

EXHIBIT E -Work Authorization

HIDALGO COUNTY

Professional Engineering Services Contract # C-19-252-07-16

Work Authorization Form

WORK AUTHORIZATION NO. 01

THIS WORK AUTHORIZATION is made pursuant to the terms and conditions of Section I.A. of the Agreement made by and between HIDALGO COUNTY, action herein by and through the Commissioner's Court, hereinafter called the "Owner," and, Half Associates, Inc., professional engineers of McAllen, Texas, hereinafter called "Engineer".

PART 1. SCOPE OF WORK The purpose of this Work Authorization is for the Engineer to provide Engineering requirements letter for Hidalgo County Substance Abuse Treatment Facility Walk-In Cooler/Freezer Project

The scope of services to be provided by the Owner is identified in EXHIBIT "A" – Scope of Services to be Provided by the Owner attached hereto.

The scope of services to be provided by the Engineer is identified in EXHIBIT "B" – Scope of Services to be Provided by the Engineer attached hereto.

PART 2. ESTIMATED COST The estimated cost for services under this Work Authorization is for \$7,500.00. This amount is based upon the costs outlined in the Estimated Cost Proposal attached hereto as EXHIBIT "D".

PART 3. PAYMENT Compensation and payment to the Engineer for the services established under this Work Authorization shall be made in accordance with Article/Part/Section 6 of the Agreement.

PART 4. FUNDING This Work Authorization No.1 shall be funded through funding source: Account No. 9-1297-423-00-320-020-9-334 Requisition Number 399111 (MUST BE INCLUDED AFTER CC APPROVAL)

PART 5. PERIOD OF SERVICE This Work Authorization shall become effective on the date of final acceptance of the parties hereto, and terminate and terminate upon completion of scopes of the work authorization.

EXHIBIT A

-Scope of Services to be provided by the Owner

The following provides an outline of the services to be provided by the **OWNER** in the development of the Project.

The **OWNER** will provide to the **ENGINEER** the following:

- (1) Authorization to the **ENGINEER** to begin work in accordance with Section 3 of this Agreement.
- (2) Payment for work performed by the **ENGINEER** and accepted by the **OWNER** in accordance with Section 6 of the Agreement.
- (3) Assistance to the **ENGINEER**, as necessary, to obtain the required data and information from other local, regional, State and Federal agencies that the **ENGINEER** cannot easily obtain.
- (4) Provide any available relevant data the **OWNER** may have on file concerning the project.
- (5) Provide timely review and decisions in response to the **ENGINEER'S** request for information and/or required submittals and deliverables, in order for the **ENGINEER** to maintain the agreed-upon work schedule prepared in accordance with Attachment "C" of this Agreement.
- (6) Attend and participate in progress meetings as required and as coordinated and conducted by the **ENGINEER**.
- (7) Assist the **ENGINEER** in the preparation of the project mailing list; provide representation, a site and stenographer for all public meetings; additionally:

Public Meetings

- (a) Approve agenda and all exhibits prior to public meeting.
 - (b) Approve date and location of the meeting.
 - (c) Review/approve Public Meeting Report.
- (8) Attend the Preliminary Concept Conference coordinated and conducted by the **ENGINEER** and more particularly identified in Attachment "B" of the Agreement.
 - (9) Assist the **ENGINEER** as required in the coordination with the USACE and the Federal Emergency Management Agency (FEMA) and any other coordinating agency or entity.
 - (10) Review and approve the Project design criteria.
 - (11) Review and approve change orders as required and prepared by the **ENGINEER**.

EXHIBIT B

-Scope of Services to be provided by the Engineer

Through project award via Work Authorization, Engineer shall provide Professional Services required to design and specify Building Repair and Renovation Projects. Type of services that may be included as dictated by the individual project requirements consist of: 1) Plumbing Engineering, 2) Electrical Engineering. Upon Identification by the Owner of specific projects that require the professional services of the Engineer, a detailed scope of work and identification of professional service disciplines required shall be established.

