

IN WITNESS WHEREOF, the *County* and the *Engineer* have executed this supplemental agreement in duplicate,

ENGINEER:

By: 
Signature

Thomas M. Owens, PE
Printed Name

Executive Vice President
Title

5 JUL 17
Date


COUNTY:

By: _____
Signature

Printed Name

Title

Date

 07/13/2017

Forest North Drainage Improvements
Exhibit II
Hourly Rates
Fee Schedule

| K Friese & Associates, Inc. | | |
|-----------------------------|------------------|-------------------|
| | Classifications | Billing Rate/Hour |
| 1 | Principal | \$185.00 |
| 2 | Project Manager | \$182.00 |
| 3 | Senior Engineer | \$125.00 |
| 4 | Junior Engineer | \$90.00 |
| 5 | EIT | \$85.00 |
| 6 | CADD Technician | \$81.00 |
| 7 | Admin / Clerical | \$75.00 |

new