



**HERNANDO COUNTY
BOARD OF COUNTY COMMISSIONERS**

15470 FLIGHT PATH DR
BROOKSVILLE, FL 34604

PURCHASE ORDER-CHANGE NO. 25000136-2

PAGE NO. 1

V
E
N
D
O
R

Laura.Shimmons@iparametrics.com
104312
IPARAMETRICS LLC
6515 SHILOH RD STE 200
ALPHARETTA GA 30005-8351

PDF

Copy
H
P
T
O

HERNANDO COUNTY EOC
18900 CORTEZ BLVD
BROOKSVILLE FL 34601

ORDER DATE: 10/18/24			BUYER: LBROWN			REQ. NO.: 0		REQ. DATE:	
TERMS: NET 30 DAYS			F.O.B.: DESTINATION			DESC.: EPO FOR RELIEF EFFORTS			
ITEM#	QUANTITY	UOM	DESCRIPTION				UNIT PRICE		EXTENSION
This Emergency Purchase is in accordance with Hernando County Purchasing Policy 060F. The estimated dollar amount reflected is only a County estimate. The Contractor/Vendor shall provide final invoice to the County Project Manager detailing the actual costs involve for final invoicing amount. The Department will process a Change Order to the Purchase Order revising the amount of the emergency for processing and payment by Accounts Payable. Contract Terms and Conditions apply; Hernando County Contract # 25-P0193; Contract expires July 26, 2025. County Contact: Erin Thomas, Phone Number: (352) 587-3030 Contractor Contact: Falon Alo, Phone Number: (732) 996-4818 Email: falon.alo@iparametrics.com 12/5/2024 Change Order No 1 - MP CHANGE ORDER NO. 1 IS TO CORRECT THE NOTES ON THIS EMERGENCY PURCHASE ORDER: REPLACE "HERNANDO COUNTY PURCHASING POLICY 060F" WITH "HIERNANDO COUNTY PROCUREMENT POLICY".									

ITEM#	ACCOUNT	AMOUNT	PROJECT CODE	PAGE TOTAL \$
				TOTAL \$

PDF Copy

Carl Rouse - State

SEE TERMS AND CONDITIONS ON REVERSE SIDE

APPROVED BY:

CHIEF PROCUREMENT OFFICER

HERNANDO COUNTY PURCHASE ORDER TERMS AND CONDITIONS

GENERAL

The condition of this order may not be changed by Vendor/Contractor. If order is not acceptable, return to Hernando County Purchasing and Contracts Department. Failure of a Vendor/Contractor to deliver according to this purchase order awarded to him or to comply with any of the terms and conditions therein may disqualify him from receiving future orders.

QUALITY

All material or services furnished on this order must be as specified and subject to County inspection and approval within a reasonable time after delivery at destination. Variations in materials or services from those specified in this order must not be made without written authority from the Chief Procurement Officer. Materials rejected will be returned at the Vendor/Contractor's risk and expense.

QUANTITY/PRICE

The quantity of materials ordered or the prices specified must not be exceeded without written authority being first obtained from the Chief Procurement Officer.

INDEMNITY AND INSURANCE

The Vendor/Contractor agrees to indemnify and hold harmless Hernando County, including its officers, agents and employees, from all claims, damages, losses and expenses, including reasonable attorneys' fees, and costs brought or incurred on account of injuries or damages sustained by any party due to the operations of the Vendor/Contractor under this contract. The Vendor/Contractor further agrees to provide workers' compensation for all employees, and to maintain such general and auto liability insurance as is deemed necessary by the County for the particular circumstances and operations of the Vendor/Contractor. The Vendor/Contractor further agrees to provide the County with Certificates of Insurance, indicating the amount of coverage in force, upon request.

PACKING

Packages must be plainly marked with shipper's name and purchase order number; charges are not allowed for boxing or crating unless previously agreed upon in writing.

DELIVERY

All materials must be shipped F. O. B. destination. The County will pay no freight or express charges, except by previous agreement. If specific purchase is negotiated on the basis of F.O.B. shipping point, VENDOR/CONTRACTOR ARE TO PREPAY SHIPPING CHARGES AND ADD TO INVOICE. Delivery must actually be affected within the time stated on purchase made between 8:00 AM and 5:00 PM Monday to Friday inclusive unless otherwise stated. In case of default by the Vendor/Contractor, Hernando County may procure the articles or services covered by this order from other sources and hold the Vendor/Contractor responsible for any excess occasioned thereby.

