DATE:

December 10, 2015

TO:

Board of Selectmen

FROM:

Chuck Hodgkinson

SUBJECT:

Revised FY 2016 Squibnocket Project Grant Contracts

This requests your signature on the attached revised FY 2016 contract (2 copies) for the Town's Coastal Zone Management (CZM) Green Infrastructure for Coastal Resilience Grant.

Background

The Town received a \$280,000 grant in FY 2015 for the fund the permitting, design and construction of the Town's Squibnocket Beach Project. The time required to obtain Town Meeting approval only allowed us to spend \$20,000 of the total amount in FY 2015.

We re-applied and received a second grant for \$280,000 for FY 2016. The time needed to get to the MEPA permitting phase submitted further inhibited the Town's ability to start construction and spend the \$280,000 by June 30, 2016.

Consequently, CZM lowered the Town's FY 2016 grant amount from \$280,000 to \$52,000. It also encouraged the Town to apply a third grant to cover the balance of funds needed--if the grant program is offered for FY 2017. The application deadline for FY 2017 grant applications has not been established. Previously they were in October.

The attached revised FY 2016 contract reflects the revised scope of work and lowered grant amount to \$52,000.

Scope of Services CZM Green Infrastructure for Coastal Resilience Grant Program Town of Chilmark Revised December 10, 2015

Contractor

Chuck Hodgkinson
Town Administration
401 Middle Road, P.O. Box 119, Chilmark, MA 02535
(508) 645-2114
chodgkinson@chilmarkma.gov

Project Title

Squibnocket Town Beach Expansion and Restoration

Summary

The Town of Chilmark will continue work to expand and restore Squibnocket Town Beach and relocate the beach parking area to a location that is naturally protected from erosion. The requested funding will be used to advance the planning, permitting, restoration, and construction needs. The Town is using its current FY14 Green Infrastructure grant to survey the parking area, beach, and skiff launch and prepare engineering plans for construction. The project will additionally provide an opportunity to construct an elevated roadway for enhanced public access and protection of a coastal road.

Scope

As described in the application to the Green Infrastructure for Coastal Resilience Grant Program, the following tasks will be performed under this contract:

Task		Description	Deliverable	Deliverable Due Date
1	Approve beach legal expenses and lease payment	The Town has purchased two parcels of land to relocate the parking lot landward for \$350,000. The Town has also signed a new 100-year ground lease for the existing Squibnocket Beach plus an additional ¼ mile of beach to the west. The estimated total cost including related expenses is \$275,000.	Beach and parking lease	Completed October 6, 2015
2	Design and ENF Preparation	Prepare permit-level design plans and ENF for submission to MEPA. Advertise as necessary and file associated fees.	Permit-level design plans; ENF	Submitted October 15, 2015
3	Design and permitting amendments	Obtain and respond to ENF comments; revise design plans and file additional permits (Conservation Commission and Martha's Vineyard Commission).	Amended design plans and additional permit applications	December 15, 2016
4	Construction plans and bidding expenses	Prepare construction-level design drawings and bid specifications.	Construction- level designs, specifications	June 15, 2016

Final 5 Archaeological Surveys	Complete final archaeological surveying needed for relocating the parking lot.	Archaeological survey report	June 15, 2016
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	Deliverable	Deliverable Due Date	Grant	Match	Total	Invoice Due Date
1	Beach and parking lease	October 6, 2015	\$2,700.00	\$318,330 ¹	\$321,030.00	Submitted July 7, 2015
2	Permit-level design plans; ENF	October 15, 2015	\$11,300.00	\$0		Submitted July 7 and December 1, 2015
3	Amended design plans and additional permit applications	December 15, 2015	\$4,000.00	\$0		June 30, 2016
4	Construction-level designs and specifications; bidding documents	June 15, 2016	\$12,000.00	\$0		June 30, 2016
5	Archaeological survey report	June 15, 2016	\$22,000.00	\$0		June 30, 2016
TOTAL			\$52,000.00	\$318,330.00	\$321,030.00	

¹ Total match contributed is \$325,000, split between FY14 and FY15. (FY14 match amount is minimum 25% of total project cost, or \$6,670. FY15 match amount is the remaining balance, or \$318,330.)