Halff Associates, Inc. is pleased to submit this Work Authorization No. 01 proposal under our existing Professional Service Agreement (C19-252-07-16) with Hidalgo County to provide:

Design Phase Services

- Review Existing Walk-in Cooler Freezer Quote Documents
- Site Assessment for electrical installation requirements
- Engineering letter with electrical and plumbing requirements
- Coordination Meeting with HCSO
- Design Phase Administrative Support
- Issuance of Final Documents

Construction Phase Services

- Pre-Construction Meeting (1 Visit)
- Response to RFI's
- Review Submittals
- Review Payment Applications
- CA Phase Administrative Support
- Field Observations/Phased Punch Lists (2 Field Visits)
- Project Close-out

Specific Exclusions

- Production of bidding documents for competitive sealed bid procurement
- Site visits in excess of those identified
- Construction phase activities in excess of 2 months from Notice to Proceed
- Any effort associated with submittals, responses, meetings, communication, etc. with Texas Jail Commission
- Field measurements, plan recreation, and/or existing systems' plan creation because of a lack of existing architectural, structural, mechanical, electrical, plumbing, or other construction plans in the areas of work.
- Work not associated with the following construction scope
- Structural design for new walk-in cooler/freezer equipment
- Electrical drawings and book specs for new walk-in cooler/freezer equipment
- Site MEP assessments and/or design outside of the addition of the walk-in cooler/freezer unit.

EXHIBIT C

-Work Schedule

A detailed work schedule for each **Work Authorization**, identified and more particularly described in **Article 7** of this Agreement, shall be prepared by the **Engineer** to be submitted and approved by the Owner in writing for each **Work Authorization**. The work schedule will provide specific work sequence and definite review times by the **Owner** and the **Engineer** of the work performed.

The **Engineer** will diligently pursue the completion of each **Work Authorization** as defined by the milestones and deliverable due dates outlined in each **Work Authorization**'s associated work schedule.

The **Engineer** will inform the **Owner** (in reasonable advance of the delay) should the **Engineer** encounter delays that would prevent the performance of all work in accordance with the established work schedule.

Item	Task	Duration	Start	Finish
1	Phase I (Engineering Phase)	24 days	16-Aug	2-Sep
2	Engineer NTP	1 day	16-Aug	16-Aug
3	Electrical assessment visit	1 day	19-Aug	19-Aug
4	Development of electrical engineering requirements letter	11 days	19-Aug	30-Aug
14	Phase 2 (Construction Phase)	33 days	2-Sep	30-Sep
15	Construction NTP	1 day	2-Sep	2-Sep
16	Construction Activities	25 days	2-Sep	26-Sep
17	Substantial Completion	1 day	27-Sep	27-Sep
18	Final Completion	3 days	27-Sep	30-Sep

EXHIBIT D

Cost Proposal

Plans and Specifications for Hidalgo County Substance Abuse Treatment Facility Walk-in Cooler/Freezer Project.

Phase 1	
• Design Phase Services	\$3,297.50
Phase 2	
• Construction Phase Services	\$3,952.50
• Expenses	\$250.00
Total:	<u>\$7,500.00</u>

PART 6. RESPONSIBILITIES AND OBLIGATIONS This Authorization does not waive the parties' responsibilities and obligations provided under the Agreement.

PART 7. ACKNOWLEDGEMENT AND CONFIRMATION Acknowledgement and confirmation by Hidalgo County Precinct #4, Commissioner Ellie Torres as to content and detail of this Work Authorization No. 01

HIDALGO COUNTY PRECINCT No. 4

BY: Ellie Torres, Commissioner

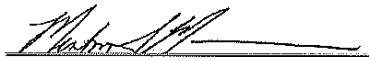
PART 8. ACCEPTANCE AND APPROVAL This Work Authorization is hereby accepted, approved by Hidalgo County Commissioners' Court on _____ as indicated below and effective as of ____ day of _____, 2019.

THE ENGINEER:

THE OWNER:

HALFF ASSOCIATES INC.

HIDALGO COUNTY



By: Menton J. Murray, III, P.E., LEED AP

By: Richard F. Cortez, County Judge

ATTEST:

By: _____
Arturo Guajardo, Jr., County Clerk

LIST OF ATTACHMENTS

ATTACHMENT "A" -Service to be Provided by the Owner
ATTACHMENT "B" -Services to be Provided by the Engineer
ATTACHMENT "C" -Work Schedule
ATTACHMENT "D" -Cost Proposal

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

OFFICE USE ONLY CERTIFICATION OF FILING

Certificate Number:
2019-525419

Date Filed:
08/05/2019

Date Acknowledged:

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.

Half Associates, Inc.
MCALLEN, TX United States

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.