PAYMENT

Partial billing will be accepted only for items received within the specified delivery period. Payments for items delivered after this specified delivery period will be made after the entire order is completed and accepted by Hernando County. Payment shall be made in accordance with Florida Statute 218, Florida Prompt Payment Act. Payment for accepted equipment/supplies/services will be accomplished by submission of an invoice, in duplicate; to the Ship To Address on the front of the purchase order unless otherwise indicated.

MATERIAL SAFETY DATA SHEET

The Vendor/Contractor agrees to furnish Hernando County with a current Material Safety Data Sheet (MSDS) on or before delivery of each and every hazardous chemical or substance purchased which is classified as toxic under Florida Statute 442. Appropriate labels and MSDSs shall be provided for all shipments. Send MSDSs and other pertinent data to: Hernando County Purchasing and Contracts Department, 20 North Main Street, Room 365, Brooksville, FL 34601-2828.

OSHA REQUIREMENT

The Vendor/Contractor or contractor hereby guarantees Hernando County that all materials, supplies and equipment as listed on the purchase order meet the requirements, specifications and standards as provided for under the Federal Occupations Safety and Health Administration Act of 1970, as from time to time amended and in force at the date thereof.

LEGALLY AUTHORIZED WORKFORCE

VENDOR/CONTRACTOR represents and warrants that VENDOR/CONTRACTOR is in compliance with all applicable federal, state and local laws, including, but not limited to, the laws related to the requirement of an employer to verify an employee's eligibility to work in the United States. VENDOR/CONTRACTOR is encouraged (but not required) to incorporate the IMAGE best practices into its business and, when practicable, incorporate verification requirements into its agreements with subcontractors. The IMAGE Best Practices can be found on the COUNTY'S website at www.hernandocounty.us/pur/.

INSURANCE

The Contractor shall maintain in effect at all times during the performance of the services insurance coverage according to the Contract between Contractor and COUNTY. All waiver of subrogation provisions of the Contract apply. In the absence of a current Contract, the Contractor shall, at its sole expense, maintain in effect at all times during the performance of the services insurance coverage with limits not less than those set forth below (unless the County agrees in writing to lower limits) and with insurers and under forms of policies satisfactory to COUNTY; Contractor shall endorse Hernando County as an additional insured on the commercial general liability (additional insured shall read "Hernando County Board of County Commissioners"); Contractor waives subrogation as to the General Liability policy unless a policy condition prohibits pre-loss waiver of subrogation, in which case Contractor shall request of the insurer that the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others unless such policy prohibits such an endorsement or voids coverage should VENDOR/CONTRACTOR enter into such an agreement on a pre-loss basis.

<u>Coverage</u>	<u>Minimum Amounts and Limits</u>
(a) Worker's Compensation Employer's Liability	Statutory requirements at location of work \$ 100,000 each accident \$ 100,000 by employee \$ 500,000 policy limit
(b) Commercial General Liability (Additional Insured & Wavier Of Subrogation)	\$ 2,000,000 General Aggregate \$ 2,000,000 Products-Comp. Ops Agg. \$ 1,000,000 Each Occurrence \$ 5,000 Medical Expense
(c) Automobile Liability Option of Split Limits: (1.) Bodily Injury	\$ 1,000,000 Combined Single Limit (owned, hired and non-owned) \$ 1,000,000 Per Person or \$1,000,000 Per Accident



