and in performing internal administrative analyses to assist in the management of specific HUD programs. The information will also be used in making the determination under Section 102(d) whether HUD assistance for a specific housing project is more than is necessary to make the project feasible after taking account of other government assistance. You must provide all the required information. Failure to provide any required information may delay the processing of your application, and may result in sanctions and penalties, including imposition of the administrative and civil money penalties specified under 24 CFR §4.38.

Note: This form only covers assistance made available by the Department. States and units of general local government that carry out responsibilities under Sections 102(b) and (c) of the Reform Act must develop their own procedures for complying with the Act.

Instructions

Overview.

A. Coverage. You must complete this report if:

- (1) You are applying for assistance from HUD for a specific project or activity and you have received, or expect to receive, assistance from HUD in excess of \$200,000 during the fiscal year;
- (2) You are updating a prior report as discussed below; or
- (3) You are submitting an application for assistance to an entity other than HUD, a State or local government if the application is required by statute or regulation to be submitted to HUD for approval or for any other purpose.

B. Update reports (filed by "Recipients" of HUD Assistance):

General. All recipients of covered assistance must submit update reports to the Department to reflect substantial changes to the initial applicant disclosure reports.

Line-by-Line Instructions.

Applicant/Recipient Information.

All applicants for HUD competitive assistance, must complete the information required in blocks 1-5 of form HUD-2880:

1. Enter the full name, address, city, State, zip code, and telephone number (including area code) of the applicant/recipient. Where the applicant/recipient is an individual, the last name, first name, and middle initial must be entered.
2. Entry of the applicant/recipient's SSN or EIN, as appropriate, is optional.
3. Applicants enter the HUD program name under which the assistance is being requested.
4. Applicants enter the amount of HUD assistance that is being requested. Recipients enter the amount of HUD assistance that has been provided and to which the update report relates. The amounts are those stated in the application or award documentation. NOTE: In the case of assistance that is provided pursuant to contract over a period of time (such as project-based assistance under section 8 of the United States Housing Act of 1937), the amount of assistance to be reported includes all amounts that are to be provided over the term of the contract, irrespective of when they are to be received.
5. Applicants enter the name and full address of the project or activity for which the HUD assistance is sought. Recipients enter the name and full address of the HUD-assisted project or activity to which the update report relates. The most appropriate government identifying number must be used (e.g., RFP No.; IFB No.; grant announcement No.; or contract, grant, or loan No.) Include prefixes.

Part I. Threshold Determinations - Applicants Only

Part I contains information to help the applicant determine whether the remainder of the form must be completed. **Recipients filing Update Reports should not complete this Part.**

If the answer to **either** questions 1 or 2 is No, the applicant need not complete Parts II and III of the report, but must sign the certification at the end of the form.

Part II. Other Government Assistance and Expected Sources and Uses of Funds.

A. Other Government Assistance. This Part is to be completed by both applicants and recipients for assistance and recipients filing update reports. Applicants and recipients must report any other government assistance involved in the project or activity for which assistance is sought. Applicants and recipients must report any other government assistance involved in the project or activity. Other government assistance is defined in note 4 on the last page. For purposes of this definition, other government assistance is expected to be made available if, based on an assessment of all the circumstances involved, there are reasonable grounds to anticipate that the assistance will be forthcoming.

Both applicant and recipient disclosures must include all other government assistance involved with the HUD assistance, as well as any other government assistance that was made available before the request, but that has continuing vitality at the time of the request. Examples of this latter category include tax credits that provide for a number of years of tax benefits, and grant assistance that continues to benefit the project at the time of the assistance request.

The following information must be provided:

1. Enter the name and address, city, State, and zip code of the government agency making the assistance available.
 2. State the type of other government assistance (e.g., loan, grant, loan insurance).
 3. Enter the dollar amount of the other government assistance that is, or is expected to be, made available with respect to the project or activities for which the HUD assistance is sought (applicants) or has been provided (recipients).
 4. Uses of funds. Each reportable use of funds must clearly identify the purpose to which they are to be put. Reasonable aggregations may be used, such as "total structure" to include a number of structural costs, such as roof, elevators, exterior masonry, etc.
- B. Non-Government Assistance. Note that the applicant and recipient disclosure report must specify all expected sources and uses of funds - both from HUD **and any other source** - that have been or are to be, made available for the project or activity. Non-government sources of

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO APPROVE A REQUEST BY DAN SCHAPPER FROM CROSSPOINT BAPTIST FELLOWSHIP TO HOLD A PUBLIC GATHERING ON THE STEPS OF THE COURTHOUSE (EAST SIDE) ON THURSDAY, MAY 5, 2016, (THE NATIONAL DAY OF PRAYER) AS AGENDAED BY THE COUNTY ADMINISTRATOR.

MEETING DATE REQUESTED:

APRIL 4, 2016

Statement of Issue:

THE NATIONAL DAY OF PRAYER IS MAY 5, 2016. LOCAL AREA CHURCHES ARE ORGANIZING A PUBLIC GATHERING ON THAT DAY AND WISH TO HOST IT ON THE STEPS OF THE COURTHOUSE ON THE EAST SIDE OF THE BUILDING AS THEY DID IN 2015.

Recommended Action:

Fiscal Impact:

Budgeted Expense:

Submitted By:

COUNTY ADMINISTRATOR FOR DAN SCHAPPER

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments:

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE ON A RENEWAL CONTRACT WITH DATAWORKS PLUS FOR MAINTENANCE AND SUPPORT OF THE JAIL'S RAPID-ID SYSTEM, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

MEETING DATE REQUESTED:

APRIL 4, 2016

Statement of Issue: THIS IS AN ANNUAL RENEWAL. THERE IS NO INCREASE IN THE RENEWAL RATE FROM LAST FY.

Recommended Action: RATIFY THE COUNTY ADMINISTRATOR'S SIGNATURE

Fiscal Impact: \$1802.64

Budgeted Expense: YES

Submitted By: COUNTY ADMINISTRATOR

Contact: 838-3500 X 7

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

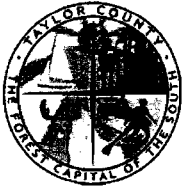
Options:

Attachments:

BOCC #'s	item
1452	File Cabinet/ legal size
1459	Executive Desk
2040	Tan File Cabinet
2523	5 Drawer Cabinet
4347	Desk Workstation
6228	air conditioner
6485	monitor
6387	table
5313	cooler
6121	ac unit
5396	ac unit
3743	chainsaw
4755	radio
4755-001	radio
4755-002	radio
4792	stepladder
4920	digital ammeter
5776	compressor
6502	radio
1824	table
2082	cabinet
2085	cabinet
2087	cabinet
2601	open file unit
2602	open file unit
4804	printer
4909	computer
4910	monitor
6531	camera
6541	monitor
6544	ms office
6218	radio

BOCC #S	Item	
4822	generator	
4264	credenza	
4263	Desk Workstation	
	weed trimmer	id#20120900142
	weed trimmer	id#2012100124
3273	File Cabinet	
5594	camera	
6627	drafting table	
5056	2 door file	
5058	desk	
6199	printer	
6629	cabinet	
6332	chair	
6332	chair	
6400	cabinet	
6535	bookcase	
5555	cabinet	
5556	cabinet	
6508	cabinet	
6202	ac unit	
6398	monitor	
9003-001	fencing	
9003-005	improvement to cvl airport	
5535	tilt ladder	
9191	fish camp landing	
1451	desk	
3209	desk	
6856	bedliner	
6856	strobe light	
9037-004	material for blue springs	
9037-021	animal control improvement	
3126	utility shed	

BOCC#s	Item
3210	chair
3432	medicak cabinet
3525	fan motor
5305	belt fan
6280	file cabinet
5554	monitor
6367	call system
6403	call system
2909	letter board
3602	cabinet
6182	cabinet
6364	cabinet
6365	cabinet
9007	sub block 55
9010	w.a. henry addition
9011	a.b. Mcrae sub block
9028	pt lot 4 block
4223	drawer
4185	beverage cart
4183	desk
3602	cabinet
2909	letter board
6182	l shaped desk
6183	file cabinet
6364	file cabinet
6365	file cabinet
6541	monitor
5322	transfer tank
5323	12 v transfer pump
6551	redi heater
6552	air compressor
3601	file cabinet



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

1452

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: HUMAN RESOURCES

DEPT 0111

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item <i>Legal</i> FILE CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: ~~SURPLUS~~

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) HR office in Annex

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

1459

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: PURCHASING
Department Name

DEPT 0118
Number

DATE: 3/16/16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item EXECUTIVE DESK	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission _____ Date _____

Jan Taylor
Department Head

[Signature]
Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

2040

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: HUMAN RESOURCES

DEPT 0111

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item TAN FILE CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: ~~SURPLUS~~

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) HR office in Annex

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

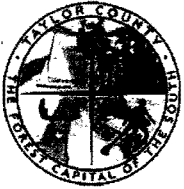
[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
2523

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: HUMAN RESOURCES

DEPT 0111

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item CABINET 5 DRAWER	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: ~~SURPLUS~~

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) Vault in Annex

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4347

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: HUMAN RESOURCES

DEPT 0111

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
DELUXE DESK WORKSTATION		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: ~~SURPLUS~~ REMOVED

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) HR office in Annex

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: PURCHASING
Department Name

6228
Clerk Asset Number:
DEPT 0118
Number

Board Asset Number:
DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item AIR CONDITIONER	Room #	Make
Model	Year	Serial Number QP0601237
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date

Jay Taylor
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

6485

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: PURCHASING

DEPT 0118

DATE: 3-16-14

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
MONITOR		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Jerry Taylor
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

6485-6387
Clerk Asset Number:

Board Asset Number:

FROM: ADMINISTRATIVE BUILDING

DEPT 0162

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
TABLE		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D M...
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: OLD POST OFFICE
Department Name

5313
Clerk Asset Number:
DEPT 0164
Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item WATER COOLER	Room #	Make
Model	Year	Serial Number 050717497
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

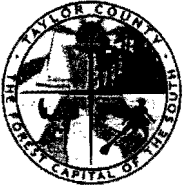
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Dimer
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: OLD POST OFFICE

Department Name

6121

Clerk Asset Number:

DEPT 0164

Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item AC UNIT	Room #	Make
Model	Year	Serial Number EAC21763L
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

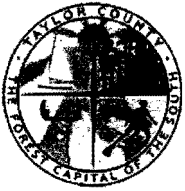
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Dume
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: HISTORICAL SOCIETY

Department Name

DEPT 0166
Number

5396

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item AC UNIT	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

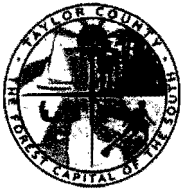
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W. A. M...
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: FACILITIES MAINTENANCE

Department Name

DEPT 0170

Number

3743

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item CHAINSAW	Room #	Make
Model	Year	Serial Number 4280325
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

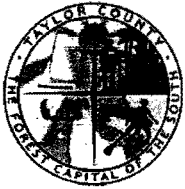
W D Memei
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: FACILITIES MAINTENANCE

Department Name

DEPT 0170

Number

4755

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item RADIO W/ ACCESSORIES	Room #	Make
Model	Year	Serial Number 80U370038
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Mune
Department Head

Chairman Signature
[Signature]
County Administrator Approval
[Signature]

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4755-001

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: FACILITIES MAINTENANCE

DEPT 0170

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item RADIO W/ ACCESSORIES	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required)

Location: (required)

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____
Date

W D Hunter
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4755-002

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: FACILITIES MAINTENANCE

DEPT 0170

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item RADIO W/ ACCESSORIES	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Dumei
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4792

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: FACILITIES MAINTENANCE

DEPT 0170

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item STEPLADDER	Room #	Make
Model	Year	Serial Number 2632395298
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA


Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required)

Location: (required)

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____
Date


Department Head

Chairman Signature


County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: FACILITIES MAINTENANCE

Department Name

DEPT 0170
Number

4920
Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item DIGITAL AMMETER	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT

TAYLOR COUNTY, FLORIDA

5776

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: FACILITIES MAINTENANCE

DEPT 0170

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item AIR COMPRESSOR	Room #	Make
Model	Year	Serial Number C-153427
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Lamer
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: FACILITIES MAINTENANCE

Department Name

DEPT 0170

Number

6502

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item HANDHELD RADIO	Room #	Make
Model	Year	Serial Number 5D930910
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W W Dumei
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

DEPT 0210

Number

1824

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
STUDY TABLE		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

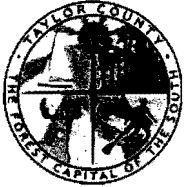
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Dumei
Department Head

Chairman Signature
[Signature]
County Administrator Approval
[Signature]

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

2082
Clerk Asset Number:
DEPT 0210
Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILING CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Mameri
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

2085
Clerk Asset Number:
DEPT 0210
Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILING CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

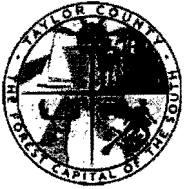
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D [Signature]
Department Head

[Signature]
Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

DEPT 0210

Number

2087

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILING CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

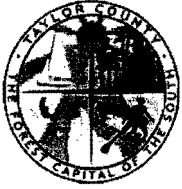
W D Lumei
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

DEPT 0210

Number

2601

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
STANDING OPEN FILE UNIT		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

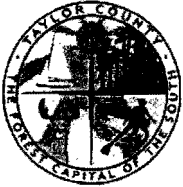
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Muneir
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

DEPT 0210

Number

2602

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
STANDING OPEN FILE UNIT		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Greene
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT

TAYLOR COUNTY, FLORIDA

4804

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: BUILDING DEPT.

DEPT 0210

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

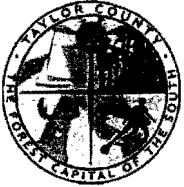
Name of Item	Room #	Make
printer		HP
Model	Year	Serial Number
1100 ASE		USJD002270
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: <u>SURPLUS</u>	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) _____	
Location: (required) _____	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____	
<u>W D Dumei</u> Department Head	<u>[Signature]</u> Chairman Signature County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

DEPT 0210

Number

4909

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item COMPUTER	Room #	Make DELL
Model CELERON	Year	Serial Number 83LWU
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Armer
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

4910

Clerk Asset Number:

Board Asset Number:

FROM: BUILDING DEPT.

DEPT 0210

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item MONITOR	Room #	Make DELL
Model	Year	Serial Number 1780R-A78PT
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Danner
Department Head

Dust
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

22
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

DEPT 0211

Number

6531

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item CAMERA	Room #	Make DELL
Model	Year	Serial Number 255980761
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D [Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

6541
Clerk Asset Number:

Board Asset Number:

FROM: BUILDING DEPT.

DEPT 0211
Number

DATE: 3-16-16

Department Name

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item MONITOR	Room #	Make
Model	Year	Serial Number N0WC2924294056525V
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

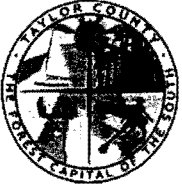
W D Dumein
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING DEPT.

Department Name

DEPT 0215

Number

6544

Clerk Asset Number:

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item MS OFFICE	Room #	Make
Model	Year	Serial Number 9994551833303
Other Description: <i>Software</i>		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

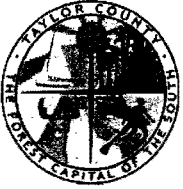
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D [Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

6218

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY PROJECT

DEPT 0171

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
RADIO		
Model	Year	Serial Number
		4D300696
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA


Type of Disposition: SURPLUS


**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4822

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY PROJECT

DEPT 0171

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
GENERATOR		
Model	Year	Serial Number
		79200101
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

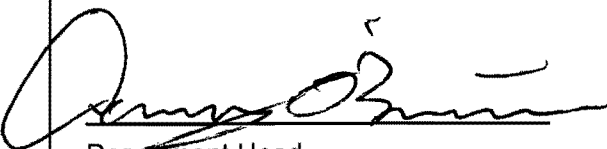
Type of Disposition: SURPLUS

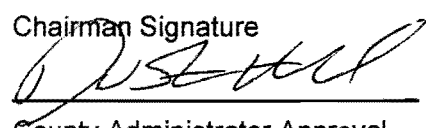
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____


Location: (required) _____

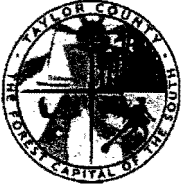
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4264

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY PROJECT

DEPT 0171

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item CREDENZA	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

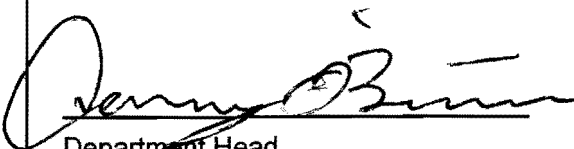
Type of Disposition: SURPLUS

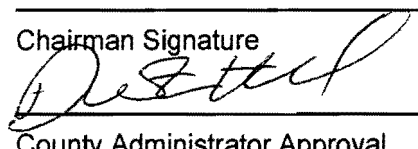
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

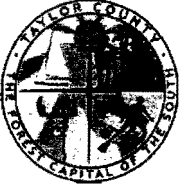
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4263

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY PROJECT

DEPT 0171

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item DESK	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

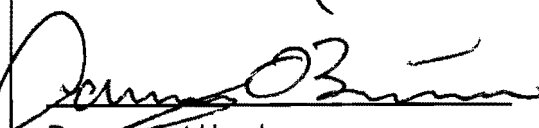
Type of Disposition: SURPLUS

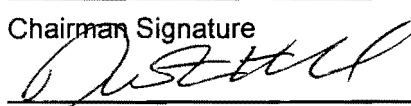
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Inmate
Department Name

Clerk Asset Number:
DEPT 0172
Number

Board Asset Number:
DATE: 3/23/14

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item <u>Weed trimmer</u>	Room #	Make <u>Husqvarna</u>
Model	Year	Serial Number <u>20120900142</u>
Other Description: <u>purchased 8/6/2012</u>		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) junked

Location: (required) CHP Building

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: L. M. M. M.
Department Name

Clerk Asset Number:
DEPT 0172
Number

Board Asset Number:
DATE: 3/23/14

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item <u>Husqvarna</u>	Room #	Make
Model	Year	Serial Number <u>2010 2100124</u>
Other Description: <u>Weed trimmer</u> <u>purchased 2010</u>		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) junked

Location: (required) City Building

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
3273

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: GRANTS

DEPT 0114

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

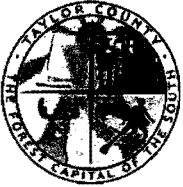
Melinda Lee
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT

TAYLOR COUNTY, FLORIDA

5594

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: GRANTS

DEPT 0114

DATE: 3-16-16

Department Name

Number

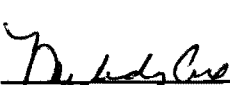
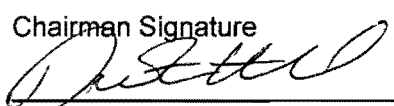
To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
CAMERA		
Model	Year	Serial Number
		436118
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required)	
Location: (required)	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____	
 Department Head	 Chairman Signature
	County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
6627

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: GRANTS

DEPT 0114

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item DRAFTING TABLE	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Nelody Cox
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: VETERANS SERVICE

Department Name

DEPT 0350

Number

5056

Clerk Asset Number:

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
2 DOOR FILE		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Chairman Signature _____

County Administrator Approval _____

Department Head _____

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: VETERANS SERVICE

Department Name

DEPT 0350
Number

5058

Clerk Asset Number:

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item F10922 DESK	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Melody Card
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: VETERANS SERVICE

Department Name

DEPT 0350
Number

6199

Clerk Asset Number:

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item PRINTER	Room #	Make
Model	Year	Serial Number 311A1024002
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Nubdy Cox
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: VETERANS SERVICE

Department Name

DEPT 0350
Number

6629

Clerk Asset Number:

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILING CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: TRANS DISADVANTAGE PLANNING DEPT 0401

Department Name

6332

Clerk Asset Number:

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
CHAIR		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		
<i>Chair was remain in department. It is only being disposed of as it was \$1,000.</i>		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

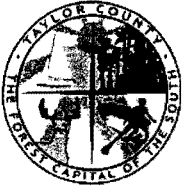
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Melody Lee
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: TRANS DISADVANTAGE PLANNING DEPT 0401

Department Name

6333

Clerk Asset Number:

Board Asset Number:

DATE:

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
CHAIR		
Model	Year	Serial Number

Other Description:

Purchased with Grant: Yes/No? ☒ Yes ☒ No If 'Yes' please explain reason to allow disposition below.

Chair will remain in department. It is only being disposed as it had a cost of \$1,000.00. In addition the chair is over five years old per the grant terms.

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required)

Location: (required)

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission:

Date

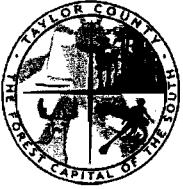
Nelody Lee
Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

6400

Clerk Asset Number:

Board Asset Number:

FROM: TRANS DISADVANTAGE PLANNING DEPT 0401

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILING CABINET	Room #	Make
Model	Year	Serial Number

Other Description:

Purchased with Grant: Yes/No? ☒ Yes ☐ No If 'Yes' please explain reason to allow disposition below.

The filing cabinet will remain in the department. It is only being dispositioned as the cost of the cabinet was \$1,000.00

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: TRANS DISADVANTAGE PLANNING DEPT 0401

Department Name

6535

Clerk Asset Number:

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
5 SHELF BOOKCASE		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		
<i>The bookcase will remain within the department. It is only being</i>		

DISPOSITION DATA

dispositioned due to having a purchase cost of \$1,000.00

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Melody Lee
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
5555

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: _____

FROM: SHIP GRANT 01-02

DEPT 0408

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
5 DRAWER HON FILE CABINET		
Model	Year	Serial Number

Other Description:

Purchased with Grant: Yes/No? ☒ Yes ☒ No If 'Yes' please explain reason to allow disposition below.

