

# Legislation Details (With Text)

File #:	21-1	156	Version:	1	Name:		
Туре:	Agre	ement			Status:	Passed	
File created:	3/23/	/2021			In control:	Commissioners Court	
On agenda:	3/30/	/2021			Final action:	3/30/2021	
Title:	Inc., the o	to provide original 30 <sup>.</sup>	e engineerir + year old v	ng ser vater	vices in support	g services agreement with Infrasti of the design of the water supply the HCTRA administration buildi nct 4.	pipe replacement fo
Sponsors:							
Indexes:							
Code sections:							
Attachments:	1. 21-1156 Agrmt-Infrastructure Associates, Incpdf, 2. 21-1156 Cover Sheet-Infrastructure Associates, Incpdf						
Date	Ver.	Action By	,		Act	ion	Result
	1	0	sioners Cou	urt			

То:	Harris County Commissioners Court
Through:	Director Name, Title, Department
Prepared By:	Name, Title, Department

Subject: Title of the Item Project ID (If applicable]:

## **Purpose and Request:**

Recommendation for approval of an engineering services agreement with Infrastructure Associates, Inc., to provide engineering services in support of the design of the water supply pipe replacement for the original 30+ year old water supply system at the HCTRA administration building at 7701 Wilshire Place Drive, in the amount of \$235,000 in Precinct 4.

#### Background and Discussion:

[INSTRUCTIONS: In this section should concisely provide any background and analysis that the Commissioners Court needs to fully understand the action being requested. Please limit background to 3-4 sentences and include any reference to when this item was previously considered by Court. Background should include reference to study or order that led to this item or if the item is a result of compliance with any specific law or statutory requirements.]

#### Fiscal Impact:

[INSTRUCTIONS: A short description of the cost of the request and where you are requesting funding from. No more than 2 sentences. In addition please fill out the table below. This includes financial impact to the current fiscal year and subsequent fiscal years along with the source of funding (general fund, grant, etc.). If the amount is within the current budget, please indicate the amount from 'Existing Department Budget'. If all of or part of the request is a new expense, please indicate funding source in the space provided.]

Expenditures	FY 20-21	FY 21-22 Projected	Future Years Projected [3 additional years]
Service Impacted: [Plea division where expenditu			
Existing Budget			
Additional Appropriation I			
otal Expenditures			
Funding Sources			
Existing Department Bud	ç		
Please Identify Funding S Special Revenue, Grant,	b E		
INSERT FUNDING SOU	l		
Fotal Sources			

## Alternatives:

[INSTRUCTIONS: In this section you should briefly discuss any viable alternatives, including the benefits and consequences of each. Include subtitles on the first line of each alternative to identify it. If appropriate, the financial impact of each alternative can be discussed. If taking no action is a viable alternative it should also be discussed, including any financial or other impacts that would result.]

### Alignment with Strategic Objective:

[INSTRUCTIONS: Please write out the Department Strategic Objective impacted by this item.]

#### Attachments:

[INSTRUCTIONS: Please include a list of backup for this item with a short description of each if more than one.]