**HERNANDO COUNTY
BOARD OF COUNTY COMMISSIONERS**
15470 FLIGHT PATH DR
BROOKSVILLE, FL 34604

PURCHASE ORDER-CHANGE NO. 25000136-2

PAGE NO. 2

Laura.Shimmons@iparametrics.com

104312

IPARAMETRICS LLC

6515 SHILOH RD STE 200

ALPHARETTA GA 30005-8351

HERNANDO COUNTY EOC

18900 CORTEZ BLVD

BROOKSVILLE FL 34601

V
E
N
D
O
R

T
O

ORDER DATE: 10/18/24			BUYER: LBROWN			REQ. NO.: 0		REQ. DATE:	
TERMS: NET 30 DAYS			F.O.B.: DESTINATION			DESC.: EPO FOR RELIEF EFFORTS			
ITEM#	QUANTITY	UOM	DESCRIPTION				UNIT PRICE	EXTENSION	
40011-5303401 0 .00									
1/15/2025 - CHANGE ORDER NO. 2 - LB Contract: 25-P0193 Grant GMS#: 571 CO# 2 is for Extending support for Recovery from Hurricanes. BOCC approved on 1/14/2025, Doc ID 15392. Increase Line 1: \$113,197.20; New Line Total \$208,782.60 Old PO Total \$95,585.40; New PO Total \$208,782.60 Dept: 40011 Acct: 5303401 Line #1 \$113,197.20 Project Code: MILTON24									
40011-5303401 1 113197.20 MILTON24									
01	208782.60	JOB	EPO SUPPORT COORDINATION OF ONGOING RESPONSE EFFORTS				1.0000	208,782.60	
ITEM#	ACCOUNT		AMOUNT	PROJECT CODE		PAGE TOTAL \$		208,782.60	
01	40011	5303401	208,782.60	MILTON24		TOTAL \$		208,782.60	

SEE TERMS AND CONDITIONS ON REVERSE SIDE

APPROVED BY:

CHIEF PROCUREMENT OFFICER

HERNANDO COUNTY PURCHASE ORDER TERMS AND CONDITIONS

GENERAL

The condition of this order may not be changed by Vendor/Contractor. If order is not acceptable, return to Hernando County Purchasing and Contracts Department. Failure of a Vendor/Contractor to deliver according to this purchase order awarded to him or to comply with any of the terms and conditions therein may disqualify him from receiving future orders.

QUALITY

All material or services furnished on this order must be as specified and subject to County inspection and approval within a reasonable time after delivery at destination. Variations in materials or services from those specified in this order must not be made without written authority from the Chief Procurement Officer. Materials rejected will be returned at the Vendor/Contractor's risk and expense.

QUANTITY/PRICE

The quantity of materials ordered or the prices specified must not be exceeded without written authority being first obtained from the Chief Procurement Officer.

INDEMNITY AND INSURANCE

The Vendor/Contractor agrees to indemnify and hold harmless Hernando County, including its officers, agents and employees, from all claims, damages, losses and expenses, including reasonable attorneys' fees, and costs brought or incurred on account of injuries or damages sustained by any party due to the operations of the Vendor/Contractor under this contract. The Vendor/Contractor further agrees to provide workers' compensation for all employees, and to maintain such general and auto liability insurance as is deemed necessary by the County for the particular circumstances and operations of the Vendor/Contractor. The Vendor/Contractor further agrees to provide the County with Certificates of Insurance, indicating the amount of coverage in force, upon request.

PACKING

Packages must be plainly marked with shipper's name and purchase order number; charges are not allowed for boxing or crating unless previously agreed upon in writing.

DELIVERY

All materials must be shipped F. O. B. destination. The County will pay no freight or express charges, except by previous agreement. If specific purchase is negotiated on the basis of F.O.B. shipping point, VENDOR/CONTRACTOR ARE TO PREPAY SHIPPING CHARGES AND ADD TO INVOICE. Delivery must actually be affected within the time stated on purchase made between 8:00 AM and 5:00 PM Monday to Friday inclusive unless otherwise stated. In case of default by the Vendor/Contractor, Hernando County may procure the articles or services covered by this order from other sources and hold the Vendor/Contractor responsible for any excess occasioned thereby.

PAYMENT

Partial billing will be accepted only for items received within the specified delivery period. Payments for items delivered after this specified delivery period will be made after the entire order is completed and accepted by Hernando County. Payment shall be made in accordance with Florida Statute 218, Florida Prompt Payment Act. Payment for accepted equipment/supplies/services will be accomplished by submission of an invoice, in duplicate; to the Ship To Address on the front of the purchase order unless otherwise indicated.

MATERIAL SAFETY DATA SHEET

The Vendor/Contractor agrees to furnish Hernando County with a current Material Safety Data Sheet (MSDS) on or before delivery of each and every hazardous chemical or substance purchased which is classified as toxic under Florida Statute 442. Appropriate labels and MSDSs shall be provided for all shipments. Send MSDSs and other pertinent data to: Hernando County Purchasing and Contracts Department, 20 North Main Street, Room 365, Brooksville, FL 34601-2828.

