

***BACKUP  
DOCUMENTS***

**POLK COUNTY**

## Project Checklist

- Project Name: Modification No. 1 to Consultant Services Authorization 2024-015-01 for the Holly Hill UFA No. 2 and Oak Hills No. 4 Wellheads
- Project Location: Northeast Regional Utility Service Area
- Source of Funds: Funding is available in 42111.680536150.5666000.6802041 (Oakhills/Providence Well #4 Wellhead Installation CIP Project Budget)
- Project Cost Summary: \$348,094
- Certifications: This request has been reviewed by:



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James Tully, P.E., R.G.  
Utilities CIP Projects Manager



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Charles Richards, CPA  
Customer Service/Finance Manager



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Tamara Richardson, P.E.  
Utilities Division Director

## CONSULTANT APPROVAL FORM

**CPO:** If Consultant fee is under \$50,000 & construction is under \$250,000 (procedure)

**CSA:** If Construction is under \$4,000,000;

OR for study activity if consultant fee is under \$500,000- FS 287.055(CCNA))

**CPO/CSA #:** 2024-015-cl mod. 1 (Assigned by Procurement)

To be completed by the requesting Division:

Date: 06/27/2025 Division: Utilities

Project Manager's Name: James Tully Phone #: 863-344-1848

Project Name: Holly Hill UFA #2 and Oak Hills #4 Wellheads

Total Project Budget: \$6.3M Project # 6812017, 6802041

Estimate of Construction Cost: \$3.4M

Proposed Consultant: Kennedy / Jenks Consultants, Inc.

Fee: \$485,710.00 (Orig) + 348,094 (Mod 1)

Master Consultant Agreement # 2024-015

**Attach Scope of Services Proposed by the Consultant (Exhibit "A")**

Approved By: Tamara Richards Date: 7-14-25  
Division Director/Designee

### Procurement Division

Date Received: 7/15/25 Date Reviewed by Analyst: 7/15/25

Approved by: \_\_\_\_\_  
(Procurement Director/Designee)

### County Attorney's Office (Required for all CSA's)

Date Received: \_\_\_\_\_ Date Reviewed: 7/21/25

Approved by: Ben Nutter  
(County Attorney Office Signature)

### County Manager's Office (Required if consultant fee is greater than \$100,000)

Date Received: \_\_\_\_\_ Date Reviewed: 7/22/25

Approved by: [Signature]  
(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)).