



**HERNANDO COUNTY
BOARD OF COUNTY COMMISSIONERS**

15470 FLIGHT PATH DR
BROOKSVILLE, FL 34604

PURCHASE ORDER-CHANGE NO. 24001002-1

PAGE NO. 1

mohsen@mdginc.us

95795

MOHSEN DESIGN GROUP INC

2202 N WESTSHORE BLVD STE 200

TAMPA FL 33607

PDF

Copy

AIRPORT OPERATIONS

15800 FLIGHT PATH DRIVE

BROOKSVILLE FL 34604

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| ORDER DATE: 08/30/24 | | BUYER: GGRIMMER | | REQ. NO.: RQ241071 | | REQ. DATE: 09/30/24 | |
|--|----------|-----------------|-------------------------|--------------------|---------------------------------|---------------------|--|
| TERMS: NET 30 DAYS | | | F.O.B.: FOB DESTINATION | | DESC.: RUNWAY 321 REHAB & SHIFT | | |
| ITEM# | QUANTITY | UOM | DESCRIPTION | | UNIT PRICE | EXTENSION | |
| <p>This Purchase is in accordance with Hernando County Profession Service Agreement (PSA) with Contractor Named Mohsen Design Group Inc., Hernando County File No. 24-RFQG00712/EK, BOCC Approved on: July 9, 2024, Doc ID No. 14145. The PSA Terms and Conditions apply, and the Purchase Order Terms and Conditions do not apply to this purchase. The assignment of this Purchase Order represents the County's Notice to Proceed to the Contractor to begin service contemplated. The period of performance is 315 days from date of issuance of this PO.</p> <p>The County Contact Person is: Steve Miller, Phone Number: 352-754-4061 The Contractor Contact is: Timeka Carter, Phone Number: 813-244-6609 Email: mohsen@mdginc.us</p> <p>11/21/2025 Change Order No 1 - MP Contract #" 24-RFQG00712/EK Contract Name: Professional Svcs Agreement Grant GMS #'s: 471 & 537 CO # 1 is requested to extend the project 200 days due to an oversight at the department level. We had not realized that the purchase order expired until it was</p> | | | | | | | |

| ITEM# | ACCOUNT | AMOUNT | PROJECT CODE | PAGE TOTAL \$ |
|------------|---------|--------|--------------|------------------------------|
| | | | | TOTAL \$ |
| PDF | | | | Copy |
| | | | | <i>Caleb Rouseff - State</i> |

SEE TERMS AND CONDITIONS ON REVERSE SIDE

APPROVED BY:

CHIEF PROCUREMENT OFFICER

HERNANDO COUNTY PURCHASE ORDER TERMS AND CONDITIONS

GENERAL

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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.

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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.

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OSHA REQUIREMENT

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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
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PURCHASE ORDER-CHANGE NO. 24001002-1

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AIRPORT OPERATIONS
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| ORDER DATE: 08/30/24 | | BUYER: GGRIMMER | | REQ. NO.: RQ241071 | | REQ. DATE: 09/30/24 | |
|---|-----------|-----------------|---|--------------------|---------------------------------|---------------------|--|
| TERMS: NET 30 DAYS | | | F.O.B.: FOB DESTINATION | | DESC.: RUNWAY 321 REHAB & SHIFT | | |
| ITEM# | QUANTITY | UOM | DESCRIPTION | | UNIT PRICE | EXTENSION | |
| brought to our attention. | | | | | | | |
| <p>✓ This PO will remain open through project completion.</p> <p>Current Substantial Completion date: N/A New Substantial Completion date: N/A Current Final Completion date: 1/27/26 New Final Completion date: 1/27/26</p> | | | | | | | |
| 01 | 526646.00 | EA | E1 - RUNWAY 3-21 BASIC SERVICES | | 1.0000 | 526,646.00 | |
| 02 | 86986.00 | EA | E1 - RUNWAY 3-21 SPECIAL SERVICES | | 1.0000 | 86,986.00 | |
| 03 | 136368.00 | EA | E1 - RUNWAY 3-21 SUBCONSULTANTS | | 1.0000 | 136,368.00 | |
| 04 | 4370.00 | EA | E1 - RUNWAY 3-21 SUBCONSULTANTS (CON [®] TD) AND EXPENSES | | 1.0000 | 4,370.00 | |
| 05 | 2900.00 | EA | E1 - EXPENSES & SWFWMD PERMIT FEES | | 1.0000 | 2,900.00 | |
| 06 | 48562.00 | EA | E2 - RUNWAY CONVERSION BASIC SERVICES | | 1.0000 | 48,562.00 | |
| 07 | 24668.00 | EA | E2 - RUNWAY CONVERSION SPECIAL SERVICES | | 1.0000 | 24,668.00 | |
| 08 | 87869.00 | EA | E2 - RUNWAY CONVERSION SUBCONSULTANTS | | 1.0000 | 87,869.00 | |
| 09 | 187500.00 | EA | E2 - RUNWAY CONVERSION SUBCONSULTANTS (CONT [®] D) | | 1.0000 | 187,500.00 | |
| 10 | 1000.00 | EA | E2 - EXPENSES - REPRODUCTION & SWFWMD PERMIT FEES | | 1.0000 | 1,000.00 | |