OSHA REQUIREMENT

The Vendor/Contractor or contractor hereby guarantees Hernando County that all materials, supplies and equipment as listed on the purchase order meet the requirements, specifications and standards as provided for under the Federal Occupations Safety and Health Administration Act of 1970, as from time to time amended and in force at the date thereof.

LEGALLY AUTHORIZED WORKFORCE

VENDOR/CONTRACTOR represents and warrants that VENDOR/CONTRACTOR is in compliance with all applicable federal, state and local laws, including, but not limited to, the laws related to the requirement of an employer to verify an employee's eligibility to work in the United States. VENDOR/CONTRACTOR is encouraged (but not required) to incorporate the IMAGE best practices into its business and, when practicable, incorporate verification requirements into its agreements with subcontractors. The IMAGE Best Practices can be found on the COUNTY'S website at www.hernandocounty.us/pur/.

INSURANCE

The Contractor shall maintain in effect at all times during the performance of the services insurance coverage according to the Contract between Contractor and COUNTY. All waiver of subrogation provisions of the Contract apply. In the absence of a current Contract, the Contractor shall, at its sole expense, maintain in effect at all times during the performance of the services insurance coverage with limits not less than those set forth below (unless the County agrees in writing to lower limits) and with insurers and under forms of policies satisfactory to COUNTY; Contractor shall endorse Hernando County as an additional insured on the commercial general liability (additional insured shall read "Hernando County Board of County Commissioners"); Contractor waives subrogation as to the General Liability policy unless a policy condition prohibits pre-loss waiver of subrogation, in which case Contractor shall request of the insurer that the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others unless such policy prohibits such an endorsement or voids coverage should VENDOR/CONTRACTOR enter into such an agreement on a pre-loss basis.

<u>Coverage</u>	<u>Minimum Amounts and Limits</u>
(a) Worker's Compensation Employer's Liability	Statutory requirements at location of work \$ 100,000 each accident \$ 100,000 by employee \$ 500,000 policy limit
(b) Commercial General Liability (Additional Insured & Wavier Of Subrogation)	\$ 2,000,000 General Aggregate \$ 2,000,000 Products-Comp. Ops Agg. \$ 1,000,000 Each Occurrence \$ 5,000 Medical Expense
(c) Automobile Liability Option of Split Limits: (1.) Bodily Injury	\$ 1,000,000 Combined Single Limit (owned, hired and non-owned) \$ 1,000,000 Per Person or \$1,000,000 Per Accident



**HERNANDO COUNTY
BOARD OF COUNTY COMMISSIONERS**

15470 FLIGHT PATH DR
BROOKSVILLE, FL 34604

PURCHASE ORDER-CHANGE NO. 25000136-2
CHANGE DATE: 01/15/25

PAGE NO. 1

Laura.Shimmons@iparametrics.com

104312

IPARAMETRICS LLC

6515 SHILOH RD STE 200

ALPHARETTA GA 30005-8351

Copy
HERNANDO COUNTY EOC
18900 CORTEZ BLVD
BROOKSVILLE FL 34601
TO

PDF

V
E
N
D
O
R

ORDER DATE: 10/18/24		BUYER: LBROWN		REQ. NO.: 0		REQ. DATE:	
TERMS: NET 30 DAYS		F.O.B.: DESTINATION		DESC.: CHANGE ORDER - 2			
ITEM#	QUANTITY	UOM	DESCRIPTION		UNIT PRICE	EXTENSION	
1/15/2025 - CHANGE ORDER NO. 2 - LB Contract: 25-P0193 Grant GMS#: 571 CO# 2 is for Extending support for Recovery from Hurricanes. BOCC approved on 1/14/2025, Doc ID 15392. Increase Line 1: \$113,197.20; New Line Total \$208,782.60 Old PO Total \$95,585.40; New PO Total \$208,782.60 Dept: 40011 Acct: 5303401 Line #1 \$113,197.20 Project Code: MILTON24 40011-5303401 1 113197.20 MILTON24							
01	*****	JOB	EPO SUPPORT COORDINATION OF ONGOING RESPONSE EFFORTS			.0000	113,197.20
ITEM#	ACCOUNT		AMOUNT	PROJECT CODE	PAGE TOTAL \$ 113,197.20		
01	40011	5303401	113,197.20	MILTON24	TOTAL \$ 113,197.20		