The Cabinet will remain within the department. It is only being disposed of due to having a purchase cost of 2,1,000.00

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

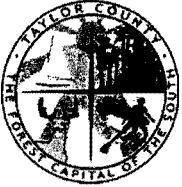
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____
Date

[Signature]
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT

TAYLOR COUNTY, FLORIDA

5556

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: SHIP GRANT 01-02

DEPT 0408

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
5 DRAWER HON FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below. <i>The cabinet will remain in the department. It is only being disposed as the purchase cost was <1,000.</i>		

DISPOSITION DATA

Type of Disposition: <u>SURPLUS</u>	
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) _____	
Location: (required) _____	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____	
<u><i>Nelody Cro</i></u> Department Head	<u><i>[Signature]</i></u> Chairman Signature <u><i>[Signature]</i></u> County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT

TAYLOR COUNTY, FLORIDA

6508

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: SHIP GRANT 2004-2005

DEPT 0410

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below. <i>The Cabinet will remain in the department. It is only being dispositioned due to having a purchase cost of \$1,000.00</i>		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

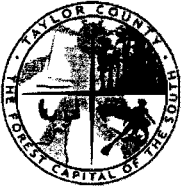
Melody Corp
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS
FROM: AIRPORT OPERATIONS

Department Name

6202
Clerk Asset Number:
DEPT 0500
Number

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item <i>D.C. Unit</i>	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

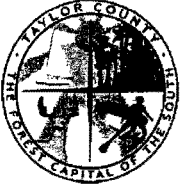
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Melody Cox
Department Head

Chairman Signature
D. Stettin
County Administrator Approval

Date Removed From Asset Records

(Signature)
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
6398

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: _____

FROM: AIRPORT OPERATIONS

DEPT 0500
Number

DATE: _____

Department Name

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
MONITOR		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Chairman Signature _____

Department Head _____

County Administrator Approval _____

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

9003-001

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: AIRPORT OPERATIONS

DEPT 0500

DATE:

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item 8X8 FENCING	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

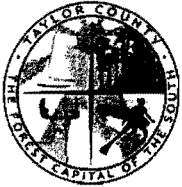
Nelody Cox
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS
FROM: AIRPORT OPERATIONS

9003-005
Clerk Asset Number:

Board Asset Number:

Department Name

DEPT 0500
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
IMPROVEMENT TO CVL AIRPORT		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

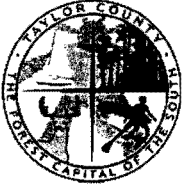
[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
5535

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: _____

FROM: AIRPORT OPERATIONS

DEPT 4010

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item TILT AND ROLL STEP LADDER	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Nelody Cox
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: FBIP WILLIAMS FISH CAMP

Department Name

DEPT 0491
Number

9191

Clerk Asset Number:

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
WILLIAM FISH CAMP LNDG		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below. <i>This site is owned by US Fish & Wildlife Service and the County has a 25 year Memorandum of Agreement with USFWS to manage and</i>		

DISPOSITION DATA

Type of Disposition: <u>SURPLUS</u>	<i>2014-2015 with Florida Bowling Improvement Funds and USFWS funds. These funds also require the County to manage and maintain the site for 25 years.</i>
** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.	
Explanation for Disposal: (required) _____	
Location: (required) _____	
APPROVED <input type="checkbox"/> DENIED <input type="checkbox"/> By the Taylor County Board of Commission: _____ Date _____	
<i>Melinda Cox</i> Department Head	<i>[Signature]</i> Chairman Signature County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

1451

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: RECYCLING
Department Name

DEPT 0260
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
EXECUTIVE WALNUT DESK		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Dary Wambolt
Department Head

Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

3209

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: _____

FROM: RECYCLING

DEPT 0260

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
DESK		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

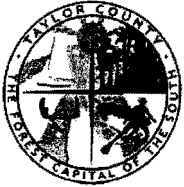
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Larry Wambert
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: RECYCLING

Department Name

DEPT 0260

Number

6856

Clerk Asset Number:

Board Asset Number:

DATE:

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item BEDLINER	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gary Wambolt
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: RECYCLING

Department Name

6856

Clerk Asset Number:

DEPT 0260

Number

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
STROBE LIGHT / LIGHT BAR		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

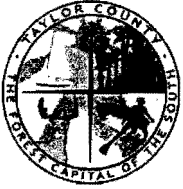
Gary Wambolt
Department Head

Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: RECYCLING

Department Name

9037-004

Clerk Asset Number:

DEPT 0260

Number

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
MATERIAL FOR BLUE SPGS		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

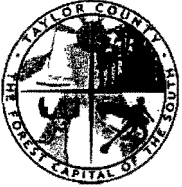
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gary Wambolt
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: RECYCLING

Department Name

9037-021

Clerk Asset Number:

DEPT 0260

Number

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
ANIMAL CTRL IMPROV.		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

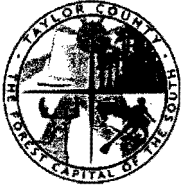
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gary Wambolt
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

3126

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: Reapling
Department Name

DEPT 0261
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
UTILTIY SHED		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

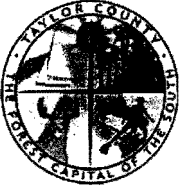
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gary Wambolt
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
3210

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: _____

FROM: RECYCLING
Department Name

DEPT 0260
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item CHAIR	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

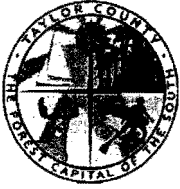
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gary Wambolt
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

3432

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: RECYCLING
Department Name

DEPT 0260
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
ZEE MEDICAL CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

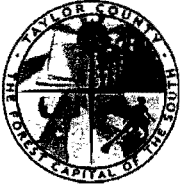
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gary Wambolt
Department Head

[Signature]
Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

3525
Clerk Asset Number:

Board Asset Number:

FROM: RECYCLING
Department Name

DEPT 0260
Number

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FAN MOTOR		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

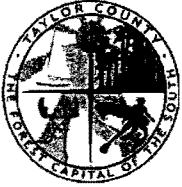
Larry Wambert
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: RECYCLING
Department Name

5305
Clerk Asset Number:
DEPT 0260
Number

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item 48IN. BELT DRIVEN FAN	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

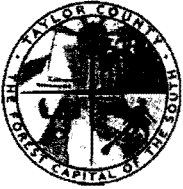
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Dary Wambolt
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: INFO. TECH

Department Name

6208

Clerk Asset Number:

DEPT 0113

Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA


Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

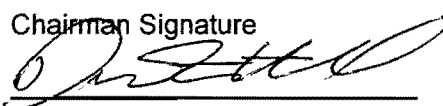
Explanation for Disposal: (required) _____

Location: (required) Info Dept

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____




Department Head



Chairman Signature
County Administrator Approval

Date Removed From Asset Records



Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: INFO. TECH

Department Name

5554

Clerk Asset Number:

DEPT 0113

Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
VEIWSOINIC 15' MONITOR		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) REMOVED

Location: (required) NO longer on inventory

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Thomas Copeland
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
6367

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: INFO. TECH

DEPT 0113

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item CONFERENCE CALL SYSTEM	Room #	Make
Model	Year	Serial Number A2041200FD93
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) Speaker not operating

Location: (required) Dis

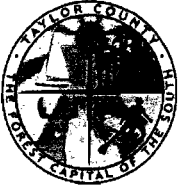
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
6403

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: INFO. TECH

DEPT 0113

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item CONFERENCE CALL SYSTEM	Room #	Make
Model	Year	Serial Number FTX0909YOLO
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) See Maffuecturing

Location: (required) Dis

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA
2909

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number: _____

Board Asset Number: _____

FROM: COUNTY MANAGER

DEPT 0110

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
48X36 ILLIMATED LT. BOARD		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

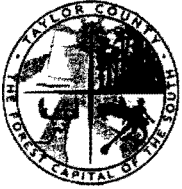
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

County Administrator
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

3602

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY MANAGER

DEPT 0110

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

County Administrator
Department Head

Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT

TAYLOR COUNTY, FLORIDA

6182

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY MANAGER

DEPT 0110

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILE CABINET 2 DRAWER	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

County Administrator
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

6364

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY MANAGER

DEPT 0110

DATE:

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required)

Location: (required)

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission:

Date

County Administrator

Department Head

Chairman Signature

[Signature]

County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

6365

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY MANAGER

DEPT 0110

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

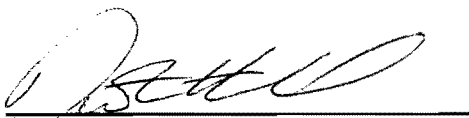
Type of Disposition: SURPLUS

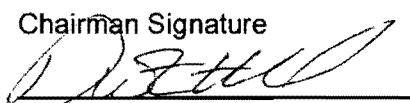
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

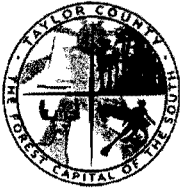
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head

Chairman Signature

County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING AND LANDS

Department Name

DEPT 900
Number

9007

Clerk Asset Number:

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
STEIN SUB BLOCK 55		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

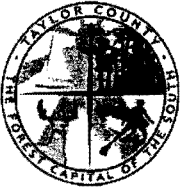
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

County Administrator
Department Head

Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING AND LANDS

Department Name

DEPT 900

Number

9010

Clerk Asset Number:

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
W.A. HENDRY ADDITION		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

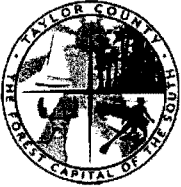
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

County Administrator
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING AND LANDS

Department Name

9011
Clerk Asset Number:
DEPT 900
Number

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
A. B. MCRAE SUB BLOCK		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

County Administrator
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BUILDING AND LANDS

Department Name

9028
Clerk Asset Number:
DEPT 900
Number

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
PT LOT 4 BLK		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

County Administrator
Department Head

Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

4223
Clerk Asset Number:

Board Asset Number:

FROM: BOCC
Department Name

DEPT 0105
Number

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item 2 DRAWER FILE	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: BOCC
Department Name

4185
Clerk Asset Number:
DEPT 0105
Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item MOBILE BEVERAGE CART	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

4183

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: BOCC
Department Name

DEPT 0105
Number

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item DESK	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

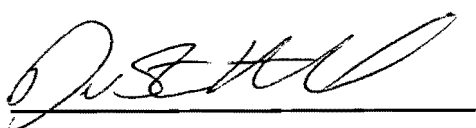
Type of Disposition: SURPLUS

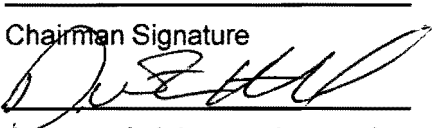
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____


Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: COUNTY MANAGER

Department Name

3602

Clerk Asset Number:

DEPT 0110

Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILE CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

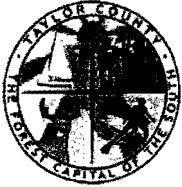
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

2909

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY MANAGER

DEPT 0110

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item ILLUMINATED LETTER BOARD	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

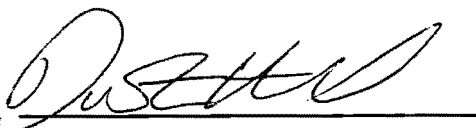
Type of Disposition: SURPLUS

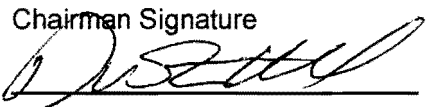
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**


Explanation for Disposal: (required) _____

Location: (required) _____


APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

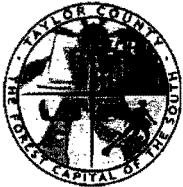

Department Head


Chairman Signature


County Administrator Approval

Date Removed From Asset Records


Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: COUNTY MANAGER

Department Name

6182

Clerk Asset Number:

DEPT 0110

Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item L-SHAPED DESK	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

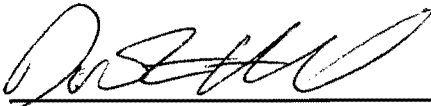
Type of Disposition: SURPLUS

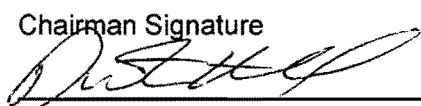
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

6183

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY MANAGER

DEPT 0110

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA


Type of Disposition: SURPLUS


**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

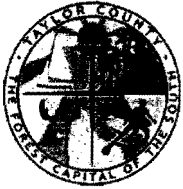
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: COUNTY MANAGER

Department Name

6364

Clerk Asset Number:

DEPT 0110

Number

Board Asset Number:

DATE: 3-16-16

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item FILE CABINET	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

[Signature]
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

6365

TO: BOARD OF COUNTY COMMISSIONERS

Clerk Asset Number:

Board Asset Number:

FROM: COUNTY MANAGER

DEPT 0110

DATE: 3-16-16

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

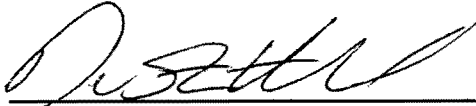
Type of Disposition: SURPLUS

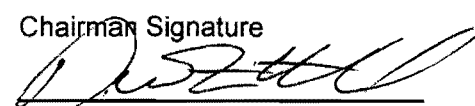
**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

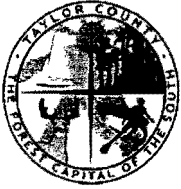
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____


Department Head


Chairman Signature
County Administrator Approval

Date Removed From Asset Records

Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: Code Enforcement
Department Name

DEPT 0211
Number

6541
Clerk Asset Number:

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
Monitor		17 in
Model	Year	Serial Number
DEll		CN0WC2924294056525V8
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: Surplus

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

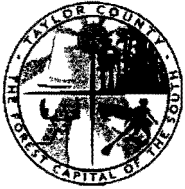
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

W D Diner
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: RECYCLING
Department Name

5322
Clerk Asset Number:
DEPT 0260
Number

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FUEL TRANSFER TANK		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

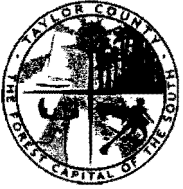
Gary Wambolt
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS
FROM: RECYCLING DEPT 0260 Clerk Asset Number: 53213 Board Asset Number: _____
Department Name Number DATE: _____

To Whom It May Concern:
The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item <u>12V fuel Transfer Tank</u> <u>with pump / w net</u>	Room #	Make
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

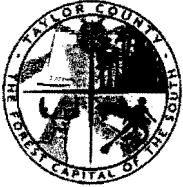
APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gay Wambolt
Department Head

[Signature]
Chairman Signature
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: RECYCLING
Department Name

DEPT 0260
Number

5322-6551
Clerk Asset Number:

Board Asset Number:

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
REDI HEATER		
Model	Year	Serial Number
		017041402
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

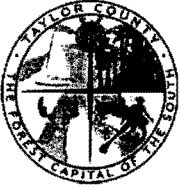
Mary Wamuk
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

6552

Clerk Asset Number:

Board Asset Number:

FROM: RECYCLING

DEPT 0260

DATE: _____

Department Name

Number

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
AIR COMPRESSOR		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Gary Wambolt
Department Head

Chairman Signature
[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager



DISPOSITION OF ASSET REPORT
TAYLOR COUNTY, FLORIDA

TO: BOARD OF COUNTY COMMISSIONERS

FROM: SOLID WASTE

Department Name

3601
Clerk Asset Number:
DEPT 0261
Number

Board Asset Number: _____

DATE: _____

To Whom It May Concern:

The following changes have occurred in the property in my custody. This information should be entered on your Property Record.

IDENTIFICATION DATA

Name of Item	Room #	Make
FILE CABINET		
Model	Year	Serial Number
Other Description:		
Purchased with Grant: Yes/No? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If 'Yes' please explain reason to allow disposition below.		

DISPOSITION DATA

Type of Disposition: SURPLUS

**** Property that is missing or unable to locate shall be presented to the County Commission by the Property Custodian immediately.**

Explanation for Disposal: (required) _____

Location: (required) _____

APPROVED ☐ DENIED ☐ By the Taylor County Board of Commission: _____ Date _____

Dary Wambolt
Department Head

[Signature]
Chairman Signature

[Signature]
County Administrator Approval

Date Removed From Asset Records

[Signature]
Fixed Assets Manager

DataWorks Plus, LLC
728 N. Pleasantburg Drive
Greenville, SC 29607



866-632-2780 (Toll-Free)
864.672.2780 (P)
864.672.2787 (F)

MAINTENANCE AND SUPPORT AGREEMENT

AGENCY: Taylor County Jail
589 E US HWY 27
Perry, FL 32347

Term Effective **Start: 1/1/16** **End: 12/31/16**

PAYMENT TERMS: **NET 30**

24X7 SOFTWARE AND HARDWARE SUPPORT: (AMOUNT: \$1,802.64)

- 24X7 Telephone Support: 2 Hour Response
- Free Remote SOFTWARE Updates for DataWorks Plus Applications During Normal Business Hours – does not include Operating System
- Remote Dial-in Analysis
- Standard Shipping for Defective HARDWARE with Remote Installation Assistance

Hardware purchased from DWP Job Number 11-202: FINAL YEAR OF COVERAGE

- One (1) Cogent CSD-450 Scanner
 - Serial Number: 10001300
- One (1) Datamax E4304 2D Bar Code Printer
 - Serial Number: 04783185
- One (1) Dell Optiplex 380 Mini-Tower
 - Serial Number: 9RZGZQ1
 - Intel Core 2 Duo E7500
 - 250GB 7200rpm hard drive
- One (1) 20" Monitor
 - Serial Number: CNOYR64P74445162AMAL

Hardware purchased from DWP Job Number 11-307: FINAL YEAR OF COVERAGE

- Four (4) Cogent Bluecheck2 Upek Scanners
 - Serial Numbers: BC2u50089, BC2u50353, BC2u50429, BC2u50325

Software:

FALCON Rapid ID Edge Device Software
Fingerprint Segmentation Software
FDLE Certified Datamax E4305 2D DNA Bar Code Printer Software
Microsoft SQL Database License 1 CAL

1. REPORTING A PROBLEM TO DATAWORKS PLUS:

- 1.1 The **Taylor County Jail** can contact Technical Support using either of the following options:
 - Toll-free telephone support (**866-632-2780, dial "3" for Customer Support**)
 - Email: **support@dataworksplus.com**
 - Customers can also generate web-based support tickets by visiting:
www.dataworksplus.com/support.
- 1.2 The **Taylor County Jail** should use our toll-free number to report problems that require immediate attention. To expedite the problem, the **Taylor County Jail** needs to have readily available, the machine name or IP address of HARDWARE or SOFTWARE with the problem, the type of SOFTWARE with the issue and a sample record number.

2. DATAWORKS PLUS RESOLUTION PROCESS: (SEE ADDENDUM/EXCLUSIONS)

- 2.1 DATAWORKS PLUS Technical Support Team will open a ticket in our tracking system as acknowledgment of an issue reported to us. The **Taylor County Jail** can request a ticket number for their tracking purposes.
- 2.2 DATAWORKS PLUS Technical Support will connect to the system remotely to determine the problem and resolution.
 - DATAWORKS PLUS will contact the **Taylor County Jail** upon closure of the ticket.
 - DATAWORKS PLUS will, at no additional expense to the **Taylor County Jail**, correct any failures of the covered SOFTWARE to meet its specifications.
- 2.3 If the remote site support does not satisfactorily resolve the problem, DATAWORKS PLUS may choose to send a qualified technician to your site to correct the problem. The decision to send a technician onsite will be at the sole discretion of DATAWORKS PLUS and will be done at no additional expense to the **Taylor County Jail**.

3. DATAWORKS PLUS RESPONSIBILITIES TO SOFTWARE:

- 3.1 DATAWORKS PLUS will, at no additional expense to the **Taylor County Jail**, provide all enhancements, additions and updates to the SOFTWARE. The **Taylor County Jail** can contact our Technical Support team to schedule SOFTWARE updates for any SOFTWARE purchased from DATAWORKS PLUS. All SOFTWARE updates should be scheduled during normal business hours. Fees for non-business hours updates can be provided as needed.
 - ✓ DATAWORKS PLUS warrants that its products are free from viruses. Any virus introduced to the **Taylor County Jail's** system by DATAWORKS PLUS will be remedied at the sole expense of DATAWORKS PLUS.

4. TAYLOR COUNTY JAIL'S RESPONSIBILITIES:

- 4.1 Maintenance does not cover virus protection or system failure due to virus infection. The on-site system administrator is responsible for Operating System updates and Anti-virus SOFTWARE updates. The **Taylor County Jail** will be responsible for any damage or failure caused by a computer virus. In the event that a system becomes infected and the **Taylor County Jail** requires assistance,

DATAWORKS PLUS will assist the **Taylor County Jail** on a time and materials basis. Systems that have been infected can contact DATAWORKS PLUS to assist with rebuilds after they have completed a complete virus scan and malware scan of the system.

- 4.2 However, the **Taylor County Jail** can, at no additional expense, contact our technical support team for assistance in setting the proper exclusions for anti-virus solutions provided by the **Taylor County Jail**.
- 4.3 The **Taylor County Jail** is responsible for providing a backup solution and ensuring that backups are being conducted. The **Taylor County Jail** can, at no additional expense, contact DATAWORKS PLUS support to configure SQL backups to disk or USB drive. DATAWORKS PLUS encourages customers to provide a 3rd party backup solution.

5. DATAWORKS PLUS HARDWARE RESPONSIBILITIES: (The section below relates to HARDWARE listed on this contract that is covered by DATAWORKS PLUS)

- 5.1 DATAWORKS PLUS will, at no additional expense to the **Taylor County Jail**, repair or replace any piece of covered HARDWARE that malfunctions due to normal wear and tear based on manufacturer specifications at the time of purchase. This does not cover HARDWARE malfunctions due to acts of God, abusive damage or accidents, or HARDWARE/HARDWARE components replaced at the discretion of the **Taylor County Jail**.
- 5.2 This contract does not include consumable items such as (but not limited to) batteries, printer paper, printer ribbons, toner, photographic paper, print heads, magnetic tapes, or transfer ribbons for printers. This applies only to customers who have purchased printers from DATAWORKS PLUS and those printers are under a current support agreement.
- 5.3 DATAWORKS PLUS reserves the right to replace any piece of covered HARDWARE with the same or comparable model if the existing model is no longer available. The decision to replace HARDWARE is at the sole discretion of DATAWORKS PLUS.
- 5.4 DATAWORKS PLUS reserves the right to discontinue coverage for printers that become "general use" printers, instead of printers used exclusively for DATAWORKS PLUS applications. In this event, DATAWORKS PLUS will honor the terms in this agreement but may discontinue coverage upon contract renewal.
- 5.5 DATAWORKS PLUS will, at no additional expense to the **Taylor County Jail**, provide next-day delivery (except Sundays and Holidays, in which case, delivery will be scheduled for the next business day) of a replacement unit for any piece of covered HARDWARE that malfunctions due to normal wear and tear. DATAWORKS PLUS will provide next-day delivery by UPS Red Label, FedEx Priority Overnight, or a similar service. Replacement units will be loaned to the **Taylor County Jail** until DATAWORKS PLUS has repaired the failed unit or until DATAWORKS PLUS makes the decision to provide a permanent replacement.

Note: Due to the registration processes for MC75 devices, DATAWORKS PLUS will ship the defective device to our headquarters at no expense to the **Taylor County Jail**. DATAWORKS PLUS will repair the MC75 device and ship the original device back to the **Taylor County Jail**.

- 5.6 DATAWORKS will provide telephone assistance for connectivity for defective HARDWARE listed: Camera equipment, panner sets, keyboards, external disk drives, monitors, mice.

- 5.7 DATAWORKS PLUS will, at no additional expense to the **Taylor County Jail**, provide all computer-related and firmware updates as deemed necessary, for all computer equipment purchased from DATAWORKS PLUS and all DATAWORKS PLUS SOFTWARE applications. Additional charges may apply for firmware upgrade for mobile devices.

6. CONNECTIVITY:

- 6.1 DATAWORKS PLUS will provide upon request, at no additional expense to the **Taylor County Jail**, one USB modem, modem SOFTWARE, and remote connectivity SOFTWARE (such as VNC or Remote Desktop) necessary to provide remote site support. The **Taylor County Jail** is responsible for providing a VPN or direct-inward-dial telephone line. DATAWORKS PLUS is not responsible for any annual or monthly SOFTWARE fees for connectivity purposes.

7. ADDITIONAL TRAINING:

- 7.1 Upon request, DATAWORKS PLUS will provide a 30% discount on refresher training to the **Taylor County Jail**. Quotes for training can be obtained by contacting Deanna Allen, Director of Technical Support, at 866 632 2780 x 6731.

8. ASSISTANCE BEYOND THE SCOPE OF THIS CONTRACT:

- 8.1 Additional engineering and support efforts by DATAWORKS PLUS, beyond the scope of this agreement, may be charged as follows. This may include any related travel and administrative expenses.

BILLABLE RATES

(Outside the scope of a current Maintenance and Support Agreement)

8 a.m. – 5 p.m. (M-F, local time)	\$180 per hour, 2 hours minimum charge
After 5 p.m., Saturday, Sunday and Holidays	\$260 per hour, 2 hours minimum charge

9. CONTRACT CANCELLATION:

- 9.1 The **Taylor County Jail** through written notification to DATAWORKS PLUS may cancel this maintenance/support agreement. Any unused portion of the maintenance/support costs listed on this contract will be refunded to the **Taylor County Jail** at a pro-rated amount.

DataWorks Plus, LLC
728 N. Pleasantburg Drive
Greenville, SC 29607



866-632-2780 (Toll-Free)
864.672.2780 (P)
864.672.2787 (F)

****See Addendums A and B for information on moving SOFTWARE licenses to new HARDWARE and Non-Maintenance Time and Materials Rates.**

If the Taylor County Jail requires the CJIS security addendum documentation for our support staff, please contact Support and this will be sent at the earliest.

