



DATE: February 28, 2022

MEMO TO: Jessica Vealitzek, Chair
Operations Committee

FROM: Pati Vitt
Director of Natural Resources

RECOMMENDATION: Approve Change Order No. 1 to the Contract with Northern Illinois University (NIU) for the Ecological Assessment of District Lands, increasing the Contract Amount by \$34,000.00.

STRATEGIC DIRECTIONS SUPPORTED: Conservation; Leadership

FINANCIAL DATA: This program is funded through the approved Habitat Restoration budget (11104100-803200-60004) in the Board-approved Capital Improvement Plan (CIP). On April 1, 2019, the District entered into a three-year monitoring contract with NIU for ecological monitoring services for a total contract price of \$170,000.00 (Contract). The amount of Change Order No.1, which would approve payment for one additional year of monitoring, will increase the Contract price amount by \$34,000.00 for a total Contract price of \$204,000.00.

BACKGROUND: In order to identify wildlife species within District preserves, prepare master plans, and implement capital improvement projects, an ecological assessment of District lands is necessary. This is accomplished through the Wildlife Monitoring Program (Program), by which staff is able to: 1) detect species presence/absence, 2) detect long-term population changes, and 3) provide reliable standardized biological information that can be used to develop site management goals and assess habitat management and restoration practices.

Under the Contract, NIU provides ecological monitoring services to assist the Program. During the previous monitoring seasons, NIU has monitored amphibians, birds, mammals and reptiles at 289 locations across 62 preserves. District staff wildlife ecologists coordinated this field data collection and incorporated the data received into the District's mECO (Mobile Ecologist) web application and database. To assist this process, NIU's Institute for the Study of the Environment, Sustainability & Energy provided wildlife monitoring technicians and graduate students. Data collected as part of the Program and existing geographical information system (GIS) habitat management data will be analyzed in order to provide recommendations to more efficiently and effectively manage habitat for populations of wildlife.

Based on the work completed to date under the Contract, District staff recommends that the Contract be amended via Change Order #1 to provide for an additional year of data collection. Under the proposed Change Order #1, NIU would monitor wildlife species, including amphibians, birds, mammals, and reptiles. If Change Order #1 is approved, 2022 will be the fourth year of a multi-year project in cooperation with NIU to complete an in-depth analysis of the District's wildlife data.

REVIEW BY OTHERS: Chief Operations Officer, Director of Finance, Purchasing Manager,
Corporate Counsel

COMMITTEE MOTION:

Motion to approve Change Order No. 1 to the April 1, 2019, Contract with Northern Illinois University for the Ecological Assessment of District Lands (2019-2021) in substantially the form attached hereto, for the following reasons:

- a. The circumstances necessitating the Change Order were not reasonably foreseeable at the time the Contract was signed.
- b. The Change Order is germane to the original Contract, as signed; and
- c. The Change Order is in the best interest of the District.

OPERATIONS COMMITTEE:

Date: _____ Roll Call Vote: Ayes: ____ Nays: _____
 Voice Vote Majority Ayes; Nays: _____

Purchase Order Change Order



Lake County
Forest Preserves

1899 West Winchester Road
Libertyville, Illinois 60048
PurchasingDept@LCFPD.org
847-367-6640

Date: 02/02/2022	Change Order Number (Please use drop down) 1	Department:(Please use drop down) *
Fiscal Year 2022	Purchase Order Number: 20190540	Natural Resources
		Account Code: * 11104100-803200-60004
		Administrative Assistant Email * HKELLER@LCFPD.ORG

Project Information

Project or Bid Number: 60004-170-932	Contractor Name: * Northern Illinois University	Completed
Project Name: * Ecological Assessment of District Lands 2019-2021	Contractor Email * KDYSLIN@NIU.EDU	Original Contract Date: * 04/01/2019
Site: Multi	Contractor Admin Email dhoefle@niu.edu	Contract Type: * <input checked="" type="radio"/> Lump Sum Contract <input type="radio"/> Unit Price Contract

To the Contractor: You are hereby authorized to make the following changes, subject to the Contract provisions.