PDF **Copy**

Carl Rouse - State

SEE TERMS AND CONDITIONS ON REVERSE SIDE

APPROVED BY:

CHIEF PROCUREMENT OFFICER

HERNANDO COUNTY PURCHASE ORDER TERMS AND CONDITIONS

GENERAL

The condition of this order may not be changed by Vendor/Contractor. If order is not acceptable, return to Hernando County Purchasing and Contracts Department. Failure of a Vendor/Contractor to deliver according to this purchase order awarded to him or to comply with any of the terms and conditions therein may disqualify him from receiving future orders.

QUALITY

All material or services furnished on this order must be as specified and subject to County inspection and approval within a reasonable time after delivery at destination. Variations in materials or services from those specified in this order must not be made without written authority from the Chief Procurement Officer. Materials rejected will be returned at the Vendor/Contractor's risk and expense.

QUANTITY/PRICE

The quantity of materials ordered or the prices specified must not be exceeded without written authority being first obtained from the Chief Procurement Officer.

INDEMNITY AND INSURANCE

The Vendor/Contractor agrees to indemnify and hold harmless Hernando County, including its officers, agents and employees, from all claims, damages, losses and expenses, including reasonable attorneys' fees, and costs brought or incurred on account of injuries or damages sustained by any party due to the operations of the Vendor/Contractor under this contract. The Vendor/Contractor further agrees to provide workers' compensation for all employees, and to maintain such general and auto liability insurance as is deemed necessary by the County for the particular circumstances and operations of the Vendor/Contractor. The Vendor/Contractor further agrees to provide the County with Certificates of Insurance, indicating the amount of coverage in force, upon request.

PACKING

Packages must be plainly marked with shipper's name and purchase order number; charges are not allowed for boxing or crating unless previously agreed upon in writing.

DELIVERY

All materials must be shipped F. O. B. destination. The County will pay no freight or express charges, except by previous agreement. If specific purchase is negotiated on the basis of F.O.B. shipping point, VENDOR/CONTRACTOR ARE TO PREPAY SHIPPING CHARGES AND ADD TO INVOICE. Delivery must actually be affected within the time stated on purchase made between 8:00 AM and 5:00 PM Monday to Friday inclusive unless otherwise stated. In case of default by the Vendor/Contractor, Hernando County may procure the articles or services covered by this order from other sources and hold the Vendor/Contractor responsible for any excess occasioned thereby.

PAYMENT

Partial billing will be accepted only for items received within the specified delivery period. Payments for items delivered after this specified delivery period will be made after the entire order is completed and accepted by Hernando County. Payment shall be made in accordance with Florida Statute 218, Florida Prompt Payment Act. Payment for accepted equipment/supplies/services will be accomplished by submission of an invoice, in duplicate; to the Ship To Address on the front of the purchase order unless otherwise indicated.

MATERIAL SAFETY DATA SHEET

The Vendor/Contractor agrees to furnish Hernando County with a current Material Safety Data Sheet (MSDS) on or before delivery of each and every hazardous chemical or substance purchased which is classified as toxic under Florida Statute 442. Appropriate labels and MSDSs shall be provided for all shipments. Send MSDSs and other pertinent data to: Hernando County Purchasing and Contracts Department, 20 North Main Street, Room 365, Brooksville, FL 34601-2828.

OSHA REQUIREMENT

The Vendor/Contractor or contractor hereby guarantees Hernando County that all materials, supplies and equipment as listed on the purchase order meet the requirements, specifications and standards as provided for under the Federal Occupations Safety and Health Administration Act of 1970, as from time to time amended and in force at the date thereof.

LEGALLY AUTHORIZED WORKFORCE

VENDOR/CONTRACTOR represents and warrants that VENDOR/CONTRACTOR is in compliance with all applicable federal, state and local laws, including, but not limited to, the laws related to the requirement of an employer to verify an employee's eligibility to work in the United States. VENDOR/CONTRACTOR is encouraged (but not required) to incorporate the IMAGE best practices into its business and, when practicable, incorporate verification requirements into its agreements with subcontractors. The IMAGE Best Practices can be found on the COUNTY'S website at www.hernandocounty.us/pur/.