DATAWORKS PLUS

Federal ID: 57-1104887

Name: Jessica Mensing

Jessica Mensing

Signature: _____

Date: October 20, 2015

Invoice: TBD

Taylor County Jail

Name: Dustin Hinkel

Signature: *Dustin Hinkel*

Title: County Administrator

Date: 3/30/16

PO#: _____

ADDENDUM A

Occasionally, customers have a need to move our SOFTWARE licenses to new HARDWARE, either due to HARDWARE failure or simply as a HARDWARE upgrade. DATAWORKS PLUS considers application upgrades as a part of our standard maintenance plan. However, system moves are not covered under the plan. Customer should contact DATAWORKS PLUS for pricing for system moves. Customers who need to move SOFTWARE/databases to new HARDWARE will need to do the following:

1. Contact DATAWORKS PLUS at **866.632.2780 x6731** for pricing and scheduling;
 2. Provide DATAWORKS PLUS with an equivalent HARDWARE solution as the original HARDWARE, with any SOFTWARE installed that was originally installed by the Agency;
 3. Provide VPN access to the new system and the old system simultaneously until the move is complete;
 4. Provide access to system backups and logs.
- DATAWORKS PLUS is not responsible for providing on-site assistance in the event of customer provided hardware failure.
 - DATAWORKS PLUS is not responsible for engineering/development work to reconstruct corrupt databases due to customer-provided hardware failure, or failure due to viruses/malware.
 - Customers who wish to schedule license moves and/or hardware upgrades may contact DATAWORKS PLUS for fees and scheduling.
 - Customers may contact us for pricing for a maintenance uplift plan that includes software license moves.
 - Our standard rates of \$180 per hour, 2 hour minimum, will apply for any installation or deployment related support issues after the initial training and installation for Kiosk.

DataWorks Plus, LLC
728 N. Pleasantburg Drive
Greenville, SC 29607



866-632-2780 (Toll-Free)
864.672.2780 (P)
864.672.2787 (F)

ADDENDUM B

DATAWORKS PLUS Non-Customer Time and Materials Information Sheet

DATAWORKS PLUS regrets that your Agency will no longer continue with a standard maintenance contract and hope to work with you as a regular maintenance customer in the future. To assist you during this time, please review the following "Time and Materials" procedures listed below:

- If technical assistance is needed, please contact DATAWORKS PLUS at 866.632.2780 x 3. The rate for T&M customers is as follows:

BILLABLE RATES (Without a Maintenance and Support Agreement)

8 a.m. – 5 p.m. (M-F, local time)	\$225 per hour, 2 hours minimum charge
After 5 p.m., Saturday, Sunday and Holidays	\$450 per hour, 2 hours minimum charge

- DATAWORKS PLUS will open a ticket for your Agency but will need a purchase order from your Agency before proceeding. Typically, this purchase order will be for the two-hour minimum listed above.
- Upon receipt of the purchase order, our technicians will connect to your site to determine the cause of the problem and an estimate of time for resolution.
- If the problem can be resolved during the two-hour minimum time-frame listed in the purchase order, we will proceed with the repair. DATAWORKS PLUS support technicians will contact your Agency before going above the time limit issued by your Agency.
- If the problem requires HARDWARE to resolve, DATAWORKS PLUS will issue your Agency a quote for the HARDWARE separately, provided the HARDWARE is not listed as obsolete by DATAWORKS PLUS. T&M agencies are responsible for shipping costs for the replacement HARDWARE.
- Upon closure of the ticket, DATAWORKS PLUS will issue an invoice with the purchase order given at the time of the initial call. Please note that agencies with current maintenance contracts will get priority in our support tracking system. However, we are happy to give agencies a time-frame for resolution.
- DATAWORKS PLUS does not provide on-site support for non-maintenance customers.
- DATAWORKS PLUS does not provide SOFTWARE upgrades for non-maintenance customers.

It is our desire to assist agencies in a timely fashion and to the satisfaction of those agencies. Please sign and return this letter along with your PO as acknowledgement to this agreement.

Agency Name: Taylor County
Name: Dustin Hinkel
Signature: [Signature]
Title: County Administrator
Date: 3/30/16
PO#: _____

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO APPROVE THE REQUEST OF REMOVING COUNTY ASSETS THAT ARE UNDER THE PURCHASING THRESHOLD OF \$1000, FROM COUNTY INVENTORY, AS AGENDED BY THERESA COPELAND, IT DIRECTOR.

MEETING DATE REQUESTED:

APRIL 4, 2016

Statement of Issue: BOARD TO APPROVE THE REQUEST TO REMOVE ASSETS UNDER \$1000.00

Recommended Action: APPROVE

Fiscal Impact: SEE ATTACHED DOCUMENTATION

Budgeted Expense: Y/N

Submitted By: THERESA COPELAND

Contact: 850-838-3500 EXT. 108

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options: APPROVAL / DISAPPROVAL

Attachments: SEE DISPOSTION LIST

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



Board to consider appointment/re-appointment of three members to the Construction Industry Licensing Board

MEETING DATE REQUESTED:

April 4, 2016

Statement of Issue: The Construction Industry Licensing Board has three vacancies due to three member's terms expiring.

Recommendation: Re-appoint or appoint three members to the Licensing Board for a two (2) year term period from 3/31/16 to 3/31/18.

Fiscal Impact: N/A

Budgeted Expense: Yes ☐ No ☐ N/A ☒

Submitted By: Danny Griner

Contact: building.director@taylorcountygov.com

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: Mr. Bobby Joe Hires, Mr. Rudy Freeman and Mr. Earl Ketrings terms on the Licensing Board expired on 3/31/16. County Staff advertised the vacancies in the local paper and on the County website. Mr. Heath Simmons and Mr. Dennis Wigglesworth responded to the ad. Mr. Hires, Mr. Freeman and Mr. Ketrings all expressed that they would wish to remain on the Licensing Board.

Options:

1. Re-appoint or appoint three members to the Licensing Board.
2. Do not re-appoint or appoint three members to the Licensing Board.

Attachments:

1. Copy of advertisement.

The Taylor County Construction Industry Licensing Board has openings for volunteer board members. If you have construction experience and are interested in this volunteer position, please contact Jami Boothby at the ***Taylor County Building Department at 838-3500 Ext. 110 or come by the Taylor County Building Department located at 201 E. Green Street, Perry, Florida.***

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850-584-2371

Freddy Pitts
Agency Manager
freddy.pitts@ffbic.com

24/7 Claims Service
Call 1-866-275-7322

813 S. Washington St. Perry

FLAUPR00111

*Florida Farm Bureau General Insurance Co.
*Florida Farm Bureau Casualty Insurance Co.
*Southern Farm Bureau Life Insurance Co. Jacksonville

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AT DOWLING PARK

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Apartment Living in a Fun, Friendly & Engaging



One-bedroom and Efficiency Apartments for Age 62+ and Those with Mobility Impairments. Modern Kitchens, Monitored Fire/Emergency Alarm, Walk to Activities, Small Pet Friendly, Beautiful Grounds, An Array of Amenities.

Federally Subsidized Rents, Based on HUD Eligibility

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TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO HEAR AND CONSIDER THE BID COMMITTEE'S RECOMMENDATION REGARDING ITS REVIEW OF THE REQUESTS FOR QUALIFICATIONS (RFQS) FOR CONSULTING SERVICES FOR A SPACE PLANNING/FACILITIES ASSESSMENT, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

MEETING DATE REQUESTED:

APRIL 4, 2016

Statement of Issue:

ON JANUARY 19, 2016, THE BOARD RECEIVED FOUR RESPONSES TO THE REQUEST FOR QUALIFICATIONS FROM CONSULTING FIRMS FOR A "TAYLOR COUNTY SPACE PLANNING/FACILITIES ASSESSMENT REPORT." THE BID COMMITTEE REVIEWED THE RFQS AND IS PREPARED TO MAKE A RECOMMENDATION TO THE BOARD FOR ITS CONSIDERATION.

Recommended Action:

CONSIDER THE RECOMMENDATION OF THE BID COMMITTEE.

Fiscal Impact:

NOT YET DETERMINED

Budgeted Expense:

Submitted By:

COUNTY ADMINISTRATOR 838-3500 X 7

Contact:

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments:

Minutes
March 31, 2016
Selection Review Committee for Taylor County's Requests for Qualifications (RFQs) for
Consulting Services for a Space Planning/Facilities Assessment Report

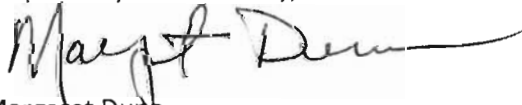
The Selection Review Committee consisting of Dustin Hinkel, County Administrator; Kenneth Dudley, County Engineer; and Margaret Dunn, Assistant County Administrator, met at 2:00 p.m. on March 31, 2016, to compare notes with each having reviewed the four submitted RFQs.

The committee discussed the overall project and scope of work and anticipated end product. Then, the members of the committee discussed what aspects of each submission were favorable and which were not. It was noted that the technical specifications printed in the Request for Qualifications incorrectly specified that Forms 254 and 255 would be requested from each submitter; however, both forms are obsolete and have been replaced by Form 330. This form, however, was not included on the itemized bid checklist. As a result, two of the respondents submitted Form 330 while two did not. The Selection Review Committee agreed that it would ask the Board to waive this particular irregularity in the submittals and find each of the submitters' statements compliant.

The Selection Review Committee discussed the requirements of Chapter 287.055, Florida Statutes, known as the Consultants' Competitive Negotiation Act. The members of the committee thought it best to ask for a short presentation from each of the submitters to provide greater insight into their capabilities and understanding of the required end result. Such presentation is requested to be made to the Selection Review Committee; after which, the committee will be better able to recommend the most appropriate firm to the Board of County Commissioners.

There being no further business, the meeting adjourned at 2:52 p.m.

Respectfully submitted by,

A handwritten signature in black ink, appearing to read "Margaret Dunn", with a long horizontal flourish extending to the right.

Margaret Dunn

Assistant County Administrator

TAYLOR COUNTY BOARD OF COMMISSIONERS

13

County Commission Agenda Item

SUBJECT/TITLE:

COMMISSIONERS TO RECEIVE AND APPROVE SUPPLEMENTAL AGREEMENT NO. 2 FROM FDOT FOR THE WIDENING & RESURFACING OF OSTEEN ROAD AND CONSIDER BID AWARD, PROJECT FUNDING AND CEI SERVICES PROPOSAL.

MEETING DATE REQUESTED:

April 4, 2016

Statement of Issue:

Through the Florida Department of Transportation's (FDOT) Small County Road Assistance Program, the Board was initially awarded \$245,258 for the widening and resurfacing of Osteen Road (CR 359B). The Board later received an additional \$507,159 with Supplemental Agreement No. 1. Supplemental Agreement No. 2 will further increase funding by \$536,219.

Bids received (March 7, 2016) for the Project are as follows:

Sandco, Inc.	\$1,238,635.85
Curts Construction, Inc.	\$1,554,984.23
Capital Asphalt, Inc.	\$1,565,000.00
Anderson Columbia Co., Inc.	\$1,588,229.66
C.W. Roberts Contracting, Inc.	\$1,626,354.00
Peavy & Son Construction Co., Inc.	\$1,719,300.00

Recommended Action: Staff recommends that the Board accept and approve Supplemental Agreement No. 2 along with passing a Resolution authorizing its execution by the Chairperson and award the Osteen Road bid to the lowest responsive bidder. Additionally, Staff also recommends that the Board approve using Secondary Roads Paving Account Common funding (0308-56310) for the project's budgetary shortfall. Lastly, Staff recommends approving the Construction Engineering Inspection Task Order with Causseaux, Hewett and Walpole, Inc.

Fiscal Impact: FISCAL YR 2015/16 - \$737,997.00 (current balance)
Funds Available w/ S.A. #2 - \$1,274,216.00

Budgeted Expense: PARTIALLY

Submitted By: ENGINEERING DIVISION

Contact: COUNTY ENGINEER

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

On February 19, 2013, the Board of County Commissioners approved the Small County Road Assistance Program agreement with the Florida Department of Transportation to provide \$245,258 for the widening and resurfacing of Osteen Road (CR 359B) from US HWY 98 to Woods Creek Road, approximately 1.81 miles. On August 20, 2013, the Board received and subsequently approved Supplemental Agreement No. 1 increasing available funding by \$507,159. On March 7, 2016, six

construction bids were received for this project that ranged from \$1.2 to over \$1.7 million. These bids were reviewed and each of the bidding companies found to have met the bid specifications and possessed the required qualifications to complete the project. They are as follows:

<i>Required Items</i>	<i>Company Name</i>					
	<i>Sandco, Inc.</i>	<i>Curts Construction, Inc.</i>	<i>Capital Asphalt, Inc.</i>	<i>Anderson Columbia Co., Inc.</i>	<i>C.W. Roberts Contracting, Inc.</i>	<i>Peavy & Son Construction Co., Inc.</i>
<i>Bid Bond</i>	✓	✓	✓	✓	✓	✓
<i>Insurance - Liability /Workers Compensation</i>	✓	✓	✓	✓	✓	✓
<i>Workers' Compensation Hold Harmless</i>	N/A	N/A	X	N/A	✓	N/A
<i>Public Entity Crimes Affidavit</i>	✓	✓	✓	✓	✓	✓
<i>Non-Collusion Affidavit</i>	✓	✓	✓	✓	✓	✓
<i>Valid Business Contractor License/ FDOT PreQualified</i>	✓	✓	✓	✓	✓	✓
<i>Proposed Subcontractors & Suppliers</i>	✓	✓	X	X	✓	✓
<i>Project References</i>	✓	✓	X	✓	X	✓
<i>Project Addenda</i>	✓	✓	X	✓	✓	✓
<i>Proposal Amount</i>	\$1,238,635.85	\$1,554,984.23	\$1,565,000.00	\$1,588,229.66	\$1,626,354.00	\$1,719,300.00

Once received, these bid results were forwarded to FDOT for review, approval, and a request for additional funding to allow completion of the project in its entirety. The lowest bidder, SANDCO, was found to be acceptable and approved by FDOT. Further, FDOT's Barney Bennette and Kim Evans were also able to find and provide an additional \$536,219. This funding is offered through approval of Supplemental Agreement No. 2 and although this funding more than covers the cost of construction, sufficient funding to completely cover the expected cost of construction and Construction Engineering Inspection (CEI) was not available. Nonetheless, Staff recommends that the Commission approve Supplemental Agreement No. 2 including adopting a Resolution authorizing the Commission Chair to execute the agreement on behalf of the Commission. Once approved, Staff further recommends that the Board award the Osteen Road Widening/Resurfacing project to the Bidder that represents Taylor County's best interest as determined by the Board of County Commisisoners and then proceed to discussing further funding for inspection services.

With the experience of working as the CEI firm for Taylor County on two other SANDCO, Inc. projects (Providence Rd and Agner Acres), Causseaux, Hewett & Walpole, Inc. was solicited to provide a Task Order Proposal to perform CEI services for this project. Following the terms of their

CEI Continuing Contract, CHW has proposed a cost of \$85,265.00 for such services coincident with the contractual term of the construction contract. Even after including Supplemental Agreement No. 2 funds, the budget is short of covering the cost of construction and inspection by approximately \$50,000. Therefore, Staff recommends that such shortfall be funded by the Secondary Road Paving Account Common Funds (0308-56310). Though Osteen Road is a dividing line between District 1 and 5 and could legitimately be supported by funds from each or both of those districts, the overall benefit provided by Major Collector roads is typically not District level limited. Once funding is approved, Staff also recommends approval of CHW's proposed CEI Task order. With this final approval, the Osteen Road Project will be able to commence.

Options:

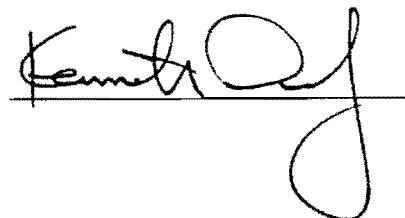
- 1) Accept and approve Supplemental Agreement No. 2 along with passing a Resolution authorizing its execution by the Chairperson and award the Osteen Road bid to the lowest responsive bidder and. Additionally, approve using Secondary Roads Paving Account Common funding (0308-56310) for the project's budgetary shortfall. Lastly, approve the Construction Engineering Inspection Task Order with Causseaux, Hewett and Walpole, Inc.
- 2) Deny approval of Supplemental Agreement No. 2, the proposed award to the lowest responsive bidder, the additional funding request and CHW's CEI Task Order stating reasons for such denial.
- 3) Consider an overall proposal that represents Taylor County's best interest as determined by the Board of County Commissioners.

Attachments:

Supplemental Agreement No. 2
Authorizing Signature Resolution
CHW CEI Task Order

Review Committee:

 Hank Evans, Public Works

 Kenneth Dudley, County Engineer



Florida Department of Transportation

RICK SCOTT
GOVERNOR

1109 South Marion Avenue
Lake City, Florida 32025

JIM BOXOLD
SECRETARY

March 21, 2016

The Honorable Patricia Patterson, Chair
Taylor County BOCC
201 E. Green Street
Perry, Florida 32348

**Subject: Small County Road Assistance Program (SA # 2)
Resurfacing or road reconstruction of Osteen Road
from SR 30 / US 98 to CR 361 A
Financial Project ID: 430725-1-58-01
Contract: AQX82**

Dear Chair Patterson:

Enclosed for execution are two (2) copies of the Small County Road Assistance Program (SCRAP) – Supplemental Agreement # 2 and SCRAP Addendum for blended funds for the resurfacing or road reconstruction of Osteen Road from SR 30 / US 98 to CR 361A in Taylor County, Florida.

Supplemental Agreement # 2 adds construction funds in the amount of **\$536,219.00** to match the bid amount. Your assistance in securing execution is appreciated. Should you have questions or need additional information, I can be reached at 1-800-749-2967, Extension 7402.

Sincerely,

Kim Evans
District Local Programs Administrator

/ke

Enclosures

Cc: Mr. Kenneth Dudley, P.E., County Engineer
Mr. Dustin Hinkel, County Administrator

The Honorable Jody Devane, Chair Taylor County BOCC 201 E. Green Street Perry, FL 32348	STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION SMALL COUNTY ROAD ASSISTANCE PROGRAM (SCRAP) SUPPLEMENTAL AGREEMENT# 2	Financial Project ID: 430725-1-58-01
		Contract Number: AQX82

PROJECT DESCRIPTION

Per Florida Statutes 339.2816, Taylor County (Agency) desires to supplement the Small County Road Assistance Program Agreement (SCRAP) as identified above. All provisions in the basic Agreement remain in effect except as expressly modified by this Supplement. The changes to the Agreement is described below:

Name: Osteen Road Length N/A

Termini: from SR 30 / US 98 to CR 361 A

Description of Work: resurfacing or road reconstruction

Reason for Supplement: construction funds in the amount of \$536,219 to match the bid amount.

TYPE OF WORK By Fiscal Year	(3) TOTAL PROJECT ESTIMATE FUNDS (100%)	(2) AGENCY FUNDS (0%)	(1) STATE & FEDERAL FUNDS (100%)
Design <u>2007-2008</u> <u>2008-2009</u> <u>2009-2010</u> Total Design Cost	 	 	
Right of Way <u>2008-2009</u> <u>2009-2010</u> <u>2010-2011</u> Total Right of Way Cost	 	 	
Construction <u>2012-2013</u> <u>2013-2014</u> <u>2014-2015</u> <u>2015-2016</u> Total Contract Costs	 \$ 245,258.00 \$ 507,159.00 \$ 536,219.00 \$1,288,636.00	 	 \$ 245,258.00 \$ 507,159.00 \$ 536,219.00 \$1,288,636.00
Construction Engineering and Inspection <u>2014-2015</u> <u>2015-2016</u> <u>2016-2017</u> <u>2017-2018</u> Total Construction Engineering	 	 	
Total Cost of Project	 \$1,288,636.00	 	 \$1,288,636.00

The Department maximum participate of the original contract remains unchanged. The Department's obligation to pay under this Agreement is contingent upon an annual appropriation by the Florida Legislature.

The Honorable Jody Devane, Chair Taylor County BOCC 201 E. Green Street Perry, FL 32348	STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION SMALL COUNTY ROAD ASSISTANCE PROGRAM (SCRAP) SUPPLEMENTAL AGREEMENT# 2	Financial Project ID: 430725-1-58-01 Contract Number: AQX82
--	--	--

IN WITNESS WHEREOF, the parties have caused these presents to be executed the day and year first above written.

TAYLOR COUNTY

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

By: _____
 Name:
 Title:

By: _____
 Name:
 Title: District Two Secretary

Attest: _____
 Name:
 Title:

Attest: _____
 Name:
 Title:

Date: _____

Date: _____

As to form:

As to form:

 Attorney

 District Attorney

See attached Encumbrance Form for date of funding approval by Comptroller.

SMALL COUNTY ROAD ASSISTANCE PROGRAM ADDENDUM
SUPPLEMENTAL AGREEMENT # 2

THIS SMALL COUNTY ROAD ASSISTANCE PROGRAM ADDENDUM ("Addendum") is made and entered into by and between the State of Florida Department of Transportation ("Department") and Taylor County, Florida ("Recipient").

-RECITALS-

1. The terms and provisions of this Addendum are incorporated in and made part of the Small County Road Assistance Program ("SCRAP") Agreement for contract number AQX82 previously executed by the parties on March 28, 2013 ("Original Agreement") and Small County Road Assistance Program ("SCRAP") Supplemental Agreement # 1 previously executed by the parties on September 13, 2013 attached as **Exhibit "A"** of this Addendum – Supplemental Agreement # 2; and
2. This Addendum shall be merged into and made part of the Original Agreement and both documents shall be collectively referred to as the "Agreement";
3. The Recipient has requested additional monies for purposes of funding construction phase work that is being added to the scope ("Additional Work") of the Original Agreement; and
4. The Original Agreement was funded via SCRAP funds appropriated by the Legislature pursuant to Section 339.2816, Florida Statutes; and
3. Simultaneously with the execution of this Addendum – Supplemental Agreement # 2, the Department and the Recipient shall also execute a separate Supplemental Agreement # 2 ("Supplemental Agreement") to the Original Agreement and the Supplemental Agreement # 1 for purposes of primarily funding the Additional Work; and
4. A portion of the funds necessary to fully fund the Additional Work, will come from the Small County Outreach Program ("SCOP") via this Addendum;
5. SCOP is created pursuant to Section 339.2818, Florida Statutes, to provide funds to counties to assist small counties in resurfacing or reconstructing county roads or in constructing capacity of safety improvements to county roads and also to municipalities within rural areas of critical concern (rural areas of opportunity (RAO)) with projects, excluding capacity improvement projects.; and
6. The Additional Work qualifies for funding by SCOP; and
7. The SCRAP funds furnished pursuant to the Supplemental Agreement and the SCOP funds furnished pursuant to this Addendum shall collectively be referred to as "Blended Funds"; and
8. The portion of the Blended Funds derived from SCRAP funds is more specifically shown in the Supplemental Agreement; and
9. The portion of the Blended Funds derived from SCOP funds is more particularly shown on **Exhibit "B"** of this Addendum; and
10. In the event of any conflict or inconsistency between the Original Agreement and this Addendum, the provisions of this Addendum shall control; and
11. All other terms and conditions of the Original Agreement shall remain unchanged unless otherwise stated in this Addendum.

NOW THEREFORE, in consideration of the above recitals and the mutual covenants and conditions set forth in this Addendum, the parties, intending to be legally bound, acknowledge, covenant and agree as follows:

1. RECITALS

The above recitals and attached exhibit(s) are specifically incorporated by reference and made part of this Addendum.

2. PURPOSE OF ADDENDUM AND EXPLANATION OF FUNDING

A. The Department has determined that the Project as defined in the Original Agreement is eligible for and shall be granted the Blended Funds necessary to fund the Additional Work.

