

MASTER RESEARCH AGREEMENT
Between
TEXAS A&M TRANSPORTATION INSTITUTE
And
FORT BEND COUNTY
SECOND AMENDMENT
TO
WORK AUTHORIZATION NO. 1

This Second Amendment to Work Authorization No. 1 ("Work Authorization") is entered into by and between **Fort Bend County**, a political subdivision of the State of Texas ("County"), and the **Texas A&M Transportation Institute**, a member of The Texas A&M University System ("System") and an agency of the State of Texas, having its principal place of business at 400 Harvey Mitchell Parkway South, Suite 300, College Station, Texas 77845 (hereinafter referred to as "TTI").

WHEREAS, County and TTI entered into a Master Research Agreement ("Agreement") effective as of November 5, 2020, whereby except as otherwise specified herein, the terms and conditions of the Agreement are incorporated by reference into Work Authorization No.1 effective as of February 14, 2023, the First Amendment to Work Authorization No. 1 executed on August 22, 2023, and this Second Amendment to Work Authorization No. 1; and

WHEREAS the parties wish to amend Work Authorization No.1.

NOW, THEREFORE, the Parties hereto agree as follows:

1. Period of Performance. The parties agree to extend the Period of Performance as follows:

The research shall be conducted during the period from February 14, 2023, through May 31, 2024, and will be subject to extension only by mutual written agreement of both parties.

2. Reports. TTI shall submit reports to County in accordance with Exhibit 1, attached hereto and incorporated herein by reference.
3. This Second Amendment to Work Authorization No. 1 does not waive the parties' responsibilities and obligations provided under the Agreement. Except as modified herein, the Agreement remains in full force and effect and has not been modified or amended.

(Execution Page Follows)

(Remainder of Page Intentionally Left Blank)

IN WITNESS WHEREOF, the parties have caused this Second Amendment to Work Authorization No.1 to be executed by their authorized representative.

FORT BEND COUNTY

KP George
KP George, County Judge

3/26/2024
Date

ATTEST:

Laura Richard
Laura Richard, County Clerk



Reviewed by:
Perri D'Armond
Perri D'Armond
Public Transportation Director

TEXAS A&M TRANSPORTATION INSTITUTE

Digitally signed by
Lesli Kerth
Date: 2024.02.16
18:44:25 -06'00'
Lesli Kerth
Authorized Agent- Signature
Lesli Kerth
Authorized Agent- Printed Name
Associate Director TA
Title
2/16/2024
Date

AUDITOR'S CERTIFICATE

I hereby certify that funds are available in the amount of \$ 70,100.00 to accomplish and pay the obligation of Fort Bend County under this contract.

Robert Ed Sturdivant
Robert Ed Sturdivant, County Auditor

Exhibit 1: Report Submission Due Dates

EXHIBIT 1

REPORT		DUE DATE
WA6-D1	Subtask 4: Technical Memorandum	February 29, 2024
WA6-D3	Subtask 8: Deliverables Package	May 31, 2024

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.

Texas A&M Transportation Institute
College Station, TX United States

Certificate Number:
2024-1125440

Date Filed:
02/19/2024

Date Acknowledged:
03/26/2024

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

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.

16348

TTI will assist Fort Bend Count in re-assessing how the Westpark park-and-ride lot will support the county's transit needs.

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)