INSURANCE

The Contractor shall maintain in effect at all times during the performance of the services insurance coverage according to the Contract between Contractor and COUNTY. All waiver of subrogation provisions of the Contract apply. In the absence of a current Contract, the Contractor shall, at its sole expense, maintain in effect at all times during the performance of the services insurance coverage with limits not less than those set forth below (unless the County agrees in writing to lower limits) and with insurers and under forms of policies satisfactory to COUNTY; Contractor shall endorse Hernando County as an additional insured on the commercial general liability (additional insured shall read "Hernando County Board of County Commissioners"); Contractor waives subrogation as to the General Liability policy unless a policy condition prohibits pre-loss waiver of subrogation, in which case Contractor shall request of the insurer that the policy be endorsed with a Waiver of Transfer of Rights of Recovery Against Others unless such policy prohibits such an endorsement or voids coverage should VENDOR/CONTRACTOR enter into such an agreement on a pre-loss basis.

<u>Coverage</u>	<u>Minimum Amounts and Limits</u>
(a) Worker's Compensation Employer's Liability	Statutory requirements at location of work \$ 100,000 each accident \$ 100,000 by employee \$ 500,000 policy limit
(b) Commercial General Liability (Additional Insured & Wavier Of Subrogation)	\$ 2,000,000 General Aggregate \$ 2,000,000 Products-Comp. Ops Agg. \$ 1,000,000 Each Occurrence \$ 5,000 Medical Expense
(c) Automobile Liability Option of Split Limits: (1.) Bodily Injury	\$ 1,000,000 Combined Single Limit (owned, hired and non-owned) \$ 1,000,000 Per Person or \$1,000,000 Per Accident

Hernando County Board of County Commissioners

Change Order Request

<u> </u> Add Line(s)	<u> </u> Cancel Outstanding Balance <u> X </u>	<u> </u> Increase/Decrease Funds
<u> </u> Delete Line(s)	<u> </u> Change Project Number	<u> </u> Increase/Decrease Blanket
<u> </u> Cancel Purchase Order	<u> </u> Change Account Number	<u> </u> Increase/Decrease Quantity

Today's Date: 01-15-2025

PO/Contract #: 25000136

Change Order Number: 2

Requisition Number: 25000136

Vendor's Name on PO: IPARAMETICS LLC

Department/Employee: ANGEL TURNER

Instructions: In the explanation, details of the request must be provided. All requests must include account number, line item number, project number, new purchase order total. Include details as if entering a new requisition. If change request is due to new agreements, quotes, projects, etc. necessary documents must be attached.

Explanation:

Justification: Contract: 25-P0193 Grant GMS#: 571
 CO# 2 is for Extending support for Recovery from Hurricanes.
 Increase Line 1: \$113,197.20; New Line Total \$208,782.60
 Old PO Total \$95,585.40; New PO Total \$208,782.60
 Dept: 40011 Acct: 5303401 Line #1 \$113,197.20 Project Code: MILTON24

40011-5303401 1 113197.20 MILTON24

Department Approval: KELLY TROUT Date: 01-15-2025Chief Procurement Officer: FRAN HALLET Date: 01-15-2025

BOCC Approval Date: _____

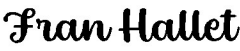
(BOCC Required per Purchasing 080E)

Revised May, 2012

HERNANDO COUNTY

PROCUREMENT REVIEW FORM

Procurement Contact:	Fran Hallet
Contract No. and Project Description (Task Order, Quote, & GSM #)	Contract 25-P0193 Administration Federal Supply Service - EPO
	GMS#571
Vendor Name:	iParametrics, LLC.
Purchase Order No.:	25000136
Change Order No.:	Change Order 2

Procurement Agent Review:	 Signature	1/15/225 Date	Fran Hallet Printed Name
Comments:	Change Order # 2 is requested for Extending support for Recovery from Hurricanes. Original PO: \$95,585.40 Increase Line 1: \$113,197.20 New PO Amount: \$208,782.60 No Issues		

Grant Review:	 Signature	 Date	 Printed Name
Comments:	CO #2 to increase line 1 by \$113,197.20 for a new PO total of \$208,782.60 for expenses related to Hurricane Milton. Within period of performance.		
GMS 571 – MILTON 24	BOCC approved extension on 01.14.25 Legistar Item 15392 No Issues.		