B. The Parties agree that the sole purpose of this Addendum is to provide a portion of the monies necessary to perform the Additional Work via SCOP funds, as outlined in attached **Exhibit B**. The primary funding source of the Additional Work will be through SCRAP funds provided via the Supplemental Agreement executed by the parties separately and simultaneously with this Addendum. All other terms and conditions of the Original Agreement shall remain the same.

IN WITNESS WHEREOF, intending to be legally bound hereby, the parties execute this Addendum consisting of twenty (20) pages.

Florida Department of Transportation

Attest:

By: _____

By: _____

Printed Name: _____

Printed Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

Legal Review:

By: _____

Office of the General Counsel
Florida Department of Transportation

Taylor County

Attest:

By: _____

By: _____

Printed Name: _____

Printed Name: _____

Title: _____

Title: _____

Date: _____

Date: _____

Legal Review:

By: _____

Legal Counsel for Recipient

EXHIBIT "A"
(ORIGINAL AGREEMENT)



Florida Department of Transportation

RICK SCOTT
GOVERNOR

1109 South Marion Avenue
Lake City, FL 32025-5874

ANANTH PRASAD, P.E.
SECRETARY

April 2, 2013

The Honorable Pam Feagle, Chair
Taylor County Board of County Commissioners
201 E. Green Street
Post Office Box 620
Perry, Florida 32348

**Subject: Small County Road Assistance Program
Resurfacing or Reconstruction of Osteen Road
from SR 30 / US 98 to CR 361A
Financial Project ID: 430725-1-58-01**

Dear Chair Feagle:

Enclosed for your files is a fully executed copy of the Small County Road Assistance Program Agreement to resurfacing Osteen Road from SR 30 / US 98 to CR 361A in Taylor County, Florida. This Agreement details the terms and conditions for construction of the subject improvements which Taylor County will undertake. This letter serves as your **Notice to Proceed**. The contract beginning date is **April 5, 2013** with an ending date of **December 31, 2014**. Any work performed prior to **April 5, 2013** is not eligible for reimbursement.

Please submit a set of plans and proposed advertisement to the Department for approval prior to advertising for construction services. After bids are opened submit the Engineer's Estimate and the Bid of the Apparent Lowest, Responsive Bidder for the Department's concurrence and recommendation of award.

To expedite reimbursement, invoices should be sent directly to Ms. Kim Evans at 1109 South Marion Avenue, Lake City, Florida, 32025-5874. Invoices should be submitted in detail sufficient for a proper pre-audit and post-audit. Please remember that Taylor County is responsible for bearing all expenses in excess of the amount the Department agrees to participate **(\$245,258.00)**.

Should you have questions or need additional information, I can be reached at 1-800-749-2967, Extension 7745.

Sincerely,

A handwritten signature in cursive script, appearing to read "Katrina Sadler".

Katrina Sadler
District Programs Administrator

KS ke
Enclosures

cc. Mr. Jack Brown, County Administrator

www.dot.state.fl.us

Financial Project No.: 430725-1-58-01
Catalog of State Financial Assistance No.: 55.016

This Small County Road Assistance Agreement (this "Agreement") is made this 15th day of March, 2013, between the STATE OF FLORIDA, DEPARTMENT OF TRANSPORTATION, hereinafter referred to as the "DEPARTMENT", and the Taylor County Board of County Commissioners, a political subdivision of the State of Florida, hereinafter referred to as the "COUNTY".

WITNESSETH

WHEREAS, the DEPARTMENT has the authority, under Section 334.044(7), Florida Statutes, to enter into this Agreement; and

WHEREAS, the Small County Road Assistance Program has been created within the DEPARTMENT pursuant to Section 339.2816, Florida Statutes, to assist small counties in resurfacing or reconstructing county roads; and

WHEREAS, the COUNTY has certified to the DEPARTMENT that it has met the eligibility requirements of said Section 339.2816, Florida Statutes; and

WHEREAS, the DEPARTMENT is willing to provide the COUNTY with financial assistance, under FM No. 430725-1-58-01, for costs directly related to the resurfacing or reconstruction of Osteen Road from SR 30 / US 98 to CR 361A, hereinafter referred to as the PROJECT; and

WHEREAS, the COUNTY by Resolution No. N/A dated the 19th day of February, 2013, a copy of which is attached hereto and made a part hereof, has authorized the Chairman of its Board of Commissioners or County Manager to enter into this Agreement.

Attachments: Exhibit(s) A, B & 1 are attached and made a part hereof.

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

1. SERVICES AND PERFORMANCE

A. The COUNTY shall furnish the services with which to construct the PROJECT. Said PROJECT shall consist of the actions and services described in **Exhibit A**, attached hereto and made a part hereof. The scope of work shall clearly establish the tasks to be performed pursuant to Section 215.971, Florida Statutes.

B. The COUNTY agrees to undertake the construction of the PROJECT in accordance with all applicable federal, state and local laws, rules and regulations, including COUNTY's standards and specifications. The COUNTY shall be responsible for obtaining clearances/permits required for the construction of the PROJECT from the appropriate permitting authorities. Upon completion of the PROJECT, the COUNTY shall certify to the DEPARTMENT that the PROJECT has been completed in accordance with the COUNTY's standards and specifications.

C. The DEPARTMENT will be entitled at all times to be advised, upon request, as to the status of work being done by the COUNTY and of the details thereof. Coordination shall be maintained by the COUNTY with representatives of the DEPARTMENT.

D. The DEPARTMENT must approve any consultant and/or contractor scope of services prior to advertising by the COUNTY. The DEPARTMENT'S approval must be obtained before selecting any consultant and/or contractor for the PROJECT. The COUNTY must certify that the consultant has been selected in accordance with the Consultants' Competitive Negotiation Act (Section 287.055, Florida Statutes). Contractor must be prequalified by the DEPARTMENT pursuant to Section 337.14, Florida Statutes, and Rule Chapter 14-22, Florida Administrative Code for projects meeting the thresholds therein.

E. The COUNTY shall utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the COUNTY during the term of the contract; and shall expressly require any subcontractors performing work or providing services pursuant to the state contract to likewise utilize the U.S. Department of Homeland Security's E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.

F. The COUNTY shall not sublet, assign or transfer any work under this Agreement without the prior written consent of the DEPARTMENT.

G. The COUNTY shall require quantifiable units of deliverables pursuant to Section 215.971, Florida Statutes. Each deliverable must be directly related to the scope of work and must specify the required minimum level of service to be performed and the criteria for evaluating successful completion of each deliverable.

H. Notices under this Agreement shall be in writing and shall be considered effective upon delivery by United States mail, facsimile, or overnight courier to the individuals listed below as follows:

TO DEPARTMENT:

**Katrina Sadler, District Programs Administrator
Program Management – MS 2014
1109 South Marion Avenue
Lake City, Florida 32025**

TO COUNTY:

**The Honorable Pam Feagle, Chair
201 E. Green Street
Post Office Box 620
Perry, Florida 32348**

2. TERM

A. The COUNTY shall commence the PROJECT activities subsequent to the execution of this Agreement and shall be performed in accordance with the following schedule:

- i) Construction contract to be let on or before December 31, 2013
- ii) Construction to be completed on or before December 31, 2014

B. The COUNTY agrees to complete the PROJECT on or before December 31, 2014. If the COUNTY does not complete the PROJECT within this time period, this Agreement will expire on the last day of the scheduled completion as provided in this paragraph unless an extension of the time period is requested by the COUNTY and granted in writing by the DEPARTMENT prior to the expiration of this Agreement. Expiration of this Agreement will be considered termination of the PROJECT. The cost of any work performed after the expiration date of this Agreement will not be reimbursed by the DEPARTMENT.

C. This Agreement shall not be renewed. Any extension which shall be for no more than six (6) months shall be in writing and executed by both parties, and shall be subject to the same terms and conditions set forth in this Agreement.

3. COMPENSATION AND PAYMENT

A. The DEPARTMENT agrees to a maximum participation in the PROJECT (design, construction and construction engineering inspection services ("CEI")) in the amount of Two hundred forty five thousand, two hundred fifty eight dollars (\$245,258.00) described in Exhibit B.

B. The COUNTY shall submit one invoice (3 copies) plus supporting documentation required by the DEPARTMENT to the Project Manager, at the address stated in paragraph 1H, for approval and processing:

- ☐ monthly
- ☒ quarterly, or
- ☐ once the PROJECT has been accepted by the COUNTY and approved by the DEPARTMENT.

C. In the event the COUNTY proceeds with the CEI of the PROJECT with its own forces, the COUNTY will only be reimbursed for direct costs (this excludes general and administrative overhead).

D. All costs charged to the PROJECT shall be supported by properly executed payrolls, time records, invoices, contracts or vouchers evidencing in proper detail the nature and propriety of the charges.

E. The DEPARTMENT shall have the right to retain out of any payment due the COUNTY under this Agreement an amount sufficient to satisfy any amount due and owing to the DEPARTMENT by the COUNTY on any other Agreement between the COUNTY and the DEPARTMENT.

F. The COUNTY must submit the final invoice to the DEPARTMENT within 180 days after the final acceptance of the project.

G. Payment shall be made only after receipt and approval of goods and services unless advance payments are authorized by the DEPARTMENT'S Comptroller under Section 334.044 (29), Florida Statutes. Any provisions for an advance payment are provided in Exhibit N/A, attached hereto and made a part of this Agreement.

H. Deliverables must be received and accepted in writing by the Contract Manager prior to payments.

I. Any penalty for delay in payment shall be in accordance with Section 215.422(3)(b), Florida Statutes.

J. Bills for fees or other compensation for services or expenses shall be submitted in detail sufficient for a proper preaudit and postaudit thereof.

K. Bills for travel expenses specifically authorized in this Agreement shall be submitted on the DEPARTMENT'S Travel Form No. 300-000-01 and will be paid in accordance with Section 112.061, Florida Statutes.

L. Participants providing goods and services to the DEPARTMENT should be aware of the following time frames. Upon receipt, the Florida Department of Transportation – Program Management Office has 10 working days to inspect and approve the goods and services unless the bid specifications, purchase order or contract specifies otherwise. The Florida Department of Transportation – District Two Financial Services Department has 20 days to deliver a request for payment (voucher) to the Department of Financial Services. The 20 days are measured from the latter of the date the invoice is received or the goods or services are received, inspected, and approved.

M. If a payment is not available within 40 days, a separate interest penalty at a rate as established pursuant to Section 55.03(1), F.S., will be due and payable, in addition to the invoice amount, to the Participant. Interest penalties of less than one (1) dollar will not be enforced unless the Participant requests payment. Invoices that have to be returned to a Participant because of Participant preparation errors will result in a delay in the payment. The invoice payment requirements do not start until a properly completed invoice is provided to the DEPARTMENT.

N. A Vendor Ombudsman has been established within the Department of Financial Services. The duties of this individual include acting as an advocate for contractors/vendors who may be experiencing problems in obtaining timely payments(s) from a state Agency. The Vendor Ombudsman may be contacted at (850) 413-5516.

O. Records of costs incurred under terms of this Agreement shall be maintained and made available upon request to the DEPARTMENT at all times during the period of this Agreement and for three years after final payment is made. Copies of these documents and records shall be furnished to the DEPARTMENT upon request. Records of costs incurred includes the COUNTY's general accounting records and the PROJECT records, together with supporting documents and records of the COUNTY and all subcontractors performing work on the PROJECT, and all other records of the COUNTY and subcontractors considered necessary by the DEPARTMENT for a proper audit of costs.

P. In the event this contract for services is in excess of \$25,000.00 and a term for a period of more than one (1) year, the provisions of Section 339.135(6)(a), Florida Statutes, are hereby incorporated:

"The DEPARTMENT [Department of Transportation], during any fiscal year, shall not expend money, incur any liability, or enter into any contract which, by its terms, involves the expenditure of money in excess of the amounts budgeted as available for expenditure during such fiscal year. Any contract, verbal or written, made in violation of this subsection is null and void, and no money may be paid on such contract. The DEPARTMENT shall require a statement from the Comptroller of the DEPARTMENT that funds are available prior to entering into any such contract or other binding commitment of funds. Nothing herein contained shall prevent the making of contracts for periods exceeding one year, but any contract so made shall be executory only for the value of the services to be rendered or agreed to be paid for in succeeding fiscal years; and this paragraph shall be incorporated verbatim in all contracts of the DEPARTMENT which are for an amount in excess of \$25,000.00 and which have a term for a period of more than 1 year."

Q. The DEPARTMENT'S performance and obligation to pay under this Agreement is contingent upon an annual appropriation by the Florida Legislature.

R. A person or affiliate who has been placed on the convicted vendor list following a conviction for a public entity crime may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity and may not transact business with any public entity in excess of the threshold amount provided in Section 287.017, Florida Statutes, for Category Two for a period of 36 months from the date of being placed on the convicted vendor list.

S. An entity or affiliate who has been placed on the discriminatory vendor list may not submit a bid on a contract to provide any goods or services to a public entity, may not submit a bid on a contract with a public entity for the construction or repair of a public building or public work, may not submit bids on leases of real property to a public entity, may not be awarded or perform work as a contractor, supplier, subcontractor, or consultant under a contract with any public entity, and may not transact business with any public entity.

4. INDEMNITY AND INSURANCE

A. The COUNTY agrees to include the following indemnification in all contracts with contractors/subcontractors, consultants/subconsultants, who perform work in connection with this Agreement:

"The contractor/consultant shall indemnify, defend, save and hold harmless the DEPARTMENT and all of its officers, agents or employees from all suits, actions, claims, demands, liability of any nature whatsoever arising out of, because of, or due to any negligent act or occurrence of omission or commission of the contractor, its officers, agents or employees."

B. LIABILITY INSURANCE. The COUNTY shall carry or cause its contractor/consultant to carry and keep in force during the period of this Agreement a general liability insurance policy or policies with a company or companies authorized to do business in Florida, affording public liability insurance with combined bodily injury limits of at least \$100,000 per person and \$300,000 each occurrence, and property damage insurance of at least \$100,000 each occurrence, for the services to be rendered in accordance with this Agreement. In addition to any other forms of insurance or bonds required under the terms of the agreement, when it includes construction within the limits of a railroad right-of-way, the COUNTY must provide or cause its contractor to provide insurance coverage in accordance with Section 7-13 of the DEPARTMENT's Standard Specifications for Road and Bridge Construction (2010), as amended.

C. WORKER'S COMPENSATION. The COUNTY shall also carry or cause its contractor/consultant to carry and keep in force Worker's Compensation insurance as required for the State of Florida under the Worker's Compensation Law.

5. COMPLIANCE WITH LAWS

A. The COUNTY shall allow public access to all documents, papers, letters, or other material subject to the provisions of Chapter 119, Florida Statutes, and made or received by the COUNTY in conjunction with this Agreement. Failure by the COUNTY to grant such public access shall be grounds for immediate unilateral cancellation of this Agreement by the DEPARTMENT.

B. The COUNTY shall comply with all federal, state, and local laws and ordinances applicable to the work or payment for work thereof, and shall not discriminate on the grounds of race, color, religion, sex, national origin, age or disability in the performance of work under this Agreement.

C. No funds received pursuant to this Agreement may be expended for lobbying the Legislature, the judicial branch, or a state agency.

D. The COUNTY and the DEPARTMENT agree that the COUNTY, its employees, and subcontractors are not agents of the DEPARTMENT as a result of this Agreement for purposes other than those set out in Section 337.274, Florida Statutes.

6. COMPLIANCE WITH FLORIDA SINGLE AUDIT ACT

A. The administration of funds awarded by the DEPARTMENT to the COUNTY may be subject to audits and/or monitoring by the DEPARTMENT as described in Exhibit 1.

B. **MONITORING.** In addition to reviews of audits conducted in accordance with U.S. Office of Management and Budget ("OMB") Circular A-133 and Section 215.97, Florida Statutes, as revised (see "AUDITS" below), monitoring procedures may include, but are not limited to, on-site visits by DEPARTMENT staff, limited scope audits as defined by OMB Circular A-133, as revised, and/or other procedures. By entering into this agreement, the COUNTY agrees to comply and cooperate fully with any monitoring procedures/processes deemed appropriate by the DEPARTMENT. In the event the DEPARTMENT determines that a limited scope audit of the COUNTY is appropriate, the COUNTY agrees to comply with any additional instructions provided by the DEPARTMENT staff to the COUNTY regarding such audit. The COUNTY further agrees to comply and cooperate with any inspections, reviews, investigations, or audits deemed necessary by the DEPARTMENT'S Office of Inspector General ("OIG") and Florida's Chief Financial Officer ("CFO") or Auditor General.

C. **AUDITS.** Recipients of state funds (i.e. a nonstate entity as defined by Section 215.97(2)(m), Florida Statutes) are to have audits done annually using the following criteria:

- i. In the event that the COUNTY expends a total amount of State financial assistance equal to or in excess of \$500,000 in any fiscal year, the COUNTY must have a State single or project-specific audit for such fiscal year in accordance with Section 215.97, Florida Statutes; applicable rules of the Department of Financial Services and the CFO; and Chapters 10.550 (local government entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General. In determining the State financial assistance expended in its fiscal year, the COUNTY shall consider all sources of State financial assistance, including State financial assistance received from the DEPARTMENT, other state agencies, and other nonstate entities. State Financial assistance does not include federal direct or pass-through awards and resources received by a non-state entity for federal program matching requirements.
- ii. In connection with the audit requirements addressed in paragraph 6.C.i, the COUNTY shall ensure that the audit complies with the requirements of Section 215.97(7), Florida Statutes. This includes submission of a financial reporting package as defined by Section 215.97(2)(e), Florida Statutes, and Chapters 10.550 (local governmental agencies) and 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General.
- iii. If the COUNTY expends less than \$500,000 in State financial assistance in its fiscal year, an audit conducted in accordance with the provisions of Section 215.97, Florida Statutes, is not required. However, if the COUNTY elects to have an audit conducted in accordance with the

provisions of Section 215.97, Florida Statutes, the cost of the audit must be paid from non-State funds (i.e., the cost of such an audit must be paid from the COUNTY's resources obtained from other than State entities).

- iv. State awards are to be identified using the Catalog of State Financial Assistance (CSFA) title and number, award number and year, and name of the state agency awarding it.

D. OTHER AUDIT REQUIREMENTS. The COUNTY shall follow up and take corrective action on audit findings. Preparation of a summary schedule of prior year audit findings, including corrective action and current status of the audit findings is required. Current year audit findings require corrective action and status of findings. Records related to unresolved audit findings, appeals, or litigation shall be retained until the action is completed or the dispute is resolved. Access to project records and audit work papers shall be given to the DEPARTMENT, the Department of Financial Services, and the Auditor General. This section does not limit the authority of the DEPARTMENT to conduct or arrange for the conduct of additional audits or evaluations of state financial assistance or limit the authority of any other state official.

E. REPORT SUBMISSION.

- i. Copies of financial reporting packages required by paragraph 6.C of this agreement shall be submitted by or on behalf of the COUNTY directly to each of the following:
 - a. The DEPARTMENT at each of the following addresses:

**District PLEMO Office – MS 2007
Attn: Jordan Green, P.E., Rural Area Transportation Engineer
1109 South Marion Avenue
Lake City, Florida 32025**
 - b. The Auditor General's Office at the following address:

**Auditor General's Office
Room 401, Pepper Building
111 West Madison Street
Tallahassee, Florida 32399-1450**
- ii. Copies of reports or the management letter required by Paragraph 6 D of this Agreement shall be submitted by or on behalf of the COUNTY directly to:
 - a. The DEPARTMENT at each of the following addresses:

**District PLEMO Office – MS 2007
Attn: Jordan Green, P.E., Rural Area Transportation Engineer
1109 South Marion Avenue
Lake City, Florida 32025**
- iii. Any reports, management letter, or other information required to be submitted to the DEPARTMENT pursuant to this Agreement shall be submitted timely in accordance with OMB Circular A-133, Florida Statutes, and Chapters 10.550 (local governmental entities) and 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, as applicable.
- iv. The COUNTY, when submitting financial reporting packages to the DEPARTMENT for audits done in accordance with OMB Circular A-133 or Chapters 10.550 (local governmental entities) or 10.650 (nonprofit and for-profit organizations), Rules of the Auditor General, should indicate the date that the reporting package was delivered to the COUNTY in correspondence accompanying the reporting package.

F. **RECORD RETENTION.** The COUNTY shall retain sufficient records demonstrating its compliance with the terms of this Agreement for a period of at least five (5) years from the date the audit report is issued, and shall allow the DEPARTMENT, or its designee, CFO, or Auditor General access to such records upon request. The COUNTY shall ensure that audit working papers are made available to the DEPARTMENT, or its designee, CFO, or Auditor General upon request for a period of at least five (5) years from the date the audit report is issued, unless extended in writing by the DEPARTMENT.

7. **TERMINATION AND DEFAULT**

A. This Agreement may be canceled by the DEPARTMENT in whole or in part at any time the interest of the DEPARTMENT requires such termination. The DEPARTMENT also reserves the right to seek termination or cancellation of this Agreement in the event the COUNTY shall be placed in either voluntary or involuntary bankruptcy. The DEPARTMENT further reserves the right to terminate or cancel this Agreement in the event an assignment be made for the benefit of creditors. This Agreement may be canceled by the COUNTY upon sixty (60) days written notice to the DEPARTMENT.

B. If the DEPARTMENT determines that the performance of the COUNTY is not satisfactory, the DEPARTMENT shall have the option of (a) immediately terminating the Agreement, or (b) notifying the COUNTY of the deficiency with a requirement that the deficiency be corrected within a specified time, otherwise the Agreement will be terminated at the end of such time, or (c) take whatever action is deemed appropriate by the DEPARTMENT.

C. If the DEPARTMENT requires termination of the Agreement for reasons other than unsatisfactory performance of the COUNTY, the DEPARTMENT shall notify the COUNTY of such termination, with instructions to the effective date of termination or specify the stage of work at which the Agreement is to be terminated.

D. If the Agreement is terminated before performance is completed, the COUNTY shall be paid only for that work satisfactorily performed for which costs can be substantiated. Such payment, however, may not exceed an amount which is the same percentage of the contract price as the amount of work satisfactorily completed is a percentage of the total work called for by this Agreement.

8. **MISCELLANEOUS**

A. All words used herein in the singular form shall extend to and include the plural. All words used in the plural form shall extend to and include the singular. All words used in any gender shall extend to and include all genders.

B. The DEPARTMENT shall not be obligated or liable hereunder to any party other than the COUNTY.

C. In no event shall the making by the DEPARTMENT of any payment to the COUNTY constitute or be construed as a waiver by the DEPARTMENT of any breach of covenant or any default which may then exist, on the part of the COUNTY, and the making of such payment by the DEPARTMENT while any such breach or default shall exist shall in no way impair or prejudice any right or remedy available to the DEPARTMENT with respect to such breach or default.

D. This document incorporates and includes all prior negotiations, correspondence, conversations, agreements, or understandings applicable to the matters contained herein, and the parties agree that there are no commitments, agreements or understandings concerning the subject matter of this Agreement that are not contained in this document. Accordingly, it is agreed that no deviation from the terms hereof shall be predicated upon any prior representation or agreements whether oral or written. It is further agreed that no modification amendment or alteration in the terms or conditions contained herein shall be effective unless contained in a written document executed with the same formality and of equal dignity herewith.

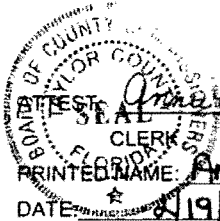
E. If any part of this Agreement shall be determined to be invalid or unenforceable by a court of competent jurisdiction or by any other legally constituted body having the jurisdiction to make such determination, the remainder of this Agreement shall remain in full force and effect provided that the part of this Agreement thus invalidated or declared unenforceable is not material to the intended operation of this Agreement.

F. This Agreement shall be governed by and construed in accordance with the laws of the State of Florida. Venue of any judicial proceedings arising out of this Agreement shall be in Leon County, Florida.