| ITEM# | ACCOUNT | AMOUNT | PROJECT CODE | PAGE TOTAL \$ | 1,106,869.00 |
|-------|---------------|------------|--------------|-----------------|---------------------|
| 01 | 34301 5626586 | 526,646.00 | 111918 | TOTAL \$ | 1,106,869.00 |
| 02 | 34301 5626586 | 86,986.00 | 111918 | | |
| 03 | 34301 5626586 | 136,368.00 | 111918 | | |
| 04 | 07411 5626586 | 4,370.00 | 111918 | | |
| 05 | 07411 5666537 | 2,900.00 | 111917 | | |
| 06 | 34299 5666537 | 48,562.00 | 111917 | | |
| 07 | 34299 5666537 | 24,668.00 | 111917 | | |
| 08 | 34299 5666537 | 87,869.00 | 111917 | | |
| 09 | 07411 5666537 | 187,500.00 | 111917 | | |
| 10 | 34299 5666537 | 1,000.00 | 111917 | | |

SEE TERMS AND CONDITIONS ON REVERSE SIDE

APPROVED BY:

Carl Rouseff - Jantz

CHIEF PROCUREMENT OFFICER

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BROOKSVILLE, FL 34604

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CHANGE DATE: 11/21/25

PAGE NO. 1

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TAMPA FL 33607

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COPY

AIRPORT OPERATIONS

15800 FLIGHT PATH DRIVE

BROOKSVILLE FL 34604

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|---|----------|-------------------------|---------------------------------------|-------------------------|---------------------|
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| ITEM# | QUANTITY | UOM | DESCRIPTION | UNIT PRICE | EXTENSION |
| <p>11/21/2025 Change Order No 1 - MP Contract # " 24-RFQG00712/EK Contract Name: Professional Svcs Agreement Grant GMS #s: 471 & 537 CO # 1 is requested to extend the project 200 days due to an oversight at the department level. We had not realized that the purchase order expired until it was brought to our attention.</p> <p>This PO will remain open through project completion.</p> <p>Current Substantial Completion date: N/A New Substantial Completion date: N/A Current Final Completion date: 1/27/26 New Final Completion date: 1/27/26</p> | | | | | |
| 06 | .00 | EA | E2 - RUNWAY CONVERSION BASIC SERVICES | .0000 | .00 |

| ITEM# | ACCOUNT | AMOUNT | PROJECT CODE | PAGE TOTAL \$ | .00 |
|-------|------------------------------------|--------|--------------|-----------------|------------|
| 06 | 34299 5666537 | .00 | 111917 | TOTAL \$ | .00 |

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Calc Rouseff-Jane

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Hernando County Board of County Commissioners
15470 Flight Path Dr.
Brooksville, FL 34604

Construction Change Order

Owner: Hernando County Board of County Commissioners

Owner's Representative:

Vendor: MOHSEN DESIGN GROUP INC

Change Order No. 1

Change Order Date: 11-19-2025

Contract No. 24001002

Contract Date:

Project Description:

RUNWAY 321 REHAB & SHIFT

The Project is Changed as Follows

Justification: Contract #" 24-RFQG00712/EK Contract Name: Professional Svcs Agreement

Grant GMS #'s: 471 & 537

CO # 1 is requested to extend the project 200 days due to an oversight at the department level. We had not realized that the purchase order expired until it was brought to our attention.

This PO will remain open through project completion.

Current Substantial Completion date: N/A

New Substantial Completion date: N/A

Current Final Completion date: 7/11/25

New Final Completion date: 1/27/26

Total Addition/Deduction this Change Order: .00

The Original Contract Sum was 1,106,869.00

Net Change by previously authorized Change Orders: .00

The Contract Sum prior to this Change Order was 1,106,869.00

The Net Amount of this Change Order is: .00

The new Contract Sum including this Change Order will be 1,106,869.00

The Contract Time will be changed by this Change Order (Days): 200

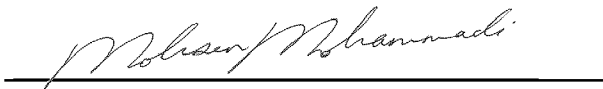
The Date of Substantial Completion as of the date of this Change Order therefore is:

Vendor Name/Address:

MOHSEN DESIGN GROUP INC
2202 N WESTSHORE BLVD STE 200
TAMPA, FL 33607

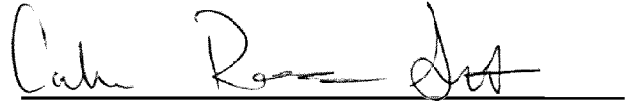
Owner or Owner's Representative:

Hernando County Commission
15470 Flight Path Dr.
Brooksville, FL 34601



Authorized Signature

Date: 11/19/2025



Chief Procurement Office

Date: 11/19/25

Distribution:

- Vendor - Original
- Purchasing & Contracts
- Finance
- Requisitioning
- Contract File



MEMORANDUM

TO: Carla Rossiter-Smith, MSM, PMP, GPC
Chief Procurement Officer

FROM: Steve Miller,
Airport Manager

DATE: November 19, 2025

SUBJECT: PO# 24001002
Runway 321 Rehab & Shift / Abandoned Runway

Due to an oversight at the department level the purchase order expired on July 11, 2025. As soon as it was brought to our attention, we spoke with procurement staff and were directed to enter a change order as soon as possible.

The project will be completed within the extended time granted through this change order. The change order is for a time extension only.

Thank you.

Grant Compliance Review Form

Please confirm the following tasks have been completed. Check "Yes" or "No" for each and add comments as needed.

| | | | | |
|--------------|---------|-----------------------------|------------|----------------|
| PO: 24001002 | CO #: 1 | Vendor: Mohsen Design Group | GMS #: 471 | Award #: G2M86 |
|--------------|---------|-----------------------------|------------|----------------|

Grant Compliance Check

| Task | Yes | No | N/A | Comments |
|--|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------|
| Purchase aligns with the grant's activities and objectives <small>(List equipment or real property)</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This is a Change Order for Time Only. |
| Period of performance | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | POP is from 09/22/23 to 06/30/27 |
| Equipment and Real Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | This CO is for Time only. |
| BCC and/or Legal Approval | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Funding agency approval | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |

Procurement Compliance Check

| Task | Yes | No | N/A | Comments |
|---|--------------------------|--------------------------|-------------------------------------|---------------------------|
| Suspension & Debarment <small>State & Federal Transactions >\$25k</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Purchase was competitively procured <small>(if applicable)</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Procurement type is properly classified <small>(e.g., Micro-purchase <\$10,000.00, Small Purchase \$10,000.01-\$50,000.00, Formal Procurement (Sealed Bids & Proposals) > \$50,000.01)</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Cost & Price Analysis for items over \$250,000.00 (Please Attach Analysis to Form) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |

Budget & Funding Availability Check

| Task | Yes | No | N/A | Comments |
|---|--------------------------|--------------------------|-------------------------------------|---|
| Sufficient budget allocated for this purchase - eFinance | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Dept: Account: Funds Available: This CO is for Time only. |
| The purchase is within the approved budget- agreement | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |

Notes and Reviewer Sign Off

| |
|--|
| Approved <input checked="" type="checkbox"/> Not Approved <input type="checkbox"/> Needs Correction <input type="checkbox"/> Notes: |
| Reviewed By and Date: Erin L Kluis Briggs 11/20/2025 |

Grant Compliance Review Form

Please confirm the following tasks have been completed. Check "Yes" or "No" for each and add comments as needed.

| | | | | |
|--------------|---------|-----------------------------|------------|----------------|
| PO: 24001002 | CO #: 1 | Vendor: Mohsen Design Group | GMS #: 537 | Award #: G2S72 |
|--------------|---------|-----------------------------|------------|----------------|

Grant Compliance Check

| Task | Yes | No | N/A | Comments |
|--|-------------------------------------|-------------------------------------|-------------------------------------|---------------------------------------|
| Purchase aligns with the grant's activities and objectives <small>(List equipment or real property)</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This is a Change Order for Time Only. |
| Period of performance | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | POP is from 01/22/24 to 06/30/27 |
| Equipment and Real Property | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | This CO is for Time only. |
| BCC and/or Legal Approval | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Funding agency approval | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |

Procurement Compliance Check

| Task | Yes | No | N/A | Comments |
|---|--------------------------|--------------------------|-------------------------------------|---------------------------|
| Suspension & Debarment <small>State & Federal Transactions >\$25k</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Purchase was competitively procured <small>(if applicable)</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Procurement type is properly classified <small>(e.g., Micro-purchase <\$10,000.00, Small Purchase \$10,000.01-\$50,000.00, Formal Procurement (Sealed Bids & Proposals) > \$50,000.01)</small> | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |
| Cost & Price Analysis for items over \$250,000.00 (Please Attach Analysis to Form) | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |

Budget & Funding Availability Check

| Task | Yes | No | N/A | Comments |
|---|--------------------------|--------------------------|-------------------------------------|---|
| Sufficient budget allocated for this purchase - eFinance | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | Dept: Account: Funds Available: This CO is for Time only. |
| The purchase is within the approved budget- agreement | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | This CO is for Time only. |

Notes and Reviewer Sign Off

| |
|--|
| Approved <input checked="" type="checkbox"/> Not Approved <input type="checkbox"/> Needs Correction <input type="checkbox"/> |
| Notes: |
| Reviewed By and Date: Erin L Kluis Briggs 11/20/25 |