For Chief of Procurement Review:	 Fran Hallet Digitally signed by Fran Hallet Date: 2025.01.15 08:39:23 -05'00'	 Date	 Printed Name
Comments:	 		

Recommendation:	
-----------------	----------



January 8, 2025

Erin Thomas
Hernando County Emergency Management 18900
Cortez Blvd.
Brooksville, FL 34601

Re: Hurricanes Helene and Milton Support

Dear Mrs. Thomas,

Thank you for considering allowing us to continue to support your team through the response efforts following Hurricanes Helene and Milton. iParametrics is humbled to have the opportunity to provide this letter proposal for the continuation of the current engagement to support your team with the coordination of ongoing response and humanitarian efforts.

Our team will:

- Coordinate with State and Federal staff to ensure the efficacy of relief efforts
- Coordinate Mass Care and Non-Congregate Sheltering to meet the ongoing mass care needs

The work performed under this contract would be done under GSA's Disaster Purchasing Program through iParametrics contract #GS-10F-112CA. The chart below details the estimated hours and rates to perform this work. Hernando County will only be billed for the hours worked during this engagement, which shall not exceed 60 days:

Name	Position	Rate	Hours	Total
Falon Alo – Mass Care	Emergency Manager III	\$182.34	320	\$58,348.80
Alexis Balde – Mass Care	Project Manager II	\$145.87	120	\$17,504.40
Case Work Specialist	Project Manager I	\$116.70	320	\$37,344.00
Total				\$ 113,197.20

Any expenses shall be billed at GSA rates and at a reasonable cost per any additional GSA Waivers. If you have any questions or concerns, please do not hesitate to contact Falon Alo at 732-996-4818.

Sincerely,

Authorized by:

Date:

Jeff Stevens, CEM, MEP
Executive Vice President

Name



Board of County Commissioners

Meeting: 01/14/2025
Department: Procurement Department
Prepared By: Fran Hallet
Initiator: Carla Rossiter-Smith
DOC ID: 15392
Legal Request Number:
Bid/Contract Number: 25-P0193

AGENDA ITEM

TITLE

Change Order No. 2 to Purchase Order With iParametrics, LLC, for Support Coordination of Ongoing Response Efforts Resulting From Hurricane Helene and Hurricane Milton (Contract No. 25-P0193; Amount: \$113,197.20)

BRIEF OVERVIEW

On October 10, 2024, the Chief Procurement Officer (CPO) approved Emergency Purchase Order to be issued for Hernando County File No. 25-P0193 to iParametrics, LLC.

The purchase order was originally issued for \$95,585.40. Change order No. 2 in the amount of \$113,197.20 would increase the purchase order to \$208,782.60.

Change Order No. 1 was a no-cost administrative change and was CPO approved on December 5, 2024, to correct the verbiage on the PO.

Hernando County Emergency Management Department has requested an increase for Purchase Order No. 25000136 for continuing services on quote.

FINANCIAL IMPACT

Funding will be from reserves due to Hurricane Milton.

Fund: 0011 - General Fund, **Department: 40011** - Gen Fund Disaster, **Account: 5303401** - Contracted Services, Project: Milton24

LEGAL NOTE

The Board has the authority to act on this item pursuant to Part II, Chapter 2, Article V of the Hernando County Code of Ordinances.

RECOMMENDATION

It is recommended the Board approve Change Order No. 2 in the amount of \$113,197.20 to iParametrics, LLC for Purchase Order No. 25000136 bringing the total purchase order amount to \$208,782.60.

REVIEW PROCESS

Paul Hasenmeier	Approved	01/08/2025 8:29 AM
Mindy Rivera	Approved	01/08/2025 8:36 AM
Carla Rossiter-Smith	Approved	01/08/2025 11:35 AM
Albert Bertram	Approved	01/08/2025 11:45 AM
Pamela Hare	Approved	01/08/2025 12:04 PM
Melissa Tartaglia	Approved	01/08/2025 2:11 PM
Heidi Prouse	Approved	01/08/2025 2:18 PM

Toni Brady	Approved	01/08/2025 2:48 PM
Colleen Conko	Approved	01/08/2025 2:53 PM

RESULT:	ADOPTED
MOVER:	Steve Champion
SECONDER:	Ryan Amsler
AYES:	Hawkins, Campbell, Allocco, Amsler and Champion