G. This Agreement shall be effective upon execution by both parties and shall continue in effect and be binding on the parties until the PROJECT is completed and accepted and payment made by the DEPARTMENT.

The remainder of this page intentionally left blank.

IN WITNESS WHEREOF, the COUNTY has caused this Agreement to be executed on its behalf this 19th day of February, 2013, by the Chairman of the Board of Commissioners, authorized to enter into and execute same by Resolution Number N/A of the Board on the 19th day of February, 2013, and the DEPARTMENT has executed this Agreement through its District Secretary for District Two, Florida Department of Transportation, this 22 day of March, 2013.



TAYLOR COUNTY, FLORIDA

ATTEST: Annie Mae Murphy (SEAL)

BY: [Signature]

CHAIRMAN, BOCC

PRINTED NAME: Annie Mae Murphy

PRINTED NAME: Pam Feagle

DATE: 2/19/2013

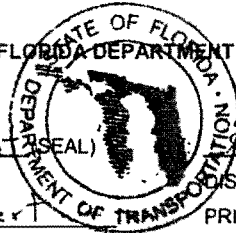
DATE: 2/19/2013

Legal Review: [Signature]

PRINTED NAME: CONRAD C. BISHOP, JR.

DATE: 3-22-13

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION



ATTEST: Lisa Lambert (SEAL)

EXECUTIVE SECRETARY

DISTRICT TWO SECRETARY

PRINTED NAME: Lisa Lambert

PRINTED NAME: Greg Evans

DATE: March 28, 2013

DATE: 03/29/13

FDOT Legal Review:

[Signature]
PRINTED NAME: Melissa K. Blackwell

DATE: 3-27-13

Availability of Funds

Approval:

(Date)

Financial Project No.: 430725-1-58-01
Catalog of State Financial Assistance No.: 55016

EXHIBIT "A"
PROJECT DESCRIPTION AND RESPONSIBILITIES

This exhibit forms an integral part of that certain Joint Participation Agreement between the State of Florida Department of Transportation and the Taylor County Board of County Commissioners dated _____.

PROJECT LOCATION:

The project is referred to as resurfacing of Osteen Road from SR 30 / US 98 to CR 361A in Taylor County, Florida.

PROJECT DESCRIPTION:

The project consists of resurfacing the existing roadway as follows:

- Development of design plans;
- Bid and award;
- Construction

AGENCY RESPONSIBILITIES:

The Agency is required to provide a copy of the design plans for the Department's file.

If Right-of-Way activities become apparent, begin coordination with the Department at once.

The Department's maximum participation is not to exceed **\$245,258.00**.

Prior to the execution of this Agreement, a project schedule of funding shall be prepared by the Agency and approved by the Department. The Agency shall maintain said schedule of funding, carry out the project, and shall incur obligations against and make disbursements of project funds only in conformity with the latest approved schedule of funding for the project. The schedule of funding may be revised by execution of a Supplemental Agreement between the Department and Agency. The Agency acknowledges and agrees that funding for this project may be reduced upon determination of the award amount and execution of the Supplemental Agreement.

The Honorable Pam Feagle, Chair 201 E. Green Street Post Office Box 620 Perry, Florida 32348	STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION SMALL COUNTY ROAD ASSISTANCE PROGRAM (SCRAP)	Financial Project ID: 430725-1-58-01
	SCHEDULE OF FUNDING EXHIBIT "B"	Contract Number:

PROJECT DESCRIPTION

Name: Osteen Road Length: N/A

Termin: SR 30 / US 98 to CR 361A

Description of Work: resurfacing or reconstruction

TYPE OF WORK By Fiscal Year	(1) TOTAL PROJECT ESTIMATE FUNDS (100%)	(2) AGENCY FUNDS (0%)	(3) STATE & FEDERAL FUNDS (100%)
Design 2008-2009 2009-2010 2010-2011 Total Design Cost			
Right of Way 2008-2009 2009-2010 2010-2011 Total Right of Way Cost			
Construction 2009-2010 2010-2011 2011-2012 2012-2013 2013-2014 Total Construction Costs	\$ 245,258.00 \$ 245,258.00		\$ 245,258.00 \$ 245,258.00
Construction Engineering and Inspection 2013-2014 2014-2015 2015-2016 2016-2017 Total Construction Costs			
Total Cost of Project	\$ 245,258.00		\$ 245,258.00

The Department's fiscal year begins on July 1. For this project, funds are not projected to be available until after July 1st each fiscal year. The Department will notify the Agency, in writing, when funds are available.

EXHIBIT 1

FEDERAL and/or **STATE** resources awarded to the COUNTY pursuant to this agreement should be listed below. If the resources awarded to the COUNTY represent more than one Federal or State program, provide the same information for each program and the total resources awarded. **Compliance Requirements** applicable to each Federal or State program should also be listed below. If the resources awarded to the COUNTY represent more than one program, list applicable compliance requirements for each program in the same manner as shown here:

- (e.g., What services or purposes the resources must be used for)
- (e.g., Eligibility requirements for recipients of the resources)
- (Etc.)

NOTE: Instead of listing the specific compliance requirements as shown above, the State awarding agency may elect to use language that requires the COUNTY to comply with the requirements of applicable provisions of specific laws, rules, regulations, etc. The State awarding agency, if practical, may want to attach a copy of the specific law, rule, or regulation referred to.

STATE RESOURCES

<u>State Agency</u>	<u>Catalog of State Financial Assistance (Number & Title)</u>	<u>Amount</u>
FDOT	55.016 – Small County Road Assistance Program (SCRAP)	\$245,258.00

Compliance Requirements

1. Allowed: per F.S. 339.2816, Department of Transportation-approved roadway projects involving resurfacing or reconstructing county roads. All projects funded under this section shall be included in the department's work program developed pursuant to F.S. 339.135.

Not allowed: per F.S. 339.2816, capacity improvements on county roads shall not be eligible for funding under the program.

2. Per F.S. 339.2816: any county that has a population of 75,000 or less according to 1990 federal census data and has enacted the maximum rate of the local option fuel tax authorized by s. 336.025(1)(a).

3. Allowable costs: direct project costs (design, construction, construction engineering and inspection)

NOTE: Section .400(d) of OMB Circular A-133, as revised, and Section 215.97(5)(a), Florida Statutes, require that the information about Federal Programs and State Projects included in Exhibit A be provided to the COUNTY

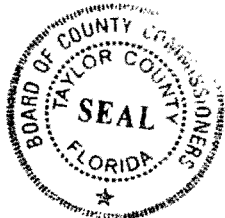
RESOLUTION NO. N/A

WHEREAS, the Board of County Commissioners have been informed that a Resolution should be passed authorizing the Chair of the Board of County Commissioners to enter into the Florida Department of Transportation's Small County Road Assistance Program (SCRAP) Reimbursement Agreement to resurface Osteen Road (CR 359B) from SR 30/US 98 to Woods Creek Road (CR 361B).

THEREFORE, BE IT RESOLVED by the Board of County Commissioners of Taylor County, Florida, that:

1. The Chair of the Board is authorized to enter into the SCRAP Reimbursement Agreement to resurface Osteen Road (CR 359B) from SR 30/US 98 to Woods Creek Road (CR 361B) in Taylor County, Florida.

PASSED in regular session this 19th day of February, 2013.



BOARD OF COUNTY COMMISSIONERS
TAYLOR COUNTY, FLORIDA.

BY: 

Pam Feagle, Chair

ATTEST:

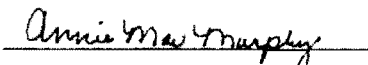

ANNIE MAE MURPHY, Clerk

EXHIBIT "A"
(continued)

(SUPPLEMENTAL AGREEMENT # 1)



Florida Department of Transportation

RICK SCOTT
GOVERNOR

1109 South Marion Avenue
Lake City, FL 32025-5874

ANANTH PRASAD, P.E.
SECRETARY

September 17, 2013

The Honorable Pam Feagle, Chair
Taylor County Board of County Commissioners
201 E. Green Street
Post Office Box 620
Perry, Florida 32348

Subject: Small County Road Assistance Program- Supplemental # 1
Resurfacing of Osteen Road
from SR 30 / US 98 to CR 361A
Financial Project ID: 430725-1-58-01

Dear Chair Feagle:

Enclosed for your files is a fully executed copy of the Supplemental Agreement # 1 for the subject project. This Agreement details the work that the Taylor County will undertake. Construction funds in the amount of **\$507,159.00** have been added for FY 2014.

Thank you for your assistance in securing approval and execution of this agreement. Should you have questions or need additional information, I can be reached at 1-800-749-2967, Extension 7533.

Sincerely,

A handwritten signature in cursive script that reads "Kathy Thomas".

Kathy Thomas, P.E.
District Two Program Management Engineer

KS:ke
Enclosures

cc: Mr. Kenneth Dudley, P.E., Taylor County Engineer
Mr. Jack Brown, Taylor County Administrator

www.dot.state.fl.us

The Honorable Pam Feagle, Chair Taylor County BOCC 201 E. Green Street Post Office Box 620 Perry, Florida 32348	STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION SMALL COUNTY ROAD ASSISTANCE PROGRAM (SCRAP) SUPPLEMENTAL AGREEMENT# 1	Financial Project ID: 430725-1-58-01
		Contract Number: AQX82

PROJECT DESCRIPTION

Per Florida Statutes 339.2816, the Florida Department of Transportation (Department) desires to supplement the Small County Road Assistance Program Agreement (SCRAP) as identified above. All provisions in the basic Agreement remain in effect except as expressly modified by this Supplement. The changes to the Agreement is described below.

Name: Osteen Road Length N/A

Termini: from SR 30 / US 98 to CR 361A

Description of Work: resurfacing

Reason for Supplement: add construction funds in the amount of \$507,159.00 for Fiscal Year 2014

TYPE OF WORK By Fiscal Year	(3) TOTAL PROJECT ESTIMATE FUNDS (100%)	(2) AGENCY FUNDS (0%)	(1) STATE & FEDERAL FUNDS (100%)
Design 2007-2008 2008-2009 2009-2010 Total Design Cost			
Right of Way 2008-2009 2009-2010 2010-2011 Total Right of Way Cost			
Construction 2011-2012 2012-2013 2013-2014 2014-2015 Total Contract Costs	\$ 245,258.00 \$ 507,159.00 \$ 752,417.00		\$ 245,258.00 \$ 507,159.00 \$ 752,417.00
Construction Engineering and Inspection 2012-2013 2013-2014 2014-2015 2015-2016 Total Construction Engineering			
Total Cost of Project	\$ 752,417.00		\$ 752,417.00


The Department's fiscal year begins on July 1. For this project, funds are not projected to be available until after July 1st each fiscal year. The Department will notify the Agency, in writing, when funds are available.

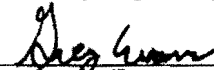
The Honorable Pam Feagle, Chair Taylor County BOCC 201 E. Green Street Post Office Box 620 Perry, Florida 32348	STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION SMALL COUNTY ROAD ASSISTANCE PROGRAM (SCRAP) SUPPLEMENTAL AGREEMENT# 1	Financial Project ID: 430725-1-58-01 Contract Number: AQX82
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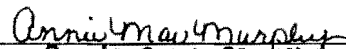
IN WITNESS WHEREOF, the parties have caused these presents to be executed the day and year first above written.


TAYLOR COUNTY BOARD OF COUNTY COMMISSIONERS

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION

By: 
 Name: Pam Feagle
 Title: Chairman

By: 
 Name: Greg Evans
 Title: District Two Secretary

Attest: 
 Name: Annie Mae Murphy
 Title: Clerk

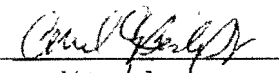
Attest: 
 Name: Lisa Lambert
 Title: Executive Secretary

Date: August 20, 2013

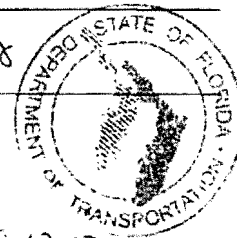
Date: Sept. 13, 2013

As to form:

As to form:


 Attorney
 8/27/13


 District Attorney
 9-13-13



See attached Encumbrance Form for date of funding approval by Comptroller.

EXHIBIT "B"

STATE FINANCIAL ASSISTANCE (FLORIDA SINGLE AUDIT ACT)

THE STATE RESOURCES AWARDED PURSUANT TO THIS AGREEMENT CONSIST OF THE FOLLOWING:

SUBJECT TO SECTION 215.97, FLORIDA STATUTES:

Awarding Agency: Florida Department of Transportation
State Project Title: SMALL COUNTY OUTREACH PROGRAM
CSFA Number: 55.009
***Award Amount:** Added in current SA # 2 - \$236,219
Previously added through SA # 1 - \$388,174

*The state award amount may change with supplemental agreements

Specific project information for CSFA Number 55.008 is provided at:
<https://apps.fldfs.com/fsaa/searchCatalog.aspx>

COMPLIANCE REQUIREMENTS APPLICABLE TO STATE RESOURCES AWARDED PURSUANT TO THIS AGREEMENT:

State Project Compliance Requirements for CSFA Number 55.008 are provided at:
<https://apps.fldfs.com/fsaa/searchCompliance.aspx>

The State Projects Compliance Supplement is provided at: <https://apps.fldfs.com/fsaa/compliance.aspx>

RESOLUTION NO. _____

WHEREAS, The Board of County Commissioners have been informed that a Resolution should be passed authorizing the Chairperson of the Board of County Commissioners to enter into the Small County Road Assistance Program Supplemental Agreement No. 2 to widen and resurface Osteen Road (CR 359B) from US HWY 98 to Woods Creek Rd, and

WHEREAS, Supplemental Agreement No. 2 will provide an additional \$536,219.00 of funding through the Florida Department of Transportation's Small County Road Assistance Program, and

WHEREAS, Supplemental Agreement No. 2 will have no effect on the terms of the original agreement other than to increase such funding, and

WHEREAS, The Board has determined that it is in the best interest of Taylor County to execute Supplemental Agreement No. 2.

THEREFORE, BE IT RESOLVED that the Board of County Commissioners of Taylor County, Florida authorize the Chairperson to enter into Supplemental Agreement No. 2.

PASSED in regular session this ____ day of _____, 2016.

BOARD OF COUNTY COMMISSIONERS
TAYLOR COUNTY, FLORIDA.

BY: _____
JODY DEVANE, Chairperson

ATTEST:

ANNIE MAE MURPHY, Clerk

March 16, 2016

Kenneth Dudley, P.E.
County Engineer, Taylor County
201 E. Green Street
Perry, Florida 32347

RE: Project No. 2013-003-ENG
Osteen Road (CR 359B) Widening/Resurfacing – CEI Services
Taylor County, FL

Dear Kenneth:

On behalf of CHW, thank you for the opportunity to provide a proposal for Construction Engineering Inspection (CEI) Services for the **Osteen Road Widening & Resurfacing** project. We have prepared a preliminary scope and fee for the proposed project CEI Services in consideration of your email request for proposal of March 10, 2016, the provisional requirements of the active CEI Continuing Services contract, the general project scope for widening and resurfacing, experience on past projects in Taylor County, and our preliminary investigation of the project location and existing conditions. **For the purposes of this proposal the terms “engineer of record” and “EOR” are interchangeable with “County Engineer”.** On the basis of the above considerations CHW will provide the following:

PROJECT UNDERSTANDING:

The Osteen Road (CR 359B) Widening & Resurfacing is inclusive of the full extent of roadway, ranging from W U.S. 98 from the project point of beginning, north to Woods Creek Road. The total length of the project along Osteen Road is approximately 1.8 miles and appears to reside within an approximately 100-foot right-of-way. The roadway is a rural roadway with predominantly flat topography with wide, gradual shoulders. Shallow ditches currently provide stormwater attenuation and conveyance. The existing condition of asphalt along the roadway is in poor condition. Residential frontage (and direct access) impacted by the project along with pass-through traffic, are anticipated to be the most prevalent considerations related to MOT. A condition that may affect construction is the location of an existing 10-inch water main that runs along the west side of the roadway, specifically at the location of the guardrail modification at the culvert crossing. Secondly, the existing water meters and boxes adjacent to existing driveways will be to be protected, and may need to

be adjusted to accommodate driveway and ditch improvements. Lastly, with conveyance improvements proposed for the roadway care will need to be given to the connectivity with offsite existing conditions and ensuring that side drains flow and do not retain water due to the flat topography. New side drain slopes should be installed to optimize drainage patterns, therefore, an aspect of quality assurance will be to review and verify inverts that ensure proper drainage.

In accordance with the project Bid Documents (January 2016), plans (01/06/16), and specifications therein, and on the basis of our historical understanding of similar Taylor County projects, and our understanding of widening considerations within a fixed right-of-way, the scope of improvements for the project is summarized as: widening of the existing roadway to achieve 12-foot minimum lane width, overbuild of the existing roadway concurrent with the widening operation, construction of 8-foot stabilized grass shoulders along the extents of the improved roadway, updating of relevant signage to current MUTCD standards, striping of the improved roadway, improvement of roadway connections adjoining the project, construction of new paved driveway turnouts, alleviation of the design clear zone of existing improvements and impediments in conformance with FDOT requirements, restoration of ditch conveyance, selective addition of side drains at driveway connections for conveyance improvements, and the extension of the existing guardrails at the culvert crossings to account for 1) additional fill for grading continuity of shoulder from widened roadway (retaining wall element), and 2) replacement of existing guardrail with new at an elevation conforming to FDOT specifications.

In consideration of the anticipated scope of work above the estimated project duration is approximately 160 calendar days (equating to relatively 114 working days of construction). On the basis of 114 working days of construction, including a maximum of 30 working days between Substantial and Final Completion of the project, the basis for compensation includes a not-to-exceed budget for equivalent "Inspecting Days" plus additional inspector support during paving operations for both project and plant support. A timeframe of 2-weeks is estimated for comprehensive paving operations. Note: If the project scope is reduced or the project is phased due to budgetary constraints the total duration will inherently be reduced, resulting in a reduction of Inspecting Days and cost for CEI services.

SCOPE:

CHW shall be responsible for providing following scope of services:

General

- CHW, as the acting CEI, will abide by the provisions of the Contract for Professional Engineering Services, dated 07/24/15, and as outlined in its Exhibit "A" outlining the Scope of Services for Construction Engineering Inspections. In accordance with the needs of the project as determined by Taylor County elements of the scope of work specifically included or excluded for this project are clarified in this proposal.

- It shall be the responsibility of CHW to administer, monitor, and inspect the Construction Contract such that the project is constructed in reasonable conformity with the plans, specifications, and special provisions for the Construction Contract.
- CHW shall observe the Contractor's work to determine the progress and quality of work, identify discrepancies, report significant discrepancies to the County, consult with the EOR for changes to be administered in the field, and direct the Contractor to correct such observed discrepancies. CHW is designated by the County to negotiate and approve Supplemental Agreements that do not effect time, cost, or design intent. CHW will report such activities in the weekly log. Any other Supplemental Agreements must be determined to be in accordance with Florida law by the County prior to approval by CHW. For any Supplemental Agreement, which include time or cost, CHW shall prepare the Supplemental Agreement as a recommendation to the County, which the County may accept, modify or reject upon review. CHW shall consult with the County, as it deems necessary and shall direct all issues, which exceed its delegated authority to the County for action or direction. CHW shall advise the County of any significant omissions, substitutions, defects, and deficiencies noted in the work of the Contractor and the corrective action that has been directed to be performed by the Contractor. CEI services provided by CHW shall not relieve the Contractor of responsibility for the satisfactory performance of the Construction Contract.
- CHW shall assist in coordinating the Construction Contract administrative activities of all parties involved in completing the construction project. This shall include facilitation of coordination and response with the owner's representative and design EOR providing construction administration services to the project. Services shall include maintaining the required level of review of the Contractor compliance activities to assure compliance with the specifications, and special provisions of the Construction Contract. CHW shall maintain complete, accurate records of all compliance activities and events relating to the project performance and properly document all deficiencies. Pursuant to the contract CHW shall not be liable for failure of other parties to follow written direction from CHW as the project CEI. CHW will escalate non-compliance issues to the Taylor County Engineer, as Owner's representative, in the event that the County's interests are at stake as a result of non-compliance by others as it relates to conformance with the Construction Contract and project plans and specifications.

Length of Service

- CHW's services for this Construction Contract shall begin as early as the 90% CD design stage, upon written notification to proceed by the County. For the duration of the project, CHW shall coordinate closely with the County and Contractor to minimize rescheduling activities due to construction delays or changes in scheduling of Contractor activities. The combined anticipated letting, procurement, and construction duration for the project is 220 days total. CHW's proposal is based on the assumption that the contract work will *generally* take place Monday – Friday,

8:00 AM to 5:00 PM, with limited overtime and weekend work for paving operations only—this is for the basis of estimated time only. **CHW will have a representative onsite whenever the contractor is performing work onsite.** CHW reserves the right to revisit CEI fees based on actual contract time and contractor's schedule (i.e. overtime/weekend hours, contract time extensions given to contractor, etc.). Should the contractor overrun the allotted contract time resulting in liquidated damages to the contractor, thereby extending CEI service coverage and cost, CHW shall track all extended cost and submit an invoice to the County to be reimbursed via assessed liquidated damages from the contractor.

Items Furnished by CEI

- Office Automation – CHW will provide all supporting technology as required to fulfill the scope of CEI services for this project. This specifically includes Microsoft Office platforms for document preparation and correspondence, as well as Blue Beam Revu for formal report compilation with record photo arrays.
- File Repository – CHW will provide an FTP site for the project whereby project files may be stored and exchanged with the owner and engineering consultant.
- Vehicles – CHW CEI inspectors will be fully equipped with appropriate inspection and safety equipment as necessary to effectively carry out the requirements of this project. Vehicles shall have the CHW name and phone number visibly displayed on the vehicle.
- CHW shall supply engineering survey and inspection equipment, and will sub-contract with a testing company to supply testing equipment essential in order to carry out the work for this project, as applicable. Such equipment includes those non-consumable and non-expendable items, which are normally needed for a CEI project and are essential in order to carry out the work prescribed for this project.

Onsite Inspection

- CHW shall monitor the Contractor's on-site construction activities and inspect materials entering into the work in accordance with the plans, specifications, and special provisions for the Construction Contract to determine that the projects are constructed in reasonable conformity with such documents.
- CHW shall keep accurate records of the Contractor's daily operations and of significant events that affect the work.
- CHW shall be responsible for monitoring the contractor's inspection of Contractor's Work Zone Traffic Control Plan and review of modifications to the Work Zone Traffic Control Plan, including Alternate Work Zone Traffic Control Plan, in accordance with the FDOT's procedures.

Sampling & Testing

- CHW shall provide daily surveillance and oversight of the Contractor's Quality Control activities and determine the acceptability of all materials and completed work items on the basis of either test results, verification of a certification, or applicable quality assurance reviews.

- Plant Verification in accordance with Work Group 10.3 is included. Plant time is anticipated as 2-weeks (10-business days) for paving operations to include plant verification by a certified plant inspector (Asphalt Plant 1 & 2).

