CONSULTANT APPROVAL FORM

CPO: If Consultant fee is under \$50,000 to CSA: If Construction is under \$7,500,000	& construction is under \$250,000
	e is under \$500,000- (FS 287.055 CCNA)
CPOICSA#: 18-60-03 HOD.	(Assigned by Procurement)
To be completed by the requesting Division	on:
Date: 10/02/2024 Division: Utilities	Q 465
Project Manager's Name: Ryan Bengsch	Phone #: <u>863-298-4193</u>
Project Name: Crooked Lake Park Recei	vership (WWTF Abandonment and Lift Station
Replacements Total Project Budget: \$5.0	MProject # <u>6876001</u>
Estimate of Construction Cost: \$4.64M	Α
Proposed Consultant: Jones Edmunds & A	original:307,444 Assoc. Fee: \$45,116 add'l; \$352,560 total
Master Consultant Agreement #18-060	+threext: 12 months
Attach Scope of Services Proposed by	the Consultant (Exhibit "A")
Approved By: Division Director/Designee	mas Date _ 10 - 30 - 24
Procurement Division	No.
Date Received: 12/30/24	Date Reviewed by Analyst: 10/3/24
Approved by: Procurement Director/Designee)	2
County Attorney's Office (Required for al	I CSA's)
Date Received:	Date Reviewed: 11 5 (2007
Approved by: (County Attorney Office Signature)	_
County Manager's Office (Required if con	sultant fee is greater than \$100,000)
Date Received:	Date Reviewed:
Approved by:(County Manager Office Signature)	

Additional Attachments: number of days to complete project, not to exceed/lump sum amount, justification for consultant selected, fee schedule, and Professional Liability COI (COI applicable to CSA only, description field must be project specific (contract requirement)).