Reimbursement

To receive grant funding, the applicant must have agreed to the fiscal requirements of the program by providing a statement from the authorized signatory of the organization acknowledging and accepting the following:

- Matching funds, in cash or in-kind, must total at least 25% of the total project cost.
- Funding is provided on a reimbursement basis only upon receipt of a reimbursement package as
 described below. Advanced payments shall not be made. No payments will be made for
 Massachusetts sales tax.
- Work done prior to the project start date (the date issued and signed by the Commonwealth's Department Authorized Signatory) shall NOT be reimbursed.
- Invoices for work conducted prior to *June 30, 2015* must be received by no later than *July 31, 2015*.
- No funds will be granted for work performed after June 30, 2016. Requests for reimbursement will NOT be accepted after July 31, 2016.

The contractor must submit a reimbursement package containing the following items:

1. An *original* letter from the contractor with the contractor's authorized signatory requesting reimbursement.

- 2. All invoices requesting payment, including those from subcontractors. Invoices must itemize costs consistent with the agreed upon scope of work. Invoices must demonstrate sufficient information for CZM to determine that the services were performed and/or products were received, and that the invoiced items meet all contractual performance requirements.
- 3. A detailed breakdown of the required match for the project. For in-kind services, include sufficient details to demonstrate the total amounts of match contributed, and as appropriate, a list of personnel, hours worked, hourly rate, etc.

Reimbursement packages should be submitted according to the above schedule, and reflect work performed according to the schedule of deliverables included in the project budget. Reimbursement is generally made within 45 days subsequent to approval of a reimbursement package.

CZM will retain a minimum of ten percent (10%) of the total maximum obligation of funds until all contract provisions are satisfied and final reports and other products are delivered and accepted.



This form is jointly issued and published by the Executive Office for Administration and Finance (ANF), the Office of the Comptroller (CTR) and the Operational Services Division (OSD) as the default contract for all Commonwealth Departments when another form is not prescribed by regulation or policy. Any changes to the official printed language of this form shall be void. Additional non-conflicting terms may be added by Attachment. Contractors may not require any additional agreements, engagement letters, contract forms or other additional terms as part of this Contract without prior Department approval. Click on hyperlinks for definitions, instructions and legal requirements that are incorporated by reference into this Contract. An electronic copy of this form is available at www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or www.mass.gov/osc under Guidance For Vendors - Forms or <a href="https://www.mass.gov/osc under Guidance