Increase

The following items are added to the contract documents (additional unforeseen costs required to complete project): The Project Manager is requesting that the contract completion date be moved from March 31, 2022 to May 15, 2023 and that \$34,000 be added to the contract to collect an additional year of data and incorporate additional invertebrate and bird monitoring in 2023	Increase Amount: \$34,000.00
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Decrease

The following items are deducted from the contract documents (project completed under budget-credit to the contract):	Decrease Amount (enter as a negative number):
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Time Extension

Change to Scope that results in time extension

or no additional costs:

Contract completion date be moved from March 31, 2022 to May 15, 2023

Change in Contract Price
from this Change Order:

\$34,000.00

Revised Completion Date:

05/15/2023

Change in Contract Price

Original Contract Price: *	Contract Price prior to this Change Order (as amended by <i>previous</i> Change Orders, if any): *	Net Change from original Contract Price resulting from this Change Order and all previous Change Orders:	New Contract Price
\$170,000.00	\$170,000.00	\$34,000.00	\$204,000.00
		Net Percentage Change from original Contract Price resulting form this Change Order and all previous Change Orders:	
		20.000000%	

Change in Contract Time

Original Contract Time	Contract Time (as amended by <i>previous</i> Change Orders, if any)	New Contract Time
Commencement Date: 04/01/2019	Commencement Date:	Commencement Date: 03/31/2022
Completion Date: 03/31/2022	Completion Date:	Completion Date 05/15/2023

Determination

Owner's Department Director and/or Standing Committee(s) hereby determine:

This Written Determination and this Change Order shall (i) be preserved in the Owner's file for the Contract and open to the public for inspection and (ii) constitute the Written Determination required by 720 ILCS 5/33E-9.

Please select all that apply:

- The circumstances necessitating the Change Order were not reasonably foreseeable at the time the Contract was signed
- The Change Order is germane to the original Contract, as signed.
- The Change Order is in the best interest of the Owner and is authorized by law.

Notes to Vendor

Please type your notes to the Vendor below:

Project Manager Recommendation


Project Manager*

GGLOWACKI

Date of Recommendation:

02/02/2022

Signature:



Department Director Approval

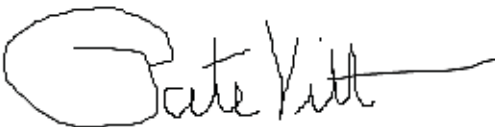
Department Director:

Pati Vitt

Date of Approval:

02/02/2022

Signature:



Contractor Approval

Name:

Sarah Senechalle

Title:


Assistant Director, SPA

Date of Approval:

02/03/2022

Please click on the Signature box - Sign your name with your mouse. Then click **Save**. Click the Return to LCFPD button to send the item back to Lake County Forest Preserves.

Signature:



For Public works Contracts, Contractor also certifies that this Change Order will not cause or result in an increase in the price of any subcontract under the Contract that is 50% or more of such original subcontract's price.

Committee Approval

Please select the Committee

Meeting

Date of Approval:



Consultant Disclosure Statement

Each **Consultant** (bold/italicized words are defined in Section II below) proposing to perform **Covered Services** for the Lake County Forest Preserve District (the “District”) is required, by the District’s Purchasing Policy, to complete this form and make disclosures (i) on its behalf, unless it is a **Publicly Traded Consultant**, (ii) on behalf of its **Disclosure-Covered Owners**, unless it is a **Publicly Traded Consultant**, and (iii) on behalf of its **Disclosure-Covered Employees**, even if it is a **Publicly Traded Consultant**. If **Consultant** is a **Publicly Traded Consultant**, please complete Sections I, III, and V. If **Consultant** is not a **Publicly Traded Consultant**, please complete Sections I, IV, and V.

I. Identification of Consultant and Related Parties:

Consultant Name:	Northern Illinois University
Consultant Address:	1425 W Lincoln Highway, DeKalb, IL 60115
Person Certifying Statement for Consultant , including Phone # and Email Address:	Sarah Senechalle, Assistant Director, Award Acceptance, Sponsored Programs Administration, Northern Illinois University. Email: asosp@niu.edu. Phone: 815-753-1581
Covered Services:	Provide wildlife field data collection following District provided protocol throughout Lake County (NIU Grant # G5A64338)
Names of Disclosure-Covered Owners (if none, please insert “N/A”):	N/A
Names of Disclosure-Covered Employees (if none, please insert “N/A”):	N/A

II. Defined Terms:

- a) “**Campaign Contribution**” is defined in Section 9-1.4 of the Illinois Election Code, 10 ILCS 5/9-1.4.
- b) “**Candidate Political Committee**” is defined in Section 9-1.8(b) of the Illinois Election Code, 10 ILCS 5/9-1.8(b).
- c) “**Consultant**” is a person or entity that submits a proposal to enter into a contract with the District, or a proposal for a change order to such a contract, that calls for the person or entity to perform **Covered Services** for the District.
- d) “**Covered Services**” are the “Covered Services” identified above by District staff, which have an expected price greater than \$25,000.00, taking into account the original contract price for the **Covered Services** plus the prices of all change orders to such original contract.