Specific Considerations & Inclusions

1. Pre-Construction Conference: Prepare for and conduct the project Pre-Construction Conferences. Address and resolve all issues that arise at the meeting with appropriate offices, agencies and the County. Prepare and distribute detailed minutes of the meeting.
2. Construction Phase Meetings: Prepare the agenda, attend, and conduct as-needed meetings with County personnel, EOR, contractor, sub-contractors, utility personnel and other agencies affected by the project. Be prepared to discuss recent progress, upcoming events in the schedule, and problems associated with the project. Record significant information revealed and discussed at the meeting, and distribute written minutes to the appropriate parties.
3. Project Administration: Provide project administration and coordinate with the County and EOR during the construction phase. Prepare for and attend, when requested, any periodic or in-depth County inspections that may be conducted on the project related to project work, progress or records. Prepare for, cooperate with, and assist others that may be assigned to review project records, payments, reports, etc. Provide ample inspectors, testing laboratory personnel, and assistance to adequately oversee all work being done on the contract. Monitor CHW hours worked on the project and justify any need for overtime with prior approval. Manage and coordinate the activities of the testing company under sub-contract services to CHW. Prior to starting work, submit to County a final listing of personnel assigned to the project for review and approval.
4. Construction Inspection: Provide effective and qualified monitoring of all construction operations and QC being conducted by the contractor's personnel. All assigned inspectors will be certified in the applicable FDOT CTQP listed below:
 - Asphalt Paving Level 1 & 2 (full time during paving operations, Work Group 10.1)
 - Asphalt Plant Level 1 & 2 (full time plant operations, Work Group 10.3)
 - QC Manager (as needed)
 - Earthwork Construction Inspection (as needed)
 - SWPPP Certified (as needed)
 - MOT Certified
5. Supplemental Agreements/Construction Change, VECP: Notify the County of the necessity of any Supplemental Agreements/Construction Changes. Negotiate prices for additional pay items with the contractor while adhering to predefined project unit pricing. Coordinate acceptance of prices with the County. Submit Value Engineering Change Proposals to the County for analysis and distribution.
6. Reporting: It shall be the responsibility of CHW to ensure that any and all reporting required by the County are met. CHW shall ensure that all reporting required for 100% reimbursement to the County is properly completed and submitted according to FDOT guidelines and County requirements.

7. Quality Assurance and Testing for Acceptance: The intent is for CHW to monitor and oversee the testing provided by the contractor in the field as defined in the Contract, Plans or Specifications, to monitor and oversee documentation of testing by the contractor. Examples included in the responsibility of CHW for verification are asphalt spread rates, construction dimensions detailed in the plans, and densification of soils and base material to assure conformance to Plans and Specifications—the preceding are only examples and not all-inclusive. In case of notification of defective asphalt as defined in the Specifications, CHW will submit the initial information and receive the final disposition of the material after review. Certifications of material submitted by the contractor will be reviewed by CHW for conformity to the Project Specifications. The certification documents submitted to the County will also be reviewed for completeness and conformance to the contract document. A Final Materials and Tests Certification as provided by the contractor will be submitted to the County with the Final Records.
8. Progress Payments: CHW will review the contractor's Progress Payments to verify the quantities using actual project field records, as directed by Special Provisions in the contract, from Supplemental Agreements/Construction Changes or Force Accounts. The quantities for payment will be referenced to field records prior to submission to the County to recommend payment. Test reports will be on file prior to payment. The County must approve any waiver of testing documents prior to payment. Payments for stockpiled material may be made as defined in the Standard Specifications and approved by the County.
9. Revisions to the Contract Plans: Any revisions to the contract plans or cross sections are the responsibility of the EOR, as coordinated with Taylor County.
10. Distribution of Correspondence: Include the County on all correspondence (i.e. email, etc.) between the Engineer of Record, contractor, subcontractors, or others concerning matters related to the project.
11. Quality Assurance Plan: A QA Plan will be developed specifically for this project with key project considerations, critical aspects of the project design, EOR project priorities for quality assurance, non-standard specification requirements, internal standards and performance expectations, and the Owner's focal points for care to the project and preferences for CEI service specifics. The QA Plan will be reviewed for effectiveness 2-months into the project.
12. Documentation of Existing Conditions: Provide a pre-construction report with supporting photos of the pre-construction conditions of the site. Record report and photos will be uploaded to the project FTP site.
13. Review Contractor's Schedule: Conduct a pre-construction review of the contractor's proposed CPM schedule and offer insights regarding feasibility, prospective improvement, or concerns. Schedule shall be reviewed prior to Pre-Construction Conference.
14. Monitoring of Contractor's Schedule: Maintain a tracking log of calendar days, working days, verified and documented weather days, and documented and verified time extensions. Report to the County (copying the EOR) the status of contract time on a monthly basis, but advance notice of impending overruns in contract time in

order to make the County aware as well as the contractor in an effort to assist in the avoidance in delays to the completion of the project.

15. Inspection of Work: Provide inspection services for conformance to Plans and Specifications for all roadway, structures, and specialty items that are being incorporated into the project. Observe and verify the contractor's measurements and records of quantities for payment. Record field measurements in project records for review by the County or auditors. The records will be compiled and submitted to the County. Verify contractor's inspection of traffic control daily, and additionally as required or requested. Notify the contractor of deficiencies or observed problems immediately. Verify any and all pay quantities in the case of questions by the contractor or County. Prepare an accurate daily diary, signed by the inspector, consisting of:
 - Record of the contractors on the project
 - Their personnel (number and classification)
 - Equipment (number and type or size)
 - Location and work performed by each contractor or subcontractor
 - Directives given the contractor and relevant discussion
 - Events of note on the project
 - Accidents on the project and any details surrounding the accident such as police report number, fatalities, causes, time, etc. Obtain a copy of the police report for the project records whenever possible.
 - Weather, amount of precipitation, temperature at morning, noon, and evening, cloudy, clear, etc.
 - Days charged, with explanation if not charged
 - Equipment arriving or leaving the project, idle equipment
 - Any other details that may be important later in the project life
16. Daily Reports: There are numerous reports, documents, etc., that must be generated in the process of contract administration. A copy (electronic and paper) will be provided to the County during construction, on a weekly basis or as needed. Any questions regarding the requirements can be forwarded to the County for clarification at any time. A copy of the report template will be provided to the County for reference and input prior to the start of construction.
17. Monthly Status Reports: Provide monthly project status reports to the owner and EOR at the time of invoicing.
18. Final Records: Submit a compilation of project records in the FDOT's standard format to the County (Final Records) after project completion. Make corrections when/if notified and resubmit the records and a final estimate for the project at the appropriate time, if required. Submit all final forms (FHWA-47, CC3, etc.) with the final records, if required. Coordinate consultant hours after the project completion with the County for approval.
19. Project Claims: Prepare documentation and assist in the defense of the County, when requested, in preparation for Claims or possible Claims resulting in the execution of the contract.

20. Utility Relocation Coordination: Coordination of utility relocations are a responsibility of the Contractor. Utility relocation shall be by the utility company. CHW will assist in coordinating with the County as needed to facilitate action by the Contractor or Utility Company as it relates to relocation of conflict utilities.
21. Insurances: Note that insurances have been included in attachment to this proposal for reference and record, with updates provided upon any change in coverage or renewal.

SUMMARY OF PROJECT APPROACH:

As the project CEI, CHW will initiate project coordination by building a professional relationship with the project EOR. CHW will coordinate a meeting with the EOR to discuss proposed design and project approach in order to define priorities and facilitate consensus on construction phase collaboration required to ensure the success of the project as ultimately determined by Taylor County and the objectives set forth by each respective firm. CHW will maintain communication with the EOR in preparation for the Pre-Construction Conference to ensure expectations are clearly and jointly communicated to the Contractor by the EOR/CEI team. CHW will conduct its own pre-construction project assessment of the site for in-depth investigation into site specific challenges related to completion of the project scope, MOT, schedule, and potential unforeseen and advise the County of its findings. The CEI lead will conduct a comprehensive project coordination meeting with the CEI team (PM, inspectors, support, etc.) to review the contents of this proposal, the provisions of the active Continuing Services contract, project plans and specifications, and aspects of inspection focus requested from the EOR related to specific project challenges and critical elements of the work. CHW will provide a committed assignment of its two (2) most qualified inspectors to the project. Inspectors will maintain current certifications for applicable work to be inspected as outlined in the "Assigned Personnel" section of this proposal. Inspectors will be pre-initiated with performance expectations defined by 1) CHW standards, 2) client expectations, 3) EOR priorities, 4) plans and specifications, and 5) over-arching FDOT and other relevant governing specifications. The CEI team will maintain open dialogue and coordination with the Taylor County Engineer and EOR. Inspectors maintain diligent reporting of construction operations, forwarding draft reports daily for advance notification of critical items if need be, and support staff will formalize and submit complete digital reports on a weekly basis. The CEI PM will track all relevant progress, cost, and correspondence and serve as the primary facilitator of project related communication by all parties. The CEI PM will act in the interests of Taylor County to administrate the Construction Contract. The CEI inspectors will provide primary oversight of construction operations as it relates to approvability and conformance with the project requirements. The CEI inspectors will proactively communicate daily with the contractor for planning of inspections for the contractor's work and notify project stakeholders of relevant milestones. The CEI inspector will direct action by the contractor in the field when necessary to correct or remediate deficient or non-conforming work and, when necessary, shall utilize his/her authority to stop the work as required for administration of the Construction Contract. The CEI team shall advise other stakeholders when the work is Substantially Complete in order to facilitate scheduled reviews by all parties. As the project progresses the CEI team will store project

files and record documentation for streamlining of closeout documents at project completion. In the event that the EOR in its efforts to provide Construction Administration services, or the Contractor in its diligence to fulfill the provisions of the Construction Contract, should fail to act as required in the interests of the project CHW shall escalate such issues to the Taylor County Engineer for support in soliciting such required action.

SUMMARY OF DELIVERABLES:

The following deliverables will be provided by the CEI team:

- Quality Assurance Plan
- Documentation of Existing Conditions
- Contractor's Schedule Review
- Daily CEI Reporting
- Monthly Status Reporting
- Pay App Review & Certification
- Charge Order Qualification
- Substantial Completion Inspection
- Punchlist Preparation
- Final Completion Inspection
- Permit Closeouts
- As-Built Review

ASSIGNED PERSONNEL:

CHW has added a new CEI Project Manager to its construction services department. Don Lee will serve as the project manager for this project in an active training function with direct oversight by the acting "Senior PM", Josh Highlander. Don Lee's resume is included as an attachment to this resume for a preliminary introduction to this new member of CHW's CEI team.

Please note that any time associated with on the job training will not be allocated to the project. Mr. Lee will receive direct oversight from the Senior PM on this project as he gains familiarity with Taylor County, and reciprocally, as Taylor County builds confidence in Mr. Lee's ability to contribute to the project. Effort for project management tasks will only be billed one time on the basis of tangible contribution to the project—no redundant billing for shadowing or training will be invoiced (rather this is a CHW direct training expense). Any and all contributing project management time will be billed at the CEI PM rate in the fee table included in this proposal.

The proposed CEI project team for the project is provided on the following page:

CEI Role	Team Member	Relevant Credentials
Director of Construction Services (CEI Senior PM)	Josh Highlander	Professional Engineer (FL), Advanced MOT Certified
CEI Project Manager (Contract Administrator)	Don Lee	Intermediate MOT Certified (past certifications not listed, forthcoming; resume attached)
CEI Inspector (Primary)	Gary Westberg	CTQP: Asphalt Plant 1 & 2, Asphalt Paving 1 & 2, Advanced MOT Certified
CEI Inspector (Secondary)	Jackie Curry	CTQP: Asphalt Plant 1 & 2, Asphalt Paving 1 & 2, Earthwork 1, Advanced MOT Certified; LBR Tech, Aggregate Base Testing Tech, Qualified Sampler Tech, Concrete Field Test Tech
MOT Support	Vince Smith	Advanced MOT Certified
CEI Admin	Kelly Bishop	

ITEMIZED FEES:

Classification	Scope Description	Time (HR) x Rate	Fees
CEI Director	Pre-Con Coordination CEI Oversight	8 hr x \$155.00/hr	\$1,240.00
CEI PM	Contract Administration	42 hr x \$110.00/hr	\$4,620.00
CEI Inspector (Primary)	Daily Site Inspection	856 hr x \$80.00/hr	\$68,480.00
CEI Plant Inspector	Plant Ops Inspection	100 hr x \$80.00/hr	\$8,000.00
CEI Admin	Document Control	58.5 hr x \$50.00/hr	\$2,925.00
		TOTAL =	\$85,265.00

The above fee for Construction Engineering Inspections Services is proposed as a **not-to-exceed** cost = **\$85,265.00**. This fee becomes a not-to-exceed fee and all work will be based on a time and materials basis per our contract fee structure. The scope and cost included in this preliminary proposal may be revised or refined to better tailor them to the final acute scope of the project and/or budgetary constraints.

Fee Assumptions

- Assumes a project duration of 160 calendar days (approximately 114 working days) based upon the anticipated scope and associated project delivery of a similar past project in Taylor County (Roberts Aman Road, on the basis of "Working Days") applied to the entirety of the 1.8-mile Osteen Road project area.
- CEI Director time included on the basis of preliminary site visitation, project planning, and Pre-Construction Meeting attendance.
- CEI PM time calculated on the basis of 2-hours per week of management effort over the course of an estimated 22-week active construction project.
- CEI Primary Inspector time based upon "Inspecting Days" (approx. 114).

- CEP Plant Inspector time based upon paving operation days (estimated 2-weeks, or 10-days). Anticipated 10-hour plant days.
- CEI Admin time based on 0.5-hour of formal report preparation, filing, and distribution for a maximum of 117 reports (field + plant inspections).
- Note: Daily rate for Inspection (8-hours) + Reporting (0.5-hours) = \$665.00/day.

DELIVERABLES:

Inspections shall be performed to coincide with contractor working days on site and in the plant. CHW will provide inspections to mirror the contractors operations. Non-working days (no construction or inspection activities) will not be tracked or billed against the CEI contract not-to-exceed value. Inspection reporting will be formalized and submitted on a weekly basis, unless the CEI team, Owner, or EOR necessitate otherwise for any particular days' activities or milestone.

We hope that the proposed scope of services is satisfactory and meets with your approval. If you have any questions regarding this proposal or the proposed scope of services please do not hesitate to contact me (Mobile: 352-538-4739, or email: josh@chw-inc.com). We appreciate the opportunity to provide you with this proposal and look forward to serving Taylor County on this project.

Sincerely,
CHW, Inc.



Josh Highlander, PE
Director of Construction Services

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



The Board received bids at the March 22, 2016 for the purchase and installation of hurricane shutters on twelve single family homes . Only one bid was received from Florida Homes, Inc. The Bid Committee is recommending awarding the bid to Florida Homes as the bid document has been reviewed and is found to be in order.

MEETING DATE REQUESTED:

April 4, 2016

Statement of Issue: The Board received bids at the March 22, 2016 meeting for the purchase and installation of hurricane shutters on twelve (12) single family homes. These projects will be 100% funded with the Residential Construction Mitigation Program (RCMP) grant the County has received. The Bid Committee recommends awarding the bid to Florida Homes, Inc.

Recommended Action: Award RCMP grant hurricane shutter project bid to Florida Homes, Inc.

Fiscal Impact: The projects will be 100% grant funded.

Submitted By: Melody Cox

Contact: Melody Cox

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: The County received \$194,000 through the RCMP grant program to mitigate potential damage to homes resulting from severe weather. The twelve (12) homes currently under construction with CDBG and/or SHIP funds will have hurricane shutters installed with the RCMP grant funds. One bid was received by Florida Homes, Inc. In addition to the Bid Committee, the bid documents have also been reviewed by Jason Pettus, Project Manager of the grant program for the Florida Division of Emergency Management. We are currently qualifying additional applicants for the program and will use the remaining funds for roofing projects.

Attachments: Bid Recommendation




Government Services Group, Inc.
www.WeServeGovernments.com



MEMORANDUM

TO: Taylor County Board of County Commissioners

FROM: Jay Moseley, Senior Consultant 

SUBJECT: Bid Award Recommendations – Residential Construction Mitigation Program
(RCMP) Wind Hazard Mitigation

DATE: March 29, 2016

BID AWARD

On March 22, 2016 one bid was opened for the installation of shutters for the RCMP program grant. This bid was reviewed and was acceptable. We recommend awarding the bid to Florida Homes, Inc. for the noted amounts in the attached bid.

Attachments:

Bid Documents



REALTY / CONSTRUCTION

13919 NW 145TH AVENUE
ALACHUA, FL 32615
PH: 386-418-4663
FAX: 386-462-7718

HAZARD MITIGATION GRANT PROGRAM

3/10/16

TAYLOR COUNTY

Proposal for material and installation for
code approved accordion style shutters -
unit pricing for the following window and
door sizes:

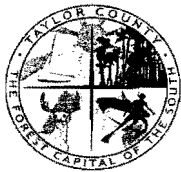
Door 36" x 80"	#1,023
Windows 38" x 38"	667
53" x 53"	1,023
38" x 62"	874
38" x 52"	785

Debbie Herring, Agent
Fla Homes, Inc. R/c
13919 NW 145th Ave
Alachua, FL 32615

Debbie Herring, agent

TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:


THE BOARD TO TASK THE COUNTY ADMINISTRATOR TO WORK WITH THE COUNTY ATTORNEY AND THE TOURIST DEVELOPMENT COUNCIL (TDC) TO DRAFT AN ORDINANCE AMENDING SECTION 70-1, TAYLOR COUNTY ORDINANCES, TO INCLUDE AN UPDATED TOURISM DEVELOPMENT PLAN AND AUTHORIZING THE REMAINING 2% ASSESSMENT ALLOWED BY STATUTE, AS AGENDAED BY THE COUNTY ADMINISTRATOR.

MEETING DATE REQUESTED:

APRIL 4, 2016

Statement of Issue:

THE CURRENT ORDINANCE CALLS FOR A 3% TAX ASSESSMENT ON LODGINGS. FLORIDA STATE STATUTE CHAPTER 125.0104 ALLOWS UP TO 5% ASSESSMENT.

Recommended Action: APPROVE THE ACTION

Fiscal Impact: POTENTIAL REVENUE FOR THE COUNTY

Budgeted Expense: N/A

Submitted By: COUNTY ADMINISTRATOR

Contact: DUSTIN HINKEL, 850-838-3500 X 7

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues:

Options:

Attachments: SEC 70-1 TAYLOR CO CODE OF ORDINANCES
CHAPTER 125.0104, FLORIDA STATUTES

Sec. 70-1. - Tourist development (lodgings) tax.

- (a) There is levied and imposed a tourist development tax throughout the county, at the rate of two percent of each whole and major fraction of each dollar of the total rental and consideration charged every person who rents, leases or lets for consideration any living quarters or accommodations in any hotel, apartment hotel, motel, resort motel, apartment, apartment motel, roominghouse, mobile home park, recreational vehicle park or condominium for a term of six months or less. When receipt of consideration is by way of property other than money, the tax shall be levied and imposed on the fair market value of such nonmonetary considerations.
- (b) The tourist development tax shall be in addition to any other tax imposed pursuant to F.S. ch. 212, as amended, and in addition to all other taxes, fees and the considerations for the rental or lease.
- (c) The tourist development tax shall be charged by the person receiving the consideration for the rental or lease, and it shall be collected by such person from the lessee, tenant or customer at the time of payment of the consideration for such rental or lease.
- (d) The person receiving the consideration for such rental or lease shall receive, account for and remit the tax to the state department of revenue at the time and in the manner provided for persons who collect and remit taxes under F.S. § 212.03. The same duties and privileges imposed by F.S. ch. 212 upon dealers in tangible property, respecting the collection and remission of tax, the making of returns, the keeping of books, records and accounts and compliance with the rules of the state department of revenue in the administration of F.S. ch. 212 shall apply to and be binding upon all persons who are subject to the provisions of this section; provided, however, the department of revenue may authorize a quarterly return and payment when the tax remitted by the person receiving the consideration for such rental or lease for the preceding quarter did not exceed \$25.00 for such amount as set by law.
- (e) Collections received by the department of revenue from the tourist development tax, less costs of administration as allowed by law, shall be paid and returned on a monthly basis to the county for use by the county in accordance with the provisions of this section and shall be placed in the tourist development trust fund established by the county.
- (f) The tax revenues received pursuant to this section shall be used to fund the county tourist development plan which is attached to Ord. No. 98-12 as exhibit A and which is adopted and incorporated into this section.
- (g) The establishment of the county tourist development council, hereinafter referred to as "council," by resolution of the board of county commissioners, adopted January 20, 1998, is ratified and confirmed. In addition to the powers and duties described in F.S. § 125.0104, and in such resolution, the council shall continuously review all expenditures of revenue raised by the tourist development tax levied in this section and shall receive, at least quarterly, expenditure reports from the board of county commissioners or its designee. The council shall report to the board of county commissioners and to the department of revenue all expenditures of such revenue believed to be unauthorized by the provisions of this section. The board of county commissioners, upon receiving notification of expenditures believed to be unauthorized by the council, shall review the council's findings and take such administrative or judicial action as it sees fit to ensure compliance with this section and the provision of F.S. § 125.0104.
- (h) Notwithstanding anything to the contrary that may be contained in the plan set forth in subsection (f) of this section, revenues received pursuant to this section shall be used by the county only for the purposes authorized by F.S. § 125.0104.
- (i) Additional tax levied.

- (1) The additional one percent tax of each dollar above the two percent tax imposed and levied for the purpose of providing improvements to tourist related infrastructure that meets the provisions as denned in F.S. § 125.0104(5).
 - (2) In accordance with F.S. § 125.0104(3)(d), the revenues raised by the additional tax authorized by the additional percent shall not be used for debt serve on or refinancing of existing facilities as specified in F.S. § 125.0104(5)(a)(l) unless approved by a resolution adopted by an extraordinary majority of the total membership of board of county commissioners.
- (j) Any person who is taxable under this section and who fails or refuses to charge and collect from the person paying any rental or lease the tourist development tax provided for in this section, either by himself or through his agents or employees, shall be, in addition to being personally liable for the payment of the tourist development tax, guilty of a misdemeanor of the second degree, punishable as provided in F.S. § 775.082, F.S. § 775.083 or F.S. § 775.084.
- (k) No person shall advertise or hold out to the public in any manner, directly or indirectly, that he will absorb all or any part of the tourist development tax, or that he will relieve the person paying the rental of the payment of all or any part of the tourist development tax, or that the tourist development tax will not be added to the rental or lease consideration, or when added, that it, or any part thereof, will be refunded or refused, either directly or indirectly, by any method whatsoever. Any person who willfully violates any provision of this section shall be guilty of a misdemeanor of the first degree, punishable as provided in F.S. § 775.082, F.S. § 775.083 or F.S. § 775.084.
- (l) The tourist development tax shall constitute a lien on the property of the lessee, customer or tenant in the same manner as, and shall be collectible as are liens authorized and imposed in F.S. § 713.67, F.S. § 713.68 and F.S. § 713.69.
- (m) Local administration of the tax.
- (1) Notwithstanding any provisions herein to the contrary, the county intends to be exempted for those requirements of 125.0104(3)(g) F.S., that the tax collected be remitted to the Department of Revenue before being returned to the County. The county intends to provide for the collection and administration of the tax on a local level in accordance with F.S. 125.0104(10).
 - (2) Initial collection of the tax shall be made in the same manner as the tax imposed under Part I of Chapter 212.
 - (3) The Taylor County Tax Collector hereby assumes all responsibility for auditing the records and accounts of dealers, and assessing, collecting, and enforcing payments of delinquent taxes, as contemplated by F.S. § 125.0104(10)(c).
 - (4) The county tax collector shall be responsible for the collection and administration of the tax. The person receiving the consideration for any rental or lease pursuant to 125.0104(3)(a), F.S., shall receive, account for, and remit the tax to the tax collector at the time and in the manner provided for persons who collect and remit taxes under F.S. § 212.03. The tax collector shall keep records showing the amount of taxes collected as well as appropriate books and accounts associated therewith. The same duties and privileges imposed by Chapter 212, F.S., upon dealers in tangible property, respecting the collection and remission of tax, the making of returns, the keeping of books, records and accounts, the payment of dealer's credit in compliance with the rules of the tax collector, shall apply to and be binding upon all persons who are subject to the provisions of the ordinance; provided, however, the tax collector may authorize a quarterly return and payment in accordance with Chapter 212, F.S.
 - a. Three percent of the tax collected herein shall be retained by the tax collector for costs of administration. The remainder shall be remitted to the county monthly and shall be placed

in the Taylor County Tourist Development Trust Fund.