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CONTRACTOR LEGAL NAME: Town of Chilmark		COMMONWEALTH DEPARTMENT NAME: Executive Office of Energy &		
(and d/b/a):		Environmental Affairs MMARS Department Code: ENV		
Legal Address: (W-9, W-4,T&C): Chilmark Town Ha 02535	II, PO Box 119, Chilmark, MA	Business Mailing Address: CZM, 251 Causeway Street, Room 800, Boston, MA 02114		
Contract Manager: Chuck Hodgkinson		Billing Address (if different):		
E-Mail: chodgkinson@chilmarkma.gov		Contract Manager: Patricia Bowie		
Phone 508-645-2114	Fax:	E-Mail: Patricia.Bowie@state.ma.us		
Contractor Vendor Code: VC6000191752	3	Phone: 617 626-1186	Fax: 617-626-1240	
Vendor Code Address ID (e.g. "AD001"): AD001_	<u>.</u>	MMARS Doc ID(s): CT ENV 1222*915		
(Note: The Address Id Must be set up for <u>EFT</u> paym	ents.)	RFR/Procurement or Other ID Number: ENV 15 CZM 04		
NEW CONTRACT PROCUREMENT OR EXCEPTION TYPE: (Check one option only) Statewide Contract (OSD or an OSD-designated Department) Collective Purchase (Attach OSD approval, scope, budget) X Department Procurement (includes State or Federal grants 815 CMR 2.00) (Attach RFR and Response or other procurement supporting documentation) Emergency Contract (Attach justification for emergency, scope, budget) Contract Employee (Attach Employment Status Form, scope, budget) Legislative/Legal or Other: (Attach authorizing language/justification, scope and budget)				
The following COMMONWEALTH TERMS AND CO X Commonwealth Terms and Conditions Com	NDITIONS (T&C) has been execunomousealth Terms and Conditions	[발생] [14] [15] [15] [15] [15] [15] [15] [15] [15	ference into this Contract.	
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00. Rate Contract (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.) X Maximum Obligation Contract Enter Total Maximum Obligation for total duration of this Contract (or new Total if Contract is being amended). \$52,000.00				
PROMPT PAYMENT DISCOUNTS (PPD): Commonwealth payments are issued through EFT 45 days from invoice receipt. Contractors requesting accelerated payments must identify a PPD as follows: Payment issued within 10 days% PPD; Payment issued within 15 days% PPD; Payment issued within 20 days% PPD; Payment issued within 30 days% PPD. If PPD percentages are left blank, identify reason: Xagree to standard 45 day cycle statutory/legal or Ready Payments (G.L. c. 29, § 23A); only initial payment (subsequent payments scheduled to support standard EFT 45 day payment cycle. See Prompt Pay Discounts Policy.)				
BRIEF DESCRIPTION OF CONTRACT PERFORMA				
performance or what is being amended for a Contract			7	
Town Beach expansion and restoration	n. Scope change from cor	istruction to design, permitting, su	rveying, archaeological survey	
COSTS. ANTICIPATED START DATE: (Complete ONE option	n only) The Department and Centr	actor cortify for this Contract or Contract Among	Smoot that Contract obligations:	
X 1. may be incurred as of the Effective Date (lates				
2. may be incurred as of, 20, a date LA		-		
3. were incurred as of, 20, a date PRIOR to the Effective Date below, and the parties agree that payments for any obligations incurred prior to the Effective Date are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.				
CONTRACT END DATE: Contract performance shall terminate as of 06/30/2016, with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment shall be the latest date that this Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached Contractor Certifications (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form including the Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract. AUTHORIZING SIGNATURE FOR THE CONTRACTOR: AUTHORIZING SIGNATURE FOR THE CONTRACTOR:				
AUTHORIZING SIGNATURE FOR THE CONTRACT				
X: (Signature and Date Must Be Handwritten	Date: At Time of Signature)	X:(Signature and Date Must Be H	Date: andwritten At Time of Signature)	
Print Name:		Print Name: William Nichols		
Print Title:		Print Title: Controller, EEA	-28	



ATTACHMENT B Project Budget

The Town of Chilmark shall be paid an amount of \$280,000 as a grant per an award under RFR ENV 15 CZM 04 (FY15 Green Infrastructure Grant Program). Payment will be made in accordance with the following schedule:

FY 2015	\$20,000.00	Completed June 30, 2015
FY 2016	\$52,000.00 completion of	Upon reimbursement request from the municipality, after partial and/or final work, from funds available in Appropriation Account Number 2000-7018.