- e) **“Disclosure-Covered Owner”** is (i) a natural person who is a **Consultant** or (ii) a person or entity that, directly or indirectly (including without limitation ownership through a corporation, limited liability company, joint venture, or partnership) owns at least 7.5% of a **Consultant** that is not a **Publicly Traded Consultant**.
- f) **“Disclosure-Covered Employee”** is (i) a natural person who is a **Consultant** or (ii) a Consultant employee or independent contractor who will receive a direct financial benefit (including without limitation a commission, bonus, or salary increase) if the District awards the proposed contract or change order to the **Consultant**.
- g) **“Family Member”** is a person related as a parent; child; sibling; uncle or aunt; great aunt or great uncle; first cousin; nephew or niece; spouse or civil union partner; grandparent; grandchild; parent-in-law, child-in-law, sibling-in-law, or grandparent-in-law, whether that in-law relationship is created by marriage or civil union; stepparent; stepchild; stepsibling; half sibling; and fiancé or fiancée.
- h) **“Publicly Traded Consultant”** is a **Consultant** whose common stock is traded on a nationally recognized securities market.

III. Required Disclosures for Publicly Traded Consultant: N/A

- a) **Securities Market:** Please identify the nationally recognized securities market on which **Consultant’s** common stock is traded and identify the stock “ticker” symbol under which the **Consultant** is traded:
Exchange: _____; Symbol: _____.
- b) **Campaign Contribution Disclosure:** Please disclose each **Campaign Contribution** made by your **Disclosure-Covered Employees** to the following persons/entities within the two (2) years preceding the date on which the **Consultant’s** proposal for **Covered Services** was submitted to the District:
 - i. a Lake County Board member in his or her capacity as either a County Board member, a District Commissioner, or both; or
 - ii. a **Candidate Political Committee** of a Lake County Board member.

Donor/ Disclosure-Covered Employee	Recipient of Donation	Donation Type (e.g., cash, in-kind service,)	Amount of Donation	Date of Donation

- c) **Familial Relationship Disclosure:** Please disclose each **Family Member** of your **Disclosure-Covered Employees** who is either a District Commissioner or employed by the District as an Executive Director, Chief Operations Officer, Department Director, or Manager.

Name of Family Member	Family Member’s Position with District	Name of Disclosure-Covered Employee Related to Family Member	Relationship of Disclosure-Covered Employee to Family Member

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IV. Required Disclosures for Consultants that are Not Publicly Traded Consultants:

- a) **Campaign Contribution Disclosure:** Please disclose each **Campaign Contribution** made by your **Disclosure-Covered Owners** or **Disclosure-Covered Employees** to the following persons/entities within the two (2) years preceding the date on which the **Consultant's** proposal for **Covered Services** was submitted:
- i. a Lake County Board member in his or her capacity as either a County Board member, a District Commissioner, or both; or
 - ii. a **Candidate Political Committee** of a Lake County Board member.

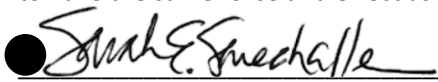
Donor/ Disclosure-Covered Owner or Disclosure-Covered Employee	Recipient	Description (cash, item, in-kind service, etc.)	Amount/ Value	Date Made
Richard King	none			
Holly Jones	none			
Jen Koop	none			

- b) **Familial Relationship Disclosure:** Please disclose each **Family Member** of a **Disclosure-Covered Owner** or **Disclosure-Covered Employee** who is either a District Commissioner or employed by the District as an Executive Director, Chief Operations Officer, Department Director, or Manager.

Name of Family Member	Family Member's Position with District	Name of Disclosure-Covered Owner or Disclosure-Covered Employee Related to Family Member	Relationship of Disclosure-Covered Owner or Disclosure Covered Employee to Family Member
none			

V. Consultant Certification and Signature:

By signing below, I certify that (i) I am authorized to make the disclosures above on behalf of **Consultant, Consultant's Disclosure-Covered Owners, and Consultant's Disclosure-Covered Employees**, (ii) I have read and understand this Consultant Disclosure Statement, (iii) the above disclosures are accurate and complete, to the best of my knowledge after making reasonable inquiry, and (iv) my signature below, if electronic, is intended to authenticate this writing and to have the same force and effect as a manual signature.

 _____

Name

2-3-2022 _____

Date