- b. Tax revenues may be used only in accordance with the provisions of F.S. § 125.0104.
- c. The tax collector's books and records relating to collecting under this section shall be available for inspection by the county and the clerk to the board of county commissioners at reasonable times.

(Ord. No. 98-12, §§ 1—4, 7—9, 7-31-1998; Ord. No. 2005-11, §§ 1, 2, 10-18-2005; Ord. No. 2006-6, § 1, 5-1-2006; Ord. No. 2006-19, §§ 1, 2, 11-28-2006; Ord. No. 2012-04, § 1, 1-3-2012; Ord. No. 2012-05, § 1, 1-3-2012)

State Law reference— Tourist development tax, F.S. § 125.0104.

Select Year: 2015 Go

The 2015 Florida Statutes

<u>Title XI</u>	<u>Chapter 125</u>	<u>View Entire</u>
COUNTY ORGANIZATION AND INTERGOVERNMENTAL RELATIONS	COUNTY GOVERNMENT	<u>Chapter</u>

125.0104 Tourist development tax; procedure for levying; authorized uses; referendum; enforcement.—

(1) **SHORT TITLE.**—This section shall be known and may be cited as the “Local Option Tourist Development Act.”

(2) **APPLICATION; DEFINITIONS.**—

(a) *Application.*—The provisions contained in chapter 212 apply to the administration of any tax levied pursuant to this section.

(b) *Definitions.*—For purposes of this section:

1. “Promotion” means marketing or advertising designed to increase tourist-related business activities.

2. “Tourist” means a person who participates in trade or recreation activities outside the county of his or her permanent residence or who rents or leases transient accommodations as described in paragraph (3)(a).

3. “Retained spring training franchise” means a spring training franchise that had a location in this state on or before December 31, 1998, and that has continuously remained at that location for at least the 10 years preceding that date.

(3) **TAXABLE PRIVILEGES; EXEMPTIONS; LEVY; RATE.**—

(a)1. It is declared to be the intent of the Legislature that every person who rents, leases, or lets for consideration any living quarters or accommodations in any hotel, apartment hotel, motel, resort motel, apartment, apartment motel, roominghouse, mobile home park, recreational vehicle park, condominium, or timeshare resort for a term of 6 months or less is exercising a privilege which is subject to taxation under this section, unless such person rents, leases, or lets for consideration any living quarters or accommodations which are exempt according to the provisions of chapter 212.

2.a. Tax shall be due on the consideration paid for occupancy in the county pursuant to a regulated short-term product, as defined in s. [721.05](#), or occupancy in the county pursuant to a product that would be deemed a regulated short-term product if the agreement to purchase the short-term right were executed in this state. Such tax shall be collected on the last day of occupancy within the county unless such consideration is applied to the purchase of a timeshare estate. The occupancy of an accommodation of a timeshare resort pursuant to a timeshare plan, a multisite timeshare plan, or an exchange transaction in an exchange program, as defined in s. [721.05](#), by the owner of a timeshare interest or such owner's guest, which guest is not paying monetary consideration to the owner or to a third party for the benefit of the owner, is not a privilege subject to taxation under this section. A membership or transaction fee paid by a timeshare owner that does not provide the timeshare owner with the right to occupy any specific timeshare unit but merely provides the timeshare owner with the opportunity to

exchange a timeshare interest through an exchange program is a service charge and not subject to taxation under this section.

b. Consideration paid for the purchase of a timeshare license in a timeshare plan, as defined in s. 721.05, is rent subject to taxation under this section.

(b) Subject to the provisions of this section, any county in this state may levy and impose a tourist development tax on the exercise within its boundaries of the taxable privilege described in paragraph (a), except that there shall be no additional levy under this section in any cities or towns presently imposing a municipal resort tax as authorized under chapter 67-930, Laws of Florida, and this section shall not in any way affect the powers and existence of any tourist development authority created pursuant to chapter 67-930, Laws of Florida. No county authorized to levy a convention development tax pursuant to s. 212.0305, or to s. 8 of chapter 84-324, Laws of Florida, shall be allowed to levy more than the 2-percent tax authorized by this section. A county may elect to levy and impose the tourist development tax in a subcounty special district of the county. However, if a county so elects to levy and impose the tax on a subcounty special district basis, the district shall embrace all or a significant contiguous portion of the county, and the county shall assist the Department of Revenue in identifying the rental units subject to tax in the district.

(c) The tourist development tax shall be levied, imposed, and set by the governing board of the county at a rate of 1 percent or 2 percent of each dollar and major fraction of each dollar of the total consideration charged for such lease or rental. When receipt of consideration is by way of property other than money, the tax shall be levied and imposed on the fair market value of such nonmonetary consideration.

(d) In addition to any 1-percent or 2-percent tax imposed under paragraph (c), the governing board of the county may levy, impose, and set an additional 1 percent of each dollar above the tax rate set under paragraph (c) by the extraordinary vote of the governing board for the purposes set forth in subsection (5) or by referendum approval by the registered electors within the county or subcounty special district. No county shall levy, impose, and set the tax authorized under this paragraph unless the county has imposed the 1-percent or 2-percent tax authorized under paragraph (c) for a minimum of 3 years prior to the effective date of the levy and imposition of the tax authorized by this paragraph. Revenues raised by the additional tax authorized under this paragraph shall not be used for debt service on or refinancing of existing facilities as specified in subparagraph (5)(a)1. unless approved by a resolution adopted by an extraordinary majority of the total membership of the governing board of the county. If the 1-percent or 2-percent tax authorized in paragraph (c) is levied within a subcounty special taxing district, the additional tax authorized in this paragraph shall only be levied therein. The provisions of paragraphs (4)(a)-(d) shall not apply to the adoption of the additional tax authorized in this paragraph. The effective date of the levy and imposition of the tax authorized under this paragraph shall be the first day of the second month following approval of the ordinance by the governing board or the first day of any subsequent month as may be specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance.

(e) The tourist development tax shall be in addition to any other tax imposed pursuant to chapter 212 and in addition to all other taxes and fees and the consideration for the rental or lease.

(f) The tourist development tax shall be charged by the person receiving the consideration for the lease or rental, and it shall be collected from the lessee, tenant, or customer at the time of payment of the consideration for such lease or rental.

(g) The person receiving the consideration for such rental or lease shall receive, account for, and remit the tax to the Department of Revenue at the time and in the manner provided for persons who

collect and remit taxes under s. 212.03. The same duties and privileges imposed by chapter 212 upon dealers in tangible property, respecting the collection and remission of tax; the making of returns; the keeping of books, records, and accounts; and compliance with the rules of the Department of Revenue in the administration of that chapter shall apply to and be binding upon all persons who are subject to the provisions of this section. However, the Department of Revenue may authorize a quarterly return and payment when the tax remitted by the dealer for the preceding quarter did not exceed \$25.

(h) The Department of Revenue shall keep records showing the amount of taxes collected, which records shall also include records disclosing the amount of taxes collected for and from each county in which the tax authorized by this section is applicable. These records shall be open for inspection during the regular office hours of the Department of Revenue, subject to the provisions of s. 213.053.

(i) Collections received by the Department of Revenue from the tax, less costs of administration of this section, shall be paid and returned monthly to the county which imposed the tax, for use by the county in accordance with the provisions of this section. They shall be placed in the county tourist development trust fund of the respective county, which shall be established by each county as a condition precedent to receipt of such funds.

(j) The Department of Revenue is authorized to employ persons and incur other expenses for which funds are appropriated by the Legislature.

(k) The Department of Revenue shall promulgate such rules and shall prescribe and publish such forms as may be necessary to effectuate the purposes of this section.

(l) In addition to any other tax which is imposed pursuant to this section, a county may impose up to an additional 1-percent tax on the exercise of the privilege described in paragraph (a) by majority vote of the governing board of the county in order to:

1. Pay the debt service on bonds issued to finance the construction, reconstruction, or renovation of a professional sports franchise facility, or the acquisition, construction, reconstruction, or renovation of a retained spring training franchise facility, either publicly owned and operated, or publicly owned and operated by the owner of a professional sports franchise or other lessee with sufficient expertise or financial capability to operate such facility, and to pay the planning and design costs incurred prior to the issuance of such bonds.

2. Pay the debt service on bonds issued to finance the construction, reconstruction, or renovation of a convention center, and to pay the planning and design costs incurred prior to the issuance of such bonds.

3. Pay the operation and maintenance costs of a convention center for a period of up to 10 years. Only counties that have elected to levy the tax for the purposes authorized in subparagraph 2. may use the tax for the purposes enumerated in this subparagraph. Any county that elects to levy the tax for the purposes authorized in subparagraph 2. after July 1, 2000, may use the proceeds of the tax to pay the operation and maintenance costs of a convention center for the life of the bonds.

4. Promote and advertise tourism in the State of Florida and nationally and internationally; however, if tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event shall have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists.

The provision of paragraph (b) which prohibits any county authorized to levy a convention development tax pursuant to s. 212.0305 from levying more than the 2-percent tax authorized by this section, and the provisions of paragraphs (4)(a)-(d), shall not apply to the additional tax authorized in this paragraph. The effective date of the levy and imposition of the tax authorized under this paragraph shall be the first day of the second month following approval of the ordinance by the governing board or the first day of any

subsequent month as may be specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance.

(m)1. In addition to any other tax which is imposed pursuant to this section, a high tourism impact county may impose an additional 1-percent tax on the exercise of the privilege described in paragraph (a) by extraordinary vote of the governing board of the county. The tax revenues received pursuant to this paragraph shall be used for one or more of the authorized uses pursuant to subsection (5).

2. A county is considered to be a high tourism impact county after the Department of Revenue has certified to such county that the sales subject to the tax levied pursuant to this section exceeded \$600 million during the previous calendar year, or were at least 18 percent of the county's total taxable sales under chapter 212 where the sales subject to the tax levied pursuant to this section were a minimum of \$200 million, except that no county authorized to levy a convention development tax pursuant to s. 212.0305 shall be considered a high tourism impact county. Once a county qualifies as a high tourism impact county, it shall retain this designation for the period the tax is levied pursuant to this paragraph.

3. The provisions of paragraphs (4)(a)-(d) shall not apply to the adoption of the additional tax authorized in this paragraph. The effective date of the levy and imposition of the tax authorized under this paragraph shall be the first day of the second month following approval of the ordinance by the governing board or the first day of any subsequent month as may be specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance.

(n) In addition to any other tax that is imposed under this section, a county that has imposed the tax under paragraph (l) may impose an additional tax that is no greater than 1 percent on the exercise of the privilege described in paragraph (a) by a majority plus one vote of the membership of the board of county commissioners in order to:

1. Pay the debt service on bonds issued to finance:

a. The construction, reconstruction, or renovation of a facility either publicly owned and operated, or publicly owned and operated by the owner of a professional sports franchise or other lessee with sufficient expertise or financial capability to operate such facility, and to pay the planning and design costs incurred prior to the issuance of such bonds for a new professional sports franchise as defined in s. 288.1162.

b. The acquisition, construction, reconstruction, or renovation of a facility either publicly owned and operated, or publicly owned and operated by the owner of a professional sports franchise or other lessee with sufficient expertise or financial capability to operate such facility, and to pay the planning and design costs incurred prior to the issuance of such bonds for a retained spring training franchise.

2. Promote and advertise tourism in the State of Florida and nationally and internationally; however, if tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event shall have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists.

A county that imposes the tax authorized in this paragraph may not expend any ad valorem tax revenues for the acquisition, construction, reconstruction, or renovation of a facility for which tax revenues are used pursuant to subparagraph 1. The provision of paragraph (b) which prohibits any county authorized to levy a convention development tax pursuant to s. 212.0305 from levying more than the 2-percent tax authorized by this section shall not apply to the additional tax authorized by this paragraph in counties which levy convention development taxes pursuant to s. 212.0305(4)(a). Subsection (4) does not apply to the adoption of the additional tax authorized in this paragraph. The effective date of the levy and

imposition of the tax authorized under this paragraph is the first day of the second month following approval of the ordinance by the board of county commissioners or the first day of any subsequent month specified in the ordinance. A certified copy of such ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of the ordinance.

(4) ORDINANCE LEVY TAX; PROCEDURE.—

(a) The tourist development tax shall be levied and imposed pursuant to an ordinance containing the county tourist development plan prescribed under paragraph (c), enacted by the governing board of the county. The ordinance levying and imposing the tourist development tax shall not be effective unless the electors of the county or the electors in the subcounty special district in which the tax is to be levied approve the ordinance authorizing the levy and imposition of the tax, in accordance with subsection (6). The effective date of the levy and imposition of the tax shall be the first day of the second month following approval of the ordinance by referendum, as prescribed in subsection (6), or the first day of any subsequent month as may be specified in the ordinance. A certified copy of the ordinance shall be furnished by the county to the Department of Revenue within 10 days after approval of such ordinance. The governing authority of any county levying such tax shall notify the department, within 10 days after approval of the ordinance by referendum, of the time period during which the tax will be levied.

(b) At least 60 days prior to the enactment of the ordinance levying the tax, the governing board of the county shall adopt a resolution establishing and appointing the members of the county tourist development council, as prescribed in paragraph (e), and indicating the intention of the county to consider the enactment of an ordinance levying and imposing the tourist development tax.

(c) Prior to enactment of the ordinance levying and imposing the tax, the county tourist development council shall prepare and submit to the governing board of the county for its approval a plan for tourist development. The plan shall set forth the anticipated net tourist development tax revenue to be derived by the county for the 24 months following the levy of the tax; the tax district in which the tourist development tax is proposed; and a list, in the order of priority, of the proposed uses of the tax revenue by specific project or special use as the same are authorized under subsection (5). The plan shall include the approximate cost or expense allocation for each specific project or special use.

(d) The governing board of the county shall adopt the county plan for tourist development as part of the ordinance levying the tax. After enactment of the ordinance levying and imposing the tax, the plan of tourist development may not be substantially amended except by ordinance enacted by an affirmative vote of a majority plus one additional member of the governing board.

(e) The governing board of each county which levies and imposes a tourist development tax under this section shall appoint an advisory council to be known as the “(name of county) Tourist Development Council.” The council shall be established by ordinance and composed of nine members who shall be appointed by the governing board. The chair of the governing board of the county or any other member of the governing board as designated by the chair shall serve on the council. Two members of the council shall be elected municipal officials, at least one of whom shall be from the most populous municipality in the county or subcounty special taxing district in which the tax is levied. Six members of the council shall be persons who are involved in the tourist industry and who have demonstrated an interest in tourist development, of which members, not less than three nor more than four shall be owners or operators of motels, hotels, recreational vehicle parks, or other tourist accommodations in the county and subject to the tax. All members of the council shall be electors of the county. The governing board of the county shall have the option of designating the chair of the council or allowing the council to elect a chair. The chair shall be appointed or elected annually and may be reelected or reappointed. The members of the council shall serve for staggered terms of 4 years. The terms of office of the original members shall be

prescribed in the resolution required under paragraph (b). The council shall meet at least once each quarter and, from time to time, shall make recommendations to the county governing board for the effective operation of the special projects or for uses of the tourist development tax revenue and perform such other duties as may be prescribed by county ordinance or resolution. The council shall continuously review expenditures of revenues from the tourist development trust fund and shall receive, at least quarterly, expenditure reports from the county governing board or its designee. Expenditures which the council believes to be unauthorized shall be reported to the county governing board and the Department of Revenue. The governing board and the department shall review the findings of the council and take appropriate administrative or judicial action to ensure compliance with this section. The changes in the composition of the membership of the tourist development council mandated by chapter 86-4, Laws of Florida, and this act shall not cause the interruption of the current term of any person who is a member of a council on October 1, 1996.

(5) AUTHORIZED USES OF REVENUE.—

(a) All tax revenues received pursuant to this section by a county imposing the tourist development tax shall be used by that county for the following purposes only:

1. To acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate, or promote one or more:

a. Publicly owned and operated convention centers, sports stadiums, sports arenas, coliseums, or auditoriums within the boundaries of the county or subcounty special taxing district in which the tax is levied; or

b. Aquariums or museums that are publicly owned and operated or owned and operated by not-for-profit organizations and open to the public, within the boundaries of the county or subcounty special taxing district in which the tax is levied;

2. To promote zoological parks that are publicly owned and operated or owned and operated by not-for-profit organizations and open to the public;

3. To promote and advertise tourism in this state and nationally and internationally; however, if tax revenues are expended for an activity, service, venue, or event, the activity, service, venue, or event must have as one of its main purposes the attraction of tourists as evidenced by the promotion of the activity, service, venue, or event to tourists;

4. To fund convention bureaus, tourist bureaus, tourist information centers, and news bureaus as county agencies or by contract with the chambers of commerce or similar associations in the county, which may include any indirect administrative costs for services performed by the county on behalf of the promotion agency; or

5. To finance beach park facilities or beach improvement, maintenance, renourishment, restoration, and erosion control, including shoreline protection, enhancement, cleanup, or restoration of inland lakes and rivers to which there is public access as those uses relate to the physical preservation of the beach, shoreline, or inland lake or river. However, any funds identified by a county as the local matching source for beach renourishment, restoration, or erosion control projects included in the long-range budget plan of the state's Beach Management Plan, pursuant to s. 161.091, or funds contractually obligated by a county in the financial plan for a federally authorized shore protection project may not be used or loaned for any other purpose. In counties of fewer than 100,000 population, up to 10 percent of the revenues from the tourist development tax may be used for beach park facilities.

Subparagraphs 1. and 2. may be implemented through service contracts and leases with lessees that have sufficient expertise or financial capability to operate such facilities.

(b) Tax revenues received pursuant to this section by a county of less than 750,000 population imposing a tourist development tax may only be used by that county for the following purposes in addition to those purposes allowed pursuant to paragraph (a): to acquire, construct, extend, enlarge, remodel, repair, improve, maintain, operate, or promote one or more zoological parks, fishing piers or nature centers which are publicly owned and operated or owned and operated by not-for-profit organizations and open to the public. All population figures relating to this subsection shall be based on the most recent population estimates prepared pursuant to the provisions of s. 186.901. These population estimates shall be those in effect on July 1 of each year.

(c) The revenues to be derived from the tourist development tax may be pledged to secure and liquidate revenue bonds issued by the county for the purposes set forth in subparagraphs (a)1., 2., and 5. or for the purpose of refunding bonds previously issued for such purposes, or both; however, no more than 50 percent of the revenues from the tourist development tax may be pledged to secure and liquidate revenue bonds or revenue refunding bonds issued for the purposes set forth in subparagraph (a)5. Such revenue bonds and revenue refunding bonds may be authorized and issued in such principal amounts, with such interest rates and maturity dates, and subject to such other terms, conditions, and covenants as the governing board of the county shall provide. The Legislature intends that this paragraph be full and complete authority for accomplishing such purposes, but such authority is supplemental and additional to, and not in derogation of, any powers now existing or later conferred under law.

(d) Any use of the local option tourist development tax revenues collected pursuant to this section for a purpose not expressly authorized by paragraph (3)(l) or paragraph (3)(n) or paragraph (a), paragraph (b), or paragraph (c) of this subsection is expressly prohibited.

(6) REFERENDUM.—

(a) No ordinance enacted by any county levying the tax authorized by paragraphs (3)(b) and (c) shall take effect until the ordinance levying and imposing the tax has been approved in a referendum election by a majority of the electors voting in such election in the county or by a majority of the electors voting in the subcounty special tax district affected by the tax.

(b) The governing board of the county levying the tax shall arrange to place a question on the ballot at the next regular or special election to be held within the county, substantially as follows:

FOR the Tourist Development Tax

AGAINST the Tourist Development Tax.

(c) If a majority of the electors voting on the question approve the levy, the ordinance shall be deemed to be in effect.

(d) In any case where a referendum levying and imposing the tax has been approved pursuant to this section and 15 percent of the electors in the county or 15 percent of the electors in the subcounty special district in which the tax is levied file a petition with the board of county commissioners for a referendum to repeal the tax, the board of county commissioners shall cause an election to be held for the repeal of the tax which election shall be subject only to the outstanding bonds for which the tax has been pledged. However, the repeal of the tax shall not be effective with respect to any portion of taxes initially levied in November 1989, which has been pledged or is being used to support bonds under paragraph (3)(d) or paragraph (3)(l) until the retirement of those bonds.

(7) AUTOMATIC EXPIRATION ON RETIREMENT OF BONDS.—Notwithstanding any other provision of this section, if the plan for tourist development approved by the governing board of the county, as amended pursuant to paragraph (4)(d), includes the acquisition, construction, extension, enlargement, remodeling, repair, or improvement of a publicly owned and operated convention center, sports stadium, sports arena, coliseum, or auditorium, or museum or aquarium that is publicly owned and operated or owned

and operated by a not-for-profit organization, the county ordinance levying and imposing the tax automatically expires upon the later of:

(a) The retirement of all bonds issued by the county for financing the acquisition, construction, extension, enlargement, remodeling, repair, or improvement of a publicly owned and operated convention center, sports stadium, sports arena, coliseum, or auditorium, or museum or aquarium that is publicly owned and operated or owned and operated by a not-for-profit organization; or

(b) The expiration of any agreement by the county for the operation or maintenance, or both, of a publicly owned and operated convention center, sports stadium, sports arena, coliseum, auditorium, aquarium, or museum. However, this does not preclude that county from amending the ordinance extending the tax to the extent that the board of the county determines to be necessary to provide funds to operate, maintain, repair, or renew and replace a publicly owned and operated convention center, sports stadium, sports arena, coliseum, auditorium, aquarium, or museum or from enacting an ordinance that takes effect without referendum approval, unless the original referendum required ordinance expiration, pursuant to the provisions of this section reimposing a tourist development tax, upon or following the expiration of the previous ordinance.

(8) PROHIBITED ACTS; ENFORCEMENT; PENALTIES.—

(a) Any person who is taxable hereunder who fails or refuses to charge and collect from the person paying any rental or lease the taxes herein provided, either by himself or herself or through agents or employees, is, in addition to being personally liable for the payment of the tax, guilty of a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

(b) No person shall advertise or hold out to the public in any manner, directly or indirectly, that he or she will absorb all or any part of the tax, that he or she will relieve the person paying the rental of the payment of all or any part of the tax, or that the tax will not be added to the rental or lease consideration or, when added, that it or any part thereof will be refunded or refused, either directly or indirectly, by any method whatsoever. Any person who willfully violates any provision of this subsection is guilty of a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083.

(c) The tax authorized to be levied by this section shall constitute a lien on the property of the lessee, customer, or tenant in the same manner as, and shall be collectible as are, liens authorized and imposed in ss. 713.67, 713.68, and 713.69.

(9) COUNTY TOURISM PROMOTION AGENCIES.—In addition to any other powers and duties provided for agencies created for the purpose of tourism promotion by a county levying the tourist development tax, such agencies are authorized and empowered to:

(a) Provide, arrange, and make expenditures for transportation, lodging, meals, and other reasonable and necessary items and services for such persons, as determined by the head of the agency, in connection with the performance of promotional and other duties of the agency. However, entertainment expenses shall be authorized only when meeting with travel writers, tour brokers, or other persons connected with the tourist industry. All travel and entertainment-related expenditures in excess of \$10 made pursuant to this subsection shall be substantiated by paid bills therefor. Complete and detailed justification for all travel and entertainment-related expenditures made pursuant to this subsection shall be shown on the travel expense voucher or attached thereto. Transportation and other incidental expenses, other than those provided in s. 112.061, shall only be authorized for officers and employees of the agency, other authorized persons, travel writers, tour brokers, or other persons connected with the tourist industry when traveling pursuant to paragraph (c). All other transportation and incidental expenses pursuant to this subsection shall be as provided in s. 112.061. Operational or promotional advancements, as defined in s. 288.35(4), obtained pursuant to this subsection, shall not be commingled

with any other funds.

(b) Pay by advancement or reimbursement, or a combination thereof, the costs of per diem and incidental expenses of officers and employees of the agency and other authorized persons, for foreign travel at the current rates as specified in the federal publication "Standardized Regulations (Government Civilians, Foreign Areas)." The provisions of this paragraph shall apply for any officer or employee of the agency traveling in foreign countries for the purposes of promoting tourism and travel to the county, if such travel expenses are approved and certified by the agency head from whose funds the traveler is paid. As used in this paragraph, the term "authorized person" shall have the same meaning as provided in s. 112.061(2)(e). With the exception of provisions concerning rates of payment for per diem, the provisions of s. 112.061 are applicable to the travel described in this paragraph. As used in this paragraph, "foreign travel" means all travel outside the United States. Persons traveling in foreign countries pursuant to this subsection shall not be entitled to reimbursements or advancements pursuant to s. 112.061(6)(a)2.

(c) Pay by advancement or reimbursement, or by a combination thereof, the actual reasonable and necessary costs of travel, meals, lodging, and incidental expenses of officers and employees of the agency and other authorized persons when meeting with travel writers, tour brokers, or other persons connected with the tourist industry, and while attending or traveling in connection with travel or trade shows. With the exception of provisions concerning rates of payment, the provisions of s. 112.061 are applicable to the travel described in this paragraph.

(d) Undertake marketing research and advertising research studies and provide reservations services and convention and meetings booking services consistent with the authorized uses of revenue as set forth in subsection (5).

1. Information given to a county tourism promotion agency which, if released, would reveal the identity of persons or entities who provide data or other information as a response to a sales promotion effort, an advertisement, or a research project or whose names, addresses, meeting or convention plan information or accommodations or other visitation needs become booking or reservation list data, is exempt from s. 119.07(1) and from s. 24(a), Art. I of the State Constitution.

2. The following information, when held by a county tourism promotion agency, is exempt from s. 119.07(1) and from s. 24(a), Art. I of the State Constitution:

- a. A trade secret, as defined in s. 812.081.
- b. Booking business records, as defined in s. 255.047.
- c. Trade secrets and commercial or financial information gathered from a person and privileged or confidential, as defined and interpreted under 5 U.S.C. s. 552(b)(4), or any amendments thereto.

(e) Represent themselves to the public as convention and visitors bureaus, visitors bureaus, tourist development councils, vacation bureaus, or county tourism promotion agencies operating under any other name or names specifically designated by ordinance.

(10) LOCAL ADMINISTRATION OF TAX.—

(a) A county levying a tax under this section or s. 125.0108 may be exempted from the requirements of the respective section that:

- 1. The tax collected be remitted to the Department of Revenue before being returned to the county; and
- 2. The tax be administered according to chapter 212,

if the county adopts an ordinance providing for the local collection and administration of the tax.

(b) The ordinance shall include provision for, but need not be limited to:

1. Initial collection of the tax to be made in the same manner as the tax imposed under chapter 212.
2. Designation of the local official to whom the tax shall be remitted, and that official's powers and duties with respect thereto. Tax revenues may be used only in accordance with the provisions of this section.
3. Requirements respecting the keeping of appropriate books, records, and accounts by those responsible for collecting and administering the tax.
4. Provision for payment of a dealer's credit as required under chapter 212.
5. A portion of the tax collected may be retained by the county for costs of administration, but such portion shall not exceed 3 percent of collections.

(c) A county adopting an ordinance providing for the collection and administration of the tax on a local basis shall also adopt an ordinance electing either to assume all responsibility for auditing the records and accounts of dealers, and assessing, collecting, and enforcing payments of delinquent taxes, or to delegate such authority to the Department of Revenue. If the county elects to assume such responsibility, it shall be bound by all rules promulgated by the Department of Revenue pursuant to paragraph (3)(k), as well as those rules pertaining to the sales and use tax on transient rentals imposed by s. 212.03. The county may use any power granted in this section to the department to determine the amount of tax, penalties, and interest to be paid by each dealer and to enforce payment of such tax, penalties, and interest. The county may use a certified public accountant licensed in this state in the administration of its statutory duties and responsibilities. Such certified public accountants are bound by the same confidentiality requirements and subject to the same penalties as the county under s. 213.053. If the county delegates such authority to the department, the department shall distribute any collections so received, less costs of administration, to the county. The amount deducted for costs of administration by the department shall be used only for those costs which are solely and directly attributable to auditing, assessing, collecting, processing, and enforcing payments of delinquent taxes authorized in this section. If a county elects to delegate such authority to the department, the department shall audit only those businesses in the county that it audits pursuant to chapter 212.

(11) INTEREST PAID ON DISTRIBUTIONS.—

(a) Interest shall be paid on undistributed taxes collected and remitted to the Department of Revenue under this section. Such interest shall be included along with the tax proceeds distributed to the counties and shall be paid from moneys transferred from the General Revenue Fund. The department shall calculate the interest for net tax distributions using the average daily rate that was earned by the State Treasury for the preceding calendar quarter and paid to the General Revenue Fund. This rate shall be certified by the Chief Financial Officer to the department by the 20th day following the close of each quarter.

(b) The interest applicable to taxes collected under this section shall be calculated by multiplying the tax amounts to be distributed times the daily rate times the number of days after the third working day following the date the tax is due and payable pursuant to s. 212.11 until the date the department issues a voucher to request the Chief Financial Officer to issue the payment warrant. The warrant shall be issued within 7 days after the request.

(c) If an overdistribution of taxes is made by the department, interest shall be paid on the overpaid amount beginning on the date the warrant including the overpayment was issued until the third working day following the due date of the payment period from which the overpayment is being deducted. The interest on an overpayment shall be calculated using the average daily rate from the applicable calendar quarter and shall be deducted from moneys distributed to the county under this section.

History.—ss. 1, 2, 3, 4, 5, 6, 7, 8, ch. 77-209; s. 3, ch. 79-359; s. 72, ch. 79-400; s. 4, ch. 80-209; s. 2, ch. 80-222; s. 5, ch.

83-297; s. 1, ch. 83-321; s. 40, ch. 85-55; s. 1, ch. 86-4; s. 76, ch. 86-163; s. 61, ch. 87-6; s. 1, ch. 87-99; s. 35, ch. 87-101; s. 1, ch. 87-175; s. 5, ch. 87-280; s. 4, ch. 88-226; s. 6, ch. 88-243; s. 2, ch. 89-217; ss. 31, 66, ch. 89-356; s. 2, ch. 89-362; s. 1, ch. 90-107; s. 1, ch. 90-349; s. 81, ch. 91-45; s. 230, ch. 91-224; s. 3, ch. 92-175; s. 1, ch. 92-204; s. 32, ch. 92-320; s. 4, ch. 93-233; s. 1, ch. 94-275; s. 3, ch. 94-314; s. 37, ch. 94-338; s. 3, ch. 94-353; s. 1, ch. 95-133; s. 1434, ch. 95-147; s. 3, ch. 95-304; s. 1, ch. 95-360; s. 1, ch. 95-416; ss. 44, 46, ch. 96-397; s. 43, ch. 96-406; s. 15, ch. 97-99; s. 1, ch. 98-106; s. 58, ch. 99-2; s. 1, ch. 99-287; ss. 6, 11, 14, ch. 2000-312; s. 11, ch. 2000-351; s. 14, ch. 2001-252; s. 10, ch. 2002-265; s. 1, ch. 2003-34; s. 1, ch. 2003-37; s. 2, ch. 2003-78; s. 145, ch. 2003-261; s. 1, ch. 2005-96; s. 1, ch. 2009-133; s. 1, ch. 2012-180; s. 1, ch. 2013-168.

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TAYLOR COUNTY BOARD OF COMMISSIONERS

County Commission Agenda Item

SUBJECT/TITLE:



THE BOARD TO RECEIVE AN UPDATE FROM THE COUNTY ATTORNEY AND COUNTY ADMINISTRATOR REGARDING RESEARCH AND ACTIONS TAKEN PURSUANT TO A BOARD TASKING REGARDING ANDREWS LAKE ROAD, AS AGENDAED BY THE COUNTY ADMINISTRATOR

MEETING DATE REQUESTED:

APRIL 4, 2016

Statement of Issue:

A SEGMENT OF ANDREWS LAKE ROAD WAS MOVED PURSUANT TO AN AGREEMENT WITH A RESIDENT OF THE ROAD. THE BOARD HAD TASKED THE COUNTY ATTORNEY AND ADMINISTRATOR TO RESEARCH WHETHER THE PROPOSED RESOLUTION IS IN KEEPING WITH THE BOARD'S INTENT.

Recommended Action:

DISCUSSION/ACTION AS DEEMED NECESSARY

Fiscal Impact:

N/A

Budgeted Expense:

N/A

Submitted By:

DUSTIN HINKEL, COUNTY ADMINISTRATOR

Contact:

838-3500

SUPPLEMENTAL MATERIAL / ISSUE ANALYSIS

History, Facts & Issues: SEE ATTACHMENTS

Options:

REQUIRE A DEED BE SIGNED FOR THE NEW SEGMENT RE-ESTABLISH THE ORIGINAL ROAD

Attachments:

BACKGROUND INFORMATION

Task Details

Only visible to Dustin Hinkel & Margaret Dunn

Dustin H.: Andrews Lake Road Deeds (Start: 7 days ago, Wed Mar 23rd)

Just listened to the audio of the meeting in which the Board approved the moving of the road (10/22/13; 4:45 - 16:45). In it the Board was advised and adamantly insisted that a meets and bounds deed of the moved segment be presented to the Board for acceptance. At no point in the discussion did the preservation of the alleged existing 40 foot ROW come up. Mr. Root's sole criteria in his address to the Board was the preservation of his legal right to access his road in perpetuity, which he acknowledged was accomplished by the requirement for the survey and deed of the new segment of road. Jack informed the Board that the road was a prescriptive easement in his estimation and Mr. Root was adamant at that time that the road was described but did not elaborate as to the width of the ROW.

Thanks!

Dustin Hinkel

County Administrator
Taylor County Board of County Commissioners

Click here to sign up for instant severe weather alerts and updates via email and text message!
<http://www.taylorcountygov.com/notify_form.htm>

201 E Green Street
Perry, FL 32347
850-838-3500 ext 7 Office
850-838-3501 Fax
850-672-0830 Cell

dustin.hinkel@taylorcountygov.com<<mailto:dustin.hinkel@taylorcountygov.com>>

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Please note: Florida has a very broad public records law. Most written communications to or from public officials regarding public business are available to the media and public upon request. Your e-mail communications may be subject to public disclosure.

From: Dustin Hinkel
Sent: Wednesday, March 23, 2016 4:43 PM
To: CONRAD BISHOP (lawbishop@gtcom.net) <lawbishop@gtcom.net>; Cindy Mock <cmock@taylorclerk.com>
Cc: Margaret Dunn <margaret.dunn@taylorcountygov.com>; Admin Issues (52281_50976.tl431463@tasks.teamwork.com) <52281_50976.tl431463@tasks.teamwork.com>
Subject: Andrews Lake Road Deeds

Conrad/Annie Mae,

Attached are the deeds for properties along Andrews Lake Road. In my humble and brief review, I have only seen a description of one 40 foot wide segment of right-of-way associated with Mr. Root's property. I will leave the more in-depth analysis to your capable and experienced hands.

Notes in the minutes are as follows:

9/24/13 Workshop: 1. THE BOARD DISCUSSED JOHNNY DRIGGERS'S REQUEST TO MOVE ANDREWS LAKE ROAD FROM THE MIDDLE OF HIS PROPERTY, AS AGENDAED BY CHAIRMAN FEAGLE.

MR. DRIGGERS REQUESTED MOVING SAID ROAD FROM THE CENTER OF HIS PROPERTY TO THE PROPERTY LINE. THAT THE ROAD IS A PRESCRIPTIVE EASEMENT. THE CLERK ADVISED THAT THE COUNTY WILL NEED TO ABANDON THE ROAD IN ORDER FOR MR. DRIGGERS TO GET A TITLE TO THE ABANDONED SECTION OF THIS ROAD. THE CLERK FURTHER DISCUSSED THE CURRENT POLICY OF A SIXTY (60) FOOT RIGHT-OF-WAY, WITH LIMEROCK PLACED TO FLORIDA DEPARTMENT OF TRANSPORTATION (FDOT) SPECIFICATIONS. AFTER DISCUSSION, AND APPROVAL OF THE PROCEDURES BY THE COUNTY ATTORNEY, IT WAS A CONSENSUS OF THE BOARD TO WAIVE THE CURRENT POLICY AND ALLOW MR. DRIGGERS TO BUILD THE ROAD, AND THE BOARD WILL EXCHANGE THE RIGHT-OF-WAY WITH MR. DRIGGERS. IT WAS A FURTHER CONSENSUS OF THE BOARD TO HOLD A PUBLIC HEARING ON THIS EXCHANGE OF RIGHT-OF-WAY FOR THIS ROAD, TO BE HELD AT THE NEXT REGULAR MEETING OF THE BOARD ON MONDAY, OCTOBER 7, 2013.

10/7/13 Meeting: UPON MOTION OF COMMISSIONER DEVANE, WITH SECOND BY COMMISSIONER PAGE, AND BY UNANIMOUS VOTE, THE BOARD APPROVED CONSENT ITEM NOS. 2-A. THROUGH 2-M., AS FOLLOWS: C. THE APPROVAL TO ADVERTISE FOR PUBLIC HEARING ON TUESDAY, OCTOBER 22, 2013 AT 5:35 P.M., FOR THE PURPOSE OF RECEIVING PUBLIC INPUT ON A REQUEST BY JOHNNY DRIGGERS, TO MOVE ANDREWS LAKE ROAD FROM THE MIDDLE OF HIS PROPERTY.

10/22/13 Meeting: 4. THE BOARD HAVING HERETOFORE ADVERTISED FOR A PUBLIC HEARING, FOR THIS DATE AT 5:35 P.M., OR AS SOON THEREAFTER AS POSSIBLE, FOR THE PURPOSE OF RECEIVING PUBLIC INPUT ON A REQUEST BY JOHNNY DRIGGERS TO MOVE ANDREWS LAKE ROAD FROM THE MIDDLE OF HIS PROPERTY.

ALL PERSONS PRESENT WERE GIVEN AN OPPORTUNITY TO DISCUSS AND ASK QUESTIONS REGARDING THE REQUEST OF MR. DRIGGERS.

PUBLIC COMMENTS:

1. BOB ROOT STATED THAT HE FAVORS MOVING THE ROAD.

THE COUNTY ATTORNEY STATED THAT MR. DRIGGERS SHOULD HAVE THE ROAD SURVEYED AND A LEGAL DESCRIPTION SUBMITTED FOR RECORDING.

NO OTHER PERSONS PRESENT REQUESTED TO SPEAK REGARDING THE POSSIBLE GRANT SUBMISSION, THEREFORE THE CHAIRMAN CLOSED THE PUBLIC HEARING.

UPON MOTION OF COMMISSIONER PAGE, WITH SECOND BY COMMISSIONER DEVANE AND BY UNANIMOUS VOTE, THE BOARD APPROVED RE-LOCATION OF ANDREWS LAKE ROAD FROM THE MIDDLE OF JOHNNY DRIGGERS' PROPERTY, SUBJECT TO A LEGAL DESCRIPTION OF THE NEW (ANDREWS LAKE) ROAD, AND THE OLD PORTION OF THE (ANDREWS LAKE) ROAD TO BE CLOSED AT A

[Collapse description...](#)

Files



20160323_Andrews_Lake_Road_Deeds.pdf

by Dustin Hinkel 7 days ago · 1.83MB

 View

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[Attach more files to this task](#)

Time logs

No time entries have been logged against this task — [Log time on this task](#)

Comments

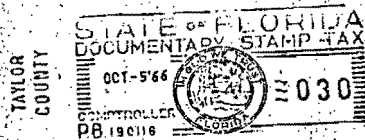
Warranty Deed

STATUTORY

This Indenture, Made this 4th Day of October, A. D. 19 66 Between
JOHN H. ANDREWS and LYDIA H. ANDREWS, his wife
of the county of Taylor, State of Florida, parties of the first part, and
TAYLOR COUNTY, FLORIDA, a political subdivision of the State of Florida
~~parties~~, ~~in the State of~~ part y of the second part,
whose post office address is Post Office Box 620, Perry, Florida

Witnesseth, That the said parties of the first part, for and in consideration of the sum of
TEN----- (\$10.00) ----- Dollars,
and other good and valuable considerations to them in hand paid by said part y of the second part,
the receipt whereof is hereby acknowledged, ha ve granted, bargained and sold to the said party of the
second part, its heirs and assigns forever, the following described land, situate, lying and being in the
County of Taylor in the State of Florida, to-wit:

A strip of land 40 feet wide to be used for highway purposes, the center
line of which being described as Commencing at the Northwest corner
of the E½ of the SE¼ of SW¼ of Section 29, Township 2 South, Range 7 East,
thence running Southerly along the one-half forty line 906 feet to a
point located forty feet North of the Waters Edge of Lake Andrews for
a point of beginning; thence from said beginning point run Easterly
and Southeasterly parallel with the average waters edge of said Lake
400 feet to the end of the proposed Road.



FILED FOR RECORD
CLERK CIRCUIT COURT
TAYLOR COUNTY, FLORIDA
OCT 5 11 25 AM 1966
RECORDED IN OFFICIAL
RECORD 63 PAGE 498
C. RALPH CARLTON, CLERK

and the said parties of the first part do hereby fully warrant the title to said land, and will defend
the same against the lawful claims of all persons whomsoever.

In Witness Whereof, The said parties of the first part ha ve hereunto set their hand and
seal the day and year first above written.
Signed, sealed and delivered in our presence:

Charles Carlton
Sarah E. Thomas

John H. Andrews (Seal)
Lydia H. Andrews (Seal)

_____ (Seal)
_____ (Seal)

STATE OF FLORIDA
COUNTY OF TAYLOR

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements,
personally appeared

JOHN H. ANDREWS and LYDIA H. ANDREWS, his wife

to me known to be the persons described in and who executed the foregoing instrument and they
acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 4th day of
October, A. D. 19 66

Charles Carlton
CHARLES RALPH CARLTON
CLERK OF CIRCUIT COURT
TAYLOR COUNTY, FLORIDA

Notary Public

~~My commission expires:~~

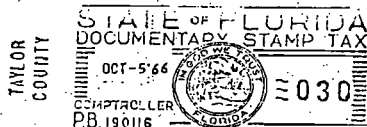
Warranty Deed

STATUTORY

This Indenture, Made this 4th Day of October, A. D. 19 66 Between
MALLOY A. ANDREWS and RUBY ANDREWS, his wife
of the county of Taylor, State of Florida, part ies of the first part, and
TAYLOR COUNTY, FLORIDA, A POLITICAL SUBDIVISION OF THE STATE OF FLORIDA
~~of the county of Taylor, State of Florida~~, part y of the second part,
whose post office address is Post Office Box 620, Perry, Florida

Witnesseth, That the said part ies of the first part, for and in consideration of the sum of
TEN----- (\$10.00) ----- Dollars,
and other good and valuable considerations to them in hand paid by said part y of the second part,
the receipt whereof is hereby acknowledged, have granted, bargained and sold to the said part y of the
second part, its heirs and assigns forever, the following described land, situate, lying and being in the
County of Taylor in the State of Florida, to-wit:

A strip of land 40 feet wide to be used for Highway purposes; the center
line of which being described as Commencing at the Southwest corner of the
E $\frac{1}{2}$ of the NW $\frac{1}{4}$ of the NW $\frac{1}{4}$ of Section 32, Township 2 South, Range 7 East,
thence running East 118 feet, thence North 220 feet for a point of
beginning, thence from said beginning point run North Eighty-One degrees
and forty-five minutes East 120 feet, thence North 33 degrees and forty-
five Minutes East approximately 700 feet, to a point located 40 feet
West of the Waters edge of Lake Andrews, thence Northerly parallel with
Waters Edge to the West boundary line of the W $\frac{1}{2}$ of the SE $\frac{1}{4}$ of the SW $\frac{1}{4}$
of Section 29, Township 2 South, Range 7 East.



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CLERK CIRCUIT COURT
TAYLOR COUNTY, FLORIDA

OCT 5 11 25 AM 1966

RECORDED IN OFFICE
RECORD 63 PAGE 499
C. RALPH CARLTON, CLERK

and the said part ies of the first part do hereby fully warrant the title to said land, and will defend
the same against the lawful claims of all persons whomsoever.

In Witness Whereof, The said part ies of the first part ha ve hereunto set their hand and
seal the day and year first above written.
Signed, sealed and delivered in our presence:

Charles Carlton
Rose E. Thomas

Malloy A. Andrews (Seal)
Ruby Andrews (Seal)
____ (Seal)
____ (Seal)

STATE OF FLORIDA
COUNTY OF TAYLOR

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements,
personally appeared

MALLOY A. ANDREWS and RUBY ANDREWS, his wife

to me known to be the person s described in and who executed the foregoing instrument and they
acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 4th day of
October, A. D. 19 66

Charles Carlton
Notary Public
CHARLES RALPH CARLTON
CLERK OF CIRCUIT COURT
TAYLOR COUNTY, FLORIDA

My commission expires:

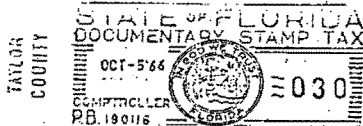
Warranty Deed

STATUTORY

This Indenture, Made this 4th Day of October, A. D. 19 66 Between
MOSE PARKER and MYRTICE PARKER, his wife
of the county of Taylor, State of Florida, part 1es of the first part, and
TAYLOR COUNTY, FLORIDA, a Political Subdivision of the State of Florida
~~XXXXXX~~, ~~XXXXXX~~ State of ~~XXXXXX~~, part y of the second part,
whose post office address is Post Office Box 620, Perry, Florida

Witnesseth, That the said part 1es of the first part, for and in consideration of the sum of
TEN----- (\$10.00) ----- Dollars,
and other good and valuable considerations to them in hand paid by said part y of the second part,
the receipt whereof is hereby acknowledged, ha ve granted, bargained and sold to the said part y of the
second part, its ~~XXXXXX~~ successors, the following described land, situate, lying and being in the
County of Taylor in the State of Florida, to-wit:

A Strip of land 40 feet wide to be used for Highway purposes, the center-
line of which being described as Commencing at the Northwest Corner of the
W $\frac{1}{2}$ of SE $\frac{1}{4}$ of SW $\frac{1}{4}$ of Section 29, Township 2 South, Range 7 East, thence
running South along forty line 977 feet to a point located 40 feet North
of the Waters Edge of Lake Andrews for a point of beginning; thence
from said beginning point run Northeasterly parallel with the average
Waters Edge of said Lake approximately 690 feet to the East boundary
line of the said W $\frac{1}{2}$ of the SE $\frac{1}{4}$ of SW $\frac{1}{4}$ of Section 29, Township 2 South,
Range 7 East.



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CLERK CIRCUIT COURT
TAYLOR COUNTY, FLORIDA
OCT 5 11 25 AM 1966
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C. RALPH CARLTON, CLERK

and the said part 1es of the first part do hereby fully warrant the title to said land, and will defend
the same against the lawful claims of all persons whomsoever.

In Witness Whereof, The said part 1es of the first part ha ve hereunto set their hand and
seal the day and year first above written.

Signed, sealed and delivered in our presence:

Charles E. Thomas
Charles E. Thomas)

_____))
_____))
_____))

Mose Parker (Seal)
Myrtice Parker (Seal)
_____) (Seal)
_____) (Seal)

STATE OF FLORIDA
COUNTY OF TAYLOR

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgements,
personally appeared

MOSE PARKER and MYRTICE PARKER, his wife

to me known to be the person s described in and who executed the foregoing instrument and they
acknowledged before me that, t he y executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 4th day of
October, A. D. 19 66

Charles Ralph Carlton
CHARLES RALPH CARLTON
CLERK OF CIRCUIT COURT
TAYLOR COUNTY, FLORIDA