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CONTRACTOR LEGAL NAME: Town of Chilmark (and d/b/a):	COMMONWEALTH DEPARTMENT NAME: Executive Office of Energy & Environmental Affairs			
Legal Address: (W-9, W-4,T&C): Chilmark Town Hall, PO Box 119, Chilmark, MA 02535	MMARS Department Code: ENV Business Mailing Address: CZM, 251 Causeway Street, Room 800, Boston, MA 02114			
Contract Manager: Chuck Hodgkinson	Billing Address (if different):			
E-Mail: chodgkinson@chilmarkma.gov	Contract Manager: Patricia Bowie			
Phone 508-645-2114 Fax:	E-Mail: Patricia.Bowie@state.ma.us			
Contractor Vendor Code: VC6000191752	Phone: 617 626-1186 Fax: 617-626-1240			
Vendor Code Address ID (e.g. "AD001"): AD001	MMARS Doc ID(s): CT ENV 1222*915			
(Note: The Address Id Must be set up for <u>EFT</u> payments.)	RFR/Procurement or Other ID Number: ENV 15 CZM 04			
PROCUREMENT OR EXCEPTION TYPE: (Check one option only) Statewide Contract (OSD or an OSD-designated Department) Collective Purchase (Attach OSD approval, scope, budget) X Department Procurement (includes State or Federal grants 815 CMR 2.00) (Attach RFR and Response or other procurement supporting documentation) Emergency Contract (Attach justification for emergency, scope, budget) Contract Employee (Attach Employment Status Form, scope, budget) Legislative/Legal or Other: (Attach authorizing language/justification, scope and budget)	XCONTRACT AMENDMENT Enter Current Contract End Date *Prior* to Amendment:, 20 Enter Amendment Amount: \$ _(-)228,000.00 (or "no change") **AMENDMENT TYPE: (Check one option only. Attach details of Amendment changes.) **X_Amendment to Scope or Budget* (Attach updated scope and budget) **Interim Contract* (Attach justification for Interim Contract and updated scope/budget) **Contract Employee* (Attach any updates to scope or budget) *Legislative/Legal or Other: (Attach authorizing language/justification and updated scope and budget)			
The following COMMONWEALTH TERMS AND CONDITIONS (T&C) has been execu X Commonwealth Terms and Conditions Commonwealth Terms and Conditions	선거의 그는 그리지 그리지 그렇게 되었는 그릇을 하는 것을 가지 않는데 가지 하지만 하지만 하는데 하는데 하는데 그리는데 그를 하는데 가지 않는데 사람이 되었다.			
COMPENSATION: (Check ONE option): The Department certifies that payments for authorized performance accepted in accordance with the terms of this Contract will be supported in the state accounting system by sufficient appropriations or other non-appropriated funds, subject to intercept for Commonwealth owed debts under 815 CMR 9.00. Rate Contract (No Maximum Obligation. Attach details of all rates, units, calculations, conditions or terms and any changes if rates or terms are being amended.) X Maximum Obligation Contract Enter Total Maximum Obligation for total duration of this Contract (or new Total if Contract is being amended). \$52,000.00				
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	ENT: (Enter the Contract title, purpose, fiscal year(s) and a detailed description of the scope of			
	documentation and justifications. FY15 Green Infrastructure grant. Squibnocket			
	nstruction to design, permitting, surveying, archaeological survey			
costs.				
ANTICIPATED START DATE: (Complete ONE option only) The Department and Control X 1. may be incurred as of the Effective Date (latest signature date below) and no obli				
2 may be incurred as of, 20, a date LATER than the <u>Effective Date</u> below and <u>no</u> obligations have been incurred <u>prior</u> to the <u>Effective Date</u> . 3. were incurred as of, 20, a date <u>PRIOR</u> to the <u>Effective Date</u> below, and the parties agree that payments for any obligations incurred prior to the <u>Effective Date</u> are authorized to be made either as settlement payments or as authorized reimbursement payments, and that the details and circumstances of all obligations under this Contract are attached and incorporated into this Contract. Acceptance of payments forever releases the Commonwealth from further claims related to these obligations.				
CONTRACT END DATE: Contract performance shall terminate as of 06/30/2016 , with no new obligations being incurred after this date unless the Contract is properly amended, provided that the terms of this Contract and performance expectations and obligations shall survive its termination for the purpose of resolving any claim or dispute, for completing any negotiated terms and warranties, to allow any close out or transition performance, reporting, invoicing or final payments, or during any lapse between amendments.				
CERTIFICATIONS: Notwithstanding verbal or other representations by the parties, the "Effective Date" of this Contract or Amendment shall be the latest date that this Contract or Amendment has been executed by an authorized signatory of the Contractor, the Department, or a later Contract or Amendment Start Date specified above, subject to any required approvals. The Contractor makes all certifications required under the attached Contractor Certifications (incorporated by reference if not attached hereto) under the pains and penalties of perjury, agrees to provide any required documentation upon request to support compliance, and agrees that all terms governing performance of this Contract and doing business in Massachusetts are attached or incorporated by reference herein according to the following hierarchy of document precedence, the applicable Commonwealth Terms and Conditions, this Standard Contract Form including the Instructions and Contractor Certifications, the Request for Response (RFR) or other solicitation, the Contractor's Response, and additional negotiated terms, provided that additional negotiated terms will take precedence over the relevant terms in the RFR and the Contractor's Response only if made using the process outlined in 801 CMR 21.07, incorporated herein, provided that any amended RFR or Response terms result in best value, lower costs, or a more cost effective Contract.				
AUTHORIZING SIGNATURE FOR THE CONTRACTOR:	AUTHORIZING SIGNATURE FOR THE COMMONWEALTH:			
X: Date: (Signature and Date Must Be Handwritten At Time of Signature)	X: Date: (Signature and Date Must Be Handwritten At Time of Signature)			
Print Name:	Print Name: William Nichols			
Print Title:	Print Title: Controller, EEA			



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