



3. After taking the reductions listed above and described in Exhibits A and B, the new total Maximum Compensation for Services for Work Authorization No. 3 and Work Authorization No. 4 shall be four hundred sixty-five thousand, one hundred sixteen dollars and 38/100 (**\$465,116.38**).
4. The date of performance for Work Authorization No. 3 and Work Authorization No. 4 shall be extended to December 31, 2023.
5. Human Trafficking. BY ACCEPTANCE OF CONTRACT, CONTRACTOR ACKNOWLEDGES THAT FORT BEND COUNTY IS OPPOSED TO HUMAN TRAFFICKING AND THAT NO COUNTY FUNDS WILL BE USED IN SUPPORT OF SERVICES OR ACTIVITIES THAT VIOLATE HUMAN TRAFFICKING LAWS.

All terms and conditions of the Agreement, including any addenda or amendments, not modified herein shall remain in full force and effect for the term of the Agreement. If there is a conflict between this Amendment No. 7 and the Agreement for Professional Services, the provisions of this Amendment No. 7 shall prevail with regard to the conflict.

**FORT BEND COUNTY**

*KP George*  
County Judge KP George

\_\_\_\_\_  
 KP George, County Judge

May 24, 2022  
 Date



**IDCUS, INC.**

*Larry Janak*

\_\_\_\_\_  
 Larry Janak, Principal

5/16/2022  
 Date

ATTEST:

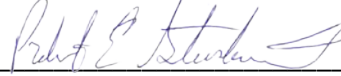
*Laura Richard*  
 \_\_\_\_\_  
 Laura Richard, County Clerk

Reviewed by:

*Perri D'Armond*  
 \_\_\_\_\_  
 Perri D'Armond, Public Transportation Director

**AUDITOR'S CERTIFICATE**

I hereby certify that funds are available in the amount of \$ 465,116.38 to accomplish and pay the obligation of Fort Bend County under this contract.



\_\_\_\_\_  
Robert Ed Sturdivant, County Auditor

# EXHIBIT A

**Exhibit A- Lift Station Design**

	<b>TASK DESCRIPTION</b>	<b>BUDGET</b>
<b>A.</b>	<b>Plan &amp; Profile Sheets</b>	
3	Driveway Permit from TxDOT	\$ 2,884.50
4	Bidding Phase	\$ 3,786.00
5	Construction Phase Services	\$ 5,971.50
6	Direct Cost	\$ 300.00
	<b>SUBTOTAL</b>	<b>\$ 12,942.00</b>

<b>B.</b>	<b>Lift Station Design (KIT)</b>	
3	Bidding Phase	\$ 6,818.00
4	Construction Phase Services	\$ 23,784.00
	<b>SUBTOTAL</b>	<b>\$ 30,602.00</b>

	<b>TOTAL COST</b>	<b>\$ 43,544.00</b>
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# EXHIBIT B

### Exhibit B - Remaining Budget for the Lift Station Design

	TASK DESCRIPTION	BUDGETED	REDUCTION AMOUNT
<b>X.</b>	<b>Utility Design</b>		
C	Lift Station Design	\$ 10,716.00	\$ 535.80
	<b>SUBTOTAL</b>	<b>\$ 10,716.00</b>	<b>\$ 535.80</b>
<b>A.</b>	<b>Plan &amp; Profile Sheets</b>		
1	Design 6" FM	\$ 5,520.00	\$ 276.00
2	Revise LS Site Layout	\$ 8,706.00	\$ 435.30
	<b>SUBTOTAL</b>	<b>\$ 14,226.00</b>	<b>\$ 711.30</b>
<b>B.</b>	<b>Lift Station Design (KIT)</b>		
1	Project Administration & Coordination	\$ 23,385.00	\$ 4,677.00
2	Design & Plan Preparation	\$ 55,999.00	\$ 11,199.80
	<b>SUBTOTAL</b>	<b>\$ 79,384.00</b>	<b>\$ 15,876.80</b>
	<b>Total Reduction</b>		<b>\$ 17,123.90</b>

# CERTIFICATE OF INTERESTED PARTIES

FORM 1295

1 of 1

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.**  
 IDCUS Inc.  
 Houston, TX United States

**Certificate Number:**  
 2022-886448

**Date Filed:**  
 05/16/2022

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

**Date Acknowledged:**  
 05/24/2022

**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.**  
 SOQ 09-072  
 Amendment #7 to WA #3 and #4; Park and Ride Facility Planning & Consulting Services

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)