

**LOCAL AGENCY PROGRAM
SUPPLEMENTAL AGREEMENT**

SUPPLEMENTAL NO.

1

FEDERAL ID NO. (FAIN)

D425-033-B

CONTRACT NO.

G3B90

FEDERAL AWARD DATE

05/09/2025

FPN

449006-1-58-01

RECIPIENT UNIQUE ENTITY ID SAM NO.

DRM4UBDJ7149

Recipient, Village of Wellington, desires to supplement the original Agreement entered into and executed on 06/03/2025 as identified above. All provisions in the original Agreement and supplements, if any, remain in effect except as expressly modified by this supplement.

The changes to the Agreement and supplements, if any, are described as follows:

PROJECT DESCRIPTION

Name C-8 Canal from C.R.-892/Forest Hill Boulevard to Stribling Way Length .98 miles

Termini C-8 Canal from C.R.-892/Forest Hill Boulevard to Stribling Way

Description of Work:

Construction of a 10-foot-wide multi-use pathway along the east side of the C-8 canal.

Reason for Supplement and supporting engineering and/or cost analysis:

The purpose of this Supplemental Agreement is to reconcile the LAP agreement total project cost with the Department's bid concurrence and Local Agency construction bid award. The LAP agreement total project cost is revised to \$451,250.00 (Four-hundred fifty-one thousand two hundred fifty dollars and zero cents), which is a decrease of \$171,053.00 (One hundred seventy-one thousand fifty-three dollars and zero cents) Federal Funds and \$88,451.00 (Eighty-eight thousand four-hundred fifty-one dollars and zero cents) local funds. Refer to Exhibit "B" attached hereto and made apart hereof which replaces Exhibit "B" that is to the Original Agreement

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ADJUSTED EXHIBIT "B" SCHEDULE OF FINANCIAL ASSISTANCE

RECIPIENT NAME & BILLING ADDRESS: Village of Wellington
12300 Forest Hill Blvd.
Wellington, FL 33414

FINANCIAL PROJECT NUMBER: 449006-1-58-01

PHASE OF WORK By Fiscal Year	FUNDING					
	(1) PREVIOUS TOTAL PROJECT FUNDS	(2) ADDITIONAL PROJECT FUNDS	(3) CURRENT TOTAL PROJECT FUNDS	(4) TOTAL LOCAL FUNDS	(5) TOTAL STATE FUNDS	(6) TOTAL FEDERAL FUNDS
Design FY: (Insert Program Name) FY: (Insert Program Name) FY: (Insert Program Name) Total Design Cost	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00
Right-of-Way FY: (Insert Program Name) FY: (Insert Program Name) FY: (Insert Program Name) Total Right-of-Way Cost	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00
Construction FY: 2025 (Transportation Alternative Program) FY: 2025 (Local Funds) FY: (Insert Program Name) Total Construction Cost	\$526,660.00 \$184,094.00 \$710,754.00	(\$171,053.00) (\$88,451.00) (\$259,504.00)	\$355,607.00 \$95,643.00 \$451,250.00	\$95,643.00 \$95,643.00	 \$ 0.00	\$355,607.00 \$355,607.00
Construction Engineering and Inspection (CEI) FY: (Insert Program Name) FY: (Insert Program Name) FY: (Insert Program Name) Total CEI Cost	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00
(Insert Phase) FY: (Insert Program Name) FY: (Insert Program Name) FY: (Insert Program Name) Total Phase Costs	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00	 \$ 0.00
TOTAL COST OF THE PROJECT	\$710,754.00	(\$259,504.00)	\$451,250.00	\$95,643.00	\$ 0.00	\$355,607.00

COST ANALYSIS CERTIFICATION AS REQUIRED BY SECTION 216.3475, FLORIDA STATUTES:

I certify that the cost for each line item budget category has been evaluated and determined to be allowable, reasonable, and necessary as required by Section 216.3475, F.S. Documentation is on file evidencing the methodology used and the conclusions reached.

Landy Ductan
District Grant Manager Name

Signature Date

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
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IN WITNESS WHEREOF, the parties have executed this Agreement on the date last ascribed herein.

RECIPIENT Village of Wellington

STATE OF FLORIDA
DEPARTMENT OF TRANSPORTATION

By: _____

Name: Michael J. Napoleone

Title: Mayor

By: _____

Name: John P. Krane, P.E.

Title: Director of Transportation Development

Date: _____

Legal Review:
