

**FIRST AMENDMENT TO SEPTEMBER 24, 2002 INTERLOCAL AGREEMENT
CONCERNING THE PURCHASE AND OPERATION OF THE
MOBILE COMMAND UNIT**

THIS FIRST AMENDMENT is made this _____ day of _____, 2018, by and between **ST. LUCIE COUNTY**, a political subdivision of the State of Florida ("County"), the **ST. LUCIE COUNTY SHERIFF**, a Florida Constitutional Officer ("Sheriff"), the **ST. LUCIE COUNTY FIRE DISTRICT** ("Fire District"), the **CITY OF FORT PIERCE** ("City"), and the **CITY OF PORT SAINT LUCIE** ("PSL") for the Mobile Command Unit ("Unit").

WHEREAS, on September 24, 2002, the County entered into an Interlocal Agreement with the Sheriff, the Fire District, and the City, referred to as the "Agreement", which was recorded in Official Records Book 1632 at page 2105, of the public records of St. Lucie County, Florida, wherein the parties agreed to provide funding for the purchase and operation of the mobile command unit.

WHEREAS, the City of Port Saint Lucie desires to participate in the maintenance and operation of the Mobile Command Unit.

NOW, THEREFORE, in consideration of their mutual promises contained here, the parties agree to amend the Agreement as follows:

1. The City of Port St. Lucie will enter into this First Amended Interlocal Agreement for the maintenance and operation of the unit.
2. **Paragraph 4: (MAINTENANCE; STORAGE; PARTS; INSURANCE:)** is hereby amended to read as follows:

The parties agree that the Unit shall be stored inside a garage located at the Emergency Operations Center, 15305 W. Midway Road, Fort Pierce, (St. Lucie County), Florida. The Fire District agrees to provide routine maintenance (labor only) on the Unit at no cost. The cost of any replacement parts shall be shared equally by the parties. In the event that the Unit requires outside repair the cost will be shared equally by all of the parties. The Sheriff agrees to purchase property damage insurance covering the Unit.

3. **Paragraph 5: (OPERATIONS)** is hereby amended to read as follows:

The Sheriff will provide staff who are properly trained in the operation of all components of the Unit and who are available upon callout to the Emergency Operations Center to have the Unit respond to any scene as needed.

4. **Paragraph 9: (NOTICE)** is hereby amended to read as follows:

All notices or other communications hereunder shall be in writing and shall be deemed duly given if delivered in person or sent by certified mail, return receipt requested, and addressed as follows:

If to County:

St. Lucie County Administrator
2300 Virginia Avenue
Administration Annex
Fort Pierce, Florida 34982

With copy to:

St. Lucie County Attorney
2300 Virginia Avenue
Administration Annex
Fort Pierce, Florida 34982

If to Sheriff:

St. Lucie County Sheriff
4700 West Midway Road
Fort Pierce, Florida 34950

With copy to:

Office of the General Counsel
4700 W. Midway Road
Fort Pierce, FL 34981

If to the City:

Fort Pierce City Manager
Post Office Box 1480
Fort Pierce, Florida 34954

With a copy to:

Fort Pierce City Attorney
Post Office Box 1480
Fort Pierce, Florida 34954

If to the Fire District:

St. Lucie County Fire District Chief
2400 Rhode Island Avenue
Fort Pierce, Florida 34950

If to PSL:

Port St. Lucie City Manager
121 SW Port St. Lucie Blvd.
Port St. Lucie, Florida 34984

With a copy to:

Port St. Lucie City Attorney
121 SW Port St. Lucie Blvd.
Port St. Lucie, Florida 34984

5. Except as amended herein, the remaining terms and conditions of the Agreement shall remain in full force and effect.

IN WITNESS WHEREOF, the parties have caused the execution by their duly authorized officials.

ATTEST:

Deputy Clerk

WITNESSES:

WITNESSES:

ATTEST:

City Clerk

ATTEST:

BY: _____
City Clerk

**BOARD OF COUNTY COMMISSIONERS
ST. LUCIE COUNTY, FLORIDA**

BY: _____
Chair

APPROVED AS TO FORM & CORRECTNESS:

BY: _____
County Attorney

ST. LUCIE COUNTY SHERIFF

BY: _____
Ken Mascara, Sheriff

ST. LUCIE COUNTY FIRE DISTRICT

BY: _____
Chairman

CITY OF FORT PIERCE

BY: _____
Mayor

APPROVED AS TO FORM & CORRECTNESS:

BY: _____
City Attorney

CITY OF PORT ST. LUCIE

BY: _____
Mayor

APPROVED AS TO FORM & CORRECTNESS:

BY: _____
City Attorney