Hidalgo County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

C19-252-07-16

Work Authorization No.1: Hidalgo County Substance Abuse Treatment Facility Walk-in Cooler/Freezer

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Zapalac, Russell	Richardson, TX United States	X	
	Tanksley, Dan	Richardson, TX United States	X	
	Plugge, Roman	Richardson, TX United States	X	
	Murray, Menton	McAllen, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Kuhn, Greg	Richardson, TX United States	X	
	Killeen, Russell	Richardson, TX United States	X	
	Ickert, Andrew	Fort Worth, TX United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Edwards, Mark	Richardson, TX United States	X	
	Craig, Matthew	Richardson, TX United States	X	
	Bargainer, Tim	Austin, TX United States	X	
	Baker, Jessica	Richardson, TX United States	X	
	Adams, Bobby	Houston, TX United States	X	

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

2 of 2

Complete Nos. 1 - 4 and 6 if there are interested parties. Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.	OFFICE USE ONLY
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C19-252-07-16
 Work Authorization No.1: Hidalgo County Substance Abuse Treatment Facility Walk-in Cooler/Freezer

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

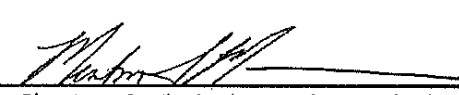
6 UNSWORN DECLARATION

My name is Menton J. Murray, III, and my date of birth is 4/2/1972.

My address is 5000 W. Military Hwy. Suite 100, McAllen, TX, 78503, USA.
(street) (city) (state) (zip code) (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in Hidalgo County, State of Texas, on the 5th day of August, 2019.
(month) (year)



 Signature of authorized agent of contracting business entity
(Declarant)

CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 2

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
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Half Associates, Inc.
MCALLEN, TX United States

Certificate Number:
2019-525419

Date Filed:
08/05/2019

Date Acknowledged:
08/06/2019

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Hidalgo County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

C19-252-07-16

Work Authorization No.6 : Hidalgo County Substance Abuse Treatment Facility Walk-in Cooler/Freezer

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary
	Zapalac, Russell	Richardson, TX United States	X	
	Tanksley, Dan	Richardson, TX United States	X	
	Plugge, Roman	Richardson, TX United States	X	
	Murray, Menton	McAllen, TX United States	X	
	Moya, Mike	Austin, TX United States	X	
	Kunz, Pat	Richardson, TX United States	X	
	Kuhn, Greg	Richardson, TX United States	X	
	Killeen, Russell	Richardson, TX United States	X	
	Ickert, Andrew	Fort Worth, TX United States	X	
	Jackson, Todd	Austin, TX United States	X	
	Edwards, Mark	Richardson, TX United States	X	
	Craig, Matthew	Richardson, TX United States	X	
	Bargainer, Tim	Austin, TX United States	X	
	Baker, Jessica	Richardson, TX United States	X	
	Adams, Bobby	Houston, TX United States	X	

CERTIFICATE OF INTERESTED PARTIES

FORM **1295**

2 of 2

Complete Nos. 1 - 4 and 6 if there are interested parties.
Complete Nos. 1, 2, 3, 5, and 6 if there are no interested parties.

**OFFICE USE ONLY
CERTIFICATION OF FILING**

1 Name of business entity filing form, and the city, state and country of the business entity's place of business.
Half Associates, Inc.
MCALLEN, TX United States

Certificate Number:
2019-525419

Date Filed:
08/05/2019

Date Acknowledged:
08/06/2019

2 Name of governmental entity or state agency that is a party to the contract for which the form is being filed.
Hidalgo County

3 Provide the identification number used by the governmental entity or state agency to track or identify the contract, and provide a description of the services, goods, or other property to be provided under the contract.

C19-252-07-16

Work Authorization No.6 : Hidalgo County Substance Abuse Treatment Facility Walk-in Cooler/Freezer

4	Name of Interested Party	City, State, Country (place of business)	Nature of interest (check applicable)	
			Controlling	Intermediary

5 Check only if there is NO Interested Party.

6 UNSWORN DECLARATION

My name is _____, and my date of birth is _____.

My address is _____ (street) _____ (city) _____ (state) _____ (zip code) _____ (country)

I declare under penalty of perjury that the foregoing is true and correct.

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of authorized agent of contracting business entity
(Declarant)