

HILLSBOROUGH COUNTY AVIATION AUTHORITY

AMENDMENT NO. 1 TO

MAINTENANCE CONTRACT FOR YORK CHILLERS

AT TAMPA INTERNATIONAL AIRPORT

JOHNSON CONTROLS, INC.

Board Date: February 2, 2023

HILLSBOROUGH COUNTY AVIATION AUTHORITY
 AMENDMENT NO. 1 TO
 MAINTENNACE CONTRACT FOR YORK CHILLERS

THIS AMENDMENT NO. 1 to the Maintenance Contract for York Chillers dated October 5, 2017, by and between Hillsborough County Aviation Authority, a public body corporate under the laws of the State of Florida (Authority), and Johnson Controls, Inc. (Company), is entered into this 2 day of February 2023.

WITNESSETH:

WHEREAS, on October 5, 2017, Authority and Company entered into the Maintenance Contract for York Chillers to provide certain routine and preventative maintenance; and

WHEREAS, Authority has exercised the one, five-year period revising the end date of the Contract to October 4, 2027; and

WHEREAS, Authority and Company desire to update the fees and payments section as a result of an increase in required labor, materials, sub-contract, and miscellaneous costs, at their current commercial value; and

NOW, THEREFORE, for and in consideration of the sum of Ten Dollars (\$10.00) and other valuable consideration, the receipt and sufficiency whereof are hereby acknowledged, the parties do agree that the Contract is amended as follows:

1. Delete ARTICLE 4, FEES AND PAYMENTS, Section 4.01 Payment and Paragraph A, in its entirety and replaced with

4.01 Payment

Authority agrees to pay Company for the maintenance services described herein, \$13,560.99 per month for year six of this Contract. Each year thereafter, the per month price will be adjusted as described in Paragraph A below. The Authority reserves the right to add or delete equipment by letter to Company without formal amendment to this Contract.

Location	Type	Model Number	Serial No.	Chiller Type	Tons	FY23
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Airside C	Comfort	YKGCFBH7CWFS	SGNM412860	Centrifugal	800	\$1,857.96
	Comfort	YKGCFBH7CWFS	SGNM-412990	Centrifugal	800	\$1,857.96
	Precon Air	YRXCXBT2-46A5	SGNM-399040	Screw	200	\$1,495.34

	Precon Air	YRXCXBT2-46A5	SGNM-399160	Screw	200	\$1,495.34
Airside C	Water Treatment					\$1,770.39
Airside F	Precon Air	YSCACAS2-CJDS	SAJM793260	Screw	150	\$2,542.00
	Precon Air	YSCACAS2-CJDS	SAJM793120	Screw	150	\$2,542.00
Monthly Total					2300	\$13,560.99
					Yearly	\$162,731.90

- A. The amount payable monthly to Company for maintenance services during the period of this Contract including the term of the renewal option will be adjusted annually for year seven of this Contract as approved Authority and in accordance with the Labor Adjustment Index and the Material Adjustment Index. For the purpose of adjustment, the labor and Materials Adjustment Components, are accepted as fifty percent (50%) each at the commencement of this Contract.
2. Except as provided herein, all other terms and conditions of the Contract remain in full force and effect and are hereby ratified and confirmed. The Contract and this Amendment No. 1 represent the entire understanding between the parties on the issues contained herein, either written or oral, and may only be amended by written instrument signed by both parties.

IN WITNESS WHEREOF, the parties hereto have set their hands and corporate seals on this _____ day of February 20__.

**HILLSBOROUGH COUNTY AVIATION
AUTHORITY**

ATTEST: _____
Jane Castor, Secretary

BY: _____
Gary W. Harrod, Chairman

Address: PO Box 22287
Tampa FL

Address: PO Box 22287
Tampa FL

WITNESS: _____
Signature

Printed Name

Approved as to form for legal sufficiency:
BY: _____
Elita McMillon, Assistant General Counsel

HILLSBOROUGH COUNTY AVIATION AUTHORITY
STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this _____ day of _____, 2023, by Gary W. Harrod, in the capacity of Chairman of the Board of Directors, and Jane Castor, in the capacity of Secretary of the Board of Directors, HILLSBOROUGH COUNTY AVIATION AUTHORITY, an independent special district under the laws of the State of Florida, on its behalf. They are personally known to me and they did not take an oath.

Stamp or Seal of Notary

Signature of Notary

Printed Name

Date Notary Commission Expires (if not on stamp or seal)

JOHNSON CONTROLS, INC.

Signed in the Presence of:

BY:

Witness

Printed Name

Witness

Printed Name

Signature

Title

Printed Name

Printed Address

City/State/Zip

JOHNSON CONTROLS, INC.

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 2023, by

_____ in the capacity of _____,
(Individual's Name) (Individual's Title)

at _____, a _____, on its behalf _____
(Company Name) (He is / She is)

_____ known to me and has produced _____
(Personally / Not Personally) (Form of Identification)

Stamp or Seal of Notary

Signature of Notary

Printed Name

Date Notary Commission Expires (if not on stamp or seal)