

# Harris County, Texas

# **Legislation Text**

File #: 21-6428, Version: 1

**Department:** County Engineer

**Department Head/Elected Official:** Loyd Smith, P.E., Interim County Engineer

Regular or Supplemental RCA: Regular RCA

Type of Request: Report

Project ID (if applicable): UPIN 181033954829

**Vendor/Entity Legal Name** (if applicable): GC Engineering, Inc.

MWDBE Participation (if applicable): N/A

#### Request Summary (Agenda Caption):

Request for approval of a study report prepared by GC Engineering, Inc. for Clay Road 4-1,000' West of Katy Hockley Cut Off Road to 4500' West of Porter Road, UPIN 181033954829, Precinct 3.

## **Background and Discussion:**

ATN and PSA were previously submitted to court to negotiate with and to start working with GC Engineering, Inc. on the study for Clay Road 4-1,000' West of Katy Hockley Cut Off Road to 4500' West of Porter Road, Precinct 3.

#### **Expected Impact:**

The project will address current and future traffic volumes, reduce delays, provide connectivity to schools and neighborhood destinations, improve safety for pedestrians and motorists, improve roadway conditions, and reduce potential of structural flooding with drainage improvements.

Alternative Options: N/A

#### Alignment with Goal(s):

- \_ Justice and Safety
- **Economic Opportunity**

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- \_ Housing
- \_ Public Health
- x Transportation
- \_ Flooding
- \_ Environment
- \_ Governance and Customer Service

# Prior Court Action (if any):

Date	Agenda Item #	Action Taken	
2/27/2018		Contract Award	
2/12/2019		First Contract Amendment for additional funds	
8/27/2019		Second Contract Amendment for additional funds	

## Location:

Address (if applicable): Clay Road 4-1,000' West of Katy Hockley Cut Off Road to 4500' West of Porter Road

Precinct(s): Precinct 3

Fiscal and Personnel Summary			
Service Name			
	FY 21-22	FY 22	Next 3 FYs
Incremental Expenditures (do <mark>NOT</mark> w	rite values in tho	usands or millions	s)
Labor Expenditures	\$	\$	\$
Non-Labor Expenditures	\$	\$	\$
Total Incremental Expenditures	\$	\$	\$
Funding Sources (do NOT write value	s in thousands o	r millions)	•
Existing Budget			
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Total Current Budget	\$	\$	\$
Additional Budget Requested	•		•
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Choose an item.	\$	\$	\$
Total Additional Budget Requested	\$	\$	\$
Total Funding Sources	\$	\$	\$

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Current Position Count for Service	-	-	-
Additional Positions Requested	-	-	-
Total Personnel	-	-	-

Anticipated Implementation Date: November 30, 2021

Emergency/Disaster Recovery Note: Not an emergency, disaster, or COVID-19 related item

Contact(s) name, title, department: Nawaraj Panta, Project Manager, HCED

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Attachments (if applicable): Study Report