



MARION COUNTY BOARD OF COMMISSIONERS

Board Session Agenda Review Form

Meeting date: April 10, 2019

Department: Business Services Agenda Planning Date: April 4, 2019 Time required: 10

Audio/Visual aids

Contact: Larry Tilford, Ryan Matthews, Cary Moller Phone: X7164

Department Head Signature: 

TITLE	Health and Human Services Building "F" Lease Amendment 1 for the completion of tenant improvement and taking possession of the space.
Issue, Description & Background	Health and Human Services Children Services Programs
Financial Impacts:	The Tenant improvement cost paid in a lump sum \$174,975.32
Impacts to Department & External Agencies	No impacts to other departments outside of Business Services.
Options for Consideration:	1. Approve the Lease Amendment for Pioneer Trust Bank, Trustee for Salem Foundation 2. Withold approval of the Lease Amendment for the Pioneer Trust Bank, Trustee for Salem Foundation
Recommendation:	Approval of the Lease Amendment and related tenant improvements.
List of attachments:	Pioneer Trust Lease Amendment 1
Presenter:	Larry Tilford, Ryan Matthews

Copies of completed paperwork sent to the following: (Include names and e-mail addresses.)

Copies to: Tina Toney, Business Services ttoney@co.marion.or.us



Contract Review Sheet

Contract #: HE-2414-18

Person Sending: Tina Toney

Department: Business Services

Contact Phone #: x4388

Date Sent: Friday, February 22, 2019

Contract Amendment # 1 Lease IGA MOU Grant (attach approved grant award transmittal form)

Title: Health Lease Agreement for Wolverine Bldg F

Contractor's Name: Pioneer Trust Bank, N.A., Trustee for the Salem Foundation

Term - Date From: November 1, 2018

Expires: June 30, 2021

Contract Total: \$366,290.00

Amendment Amount: \$174,975.32

New Contract Total: \$541,265.32

Source Selection Method: Exemption (identify rule/statute)

50-0600

Additional Considerations (check all that apply)

Board Order# _____

Feasibility Determination (attach approved form)

Incoming Funds

Federal Funds (attach sub-recipient / contractor analysis)

Independent Contractor (LECS) approval date: _____

Reinstatement (attach written justification)

Insurance Waiver (attach)

Retroactive (attach written justification)

CIP# _____ (required for all goods /software greater than \$5,000)

Description of Services or Grant Award:

Lease amendment 1 for tenant improvement costs at 3867 Wolverine NE, Building F, Salem OR

Marion County Health Department shall pay Landlord in a one lump sum \$174,975.32 for full reimbursement of tenant improvement expenses as outlined in Exhibit "D"

FOR FINANCE USE

Date Finance Received: _____

BOC Planning Date: _____

Date Legal Received: _____

Comments: _____

REQUIRED APPROVALS:

Finance - Contracts

Date

Risk Manager

Date

Legal Counsel

Date

Chief Administrative Officer

Date

Date _____

To be filed

Added to master list

Returned to _____ Department for _____ signatures

LEASE AGREEMENT

AMENDMENT 1

HE-2414-18

THIS AGREEMENT is entered this 1st day of November, 2018, between PIONEER TRUST BANK, N.A. TRUSTEE FOR THE SALEM FOUNDATION thereafter referred to as "Landlord", and MARION COUNTY, a political subdivision of the State of Oregon, by and thru the Health Department, hereinafter referred to as "Tenant":

The Lease is hereby amended as follows (new language is indicated by underlining and deleted language is indicated by brackets []):

AGGREEMENT:

2. Term. The term of this Lease shall be for the term [November 1, 2018] January 19, 2019. The Tenant's right to possess and obligations under the lease shall continue beginning January 19, 2019.
- [3] 4. Possession. Tenant's right to possession and obligations under the lease shall continue beginning [November 1, 2018] January 19, 2019.
5. Rent. Rent shall be payable on the first day of each month in advance at such place as may be designated by Landlord. During the term of this lease and any extension or renewal period, tenant shall pay to landlord as rent the following amounts.
 - a. Base Rent is \$6,700.00 per month, beginning February 1, 2019. Tenant shall pay prorated rent in the amount of \$2,863.56 for the period of January 19, 2019 through January 31, 2019.
 - b. Additional Rent. Landlord agrees to construct tenant improvement in the Premises pursuant to Exhibit "B Floor Plan" using the standard finishes for the office complex. The total cost of this improvement is estimated at [~~\$246,613.68~~] \$287,195.68. The improvement is at Landlord expense but Tenant agrees to reimburse Landlord for an estimated [~~\$159,848.57~~] \$174,975.32. [~~for an estimated~~] in one lump sum, the entire \$174,975.32 as full reimbursement of tenant improvement expenses as identified in "Exhibit C Revised Cost Plan".
 - [b] c. Escalation. On [November 1, 2019] January 1, 2020 and each [November 1st] January 1st there after the Base Rent shall be increased by two percent (2%) over the prior year.

Remainder of this Page Intentionally Left Blank

MARION COUNTY SIGNATURE

BOARD OF COMMISSIONERS:

Chair Date

Commissioner Date

Commissioner Date

Authorized Signature: _____
Department Director or designee Date

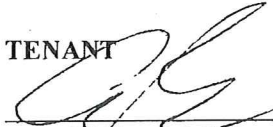
Authorized Signature: _____
Facilities Program Manager Date


Authorized Signature: _____
Chief Administrative Officer Date

Reviewed by Signature: _____
Marion County Legal Counsel Date

Reviewed by Signature: _____
Marion County Contracts & Procurement Date

TENANT


Cary Moller, Administrator Date 3/22/19

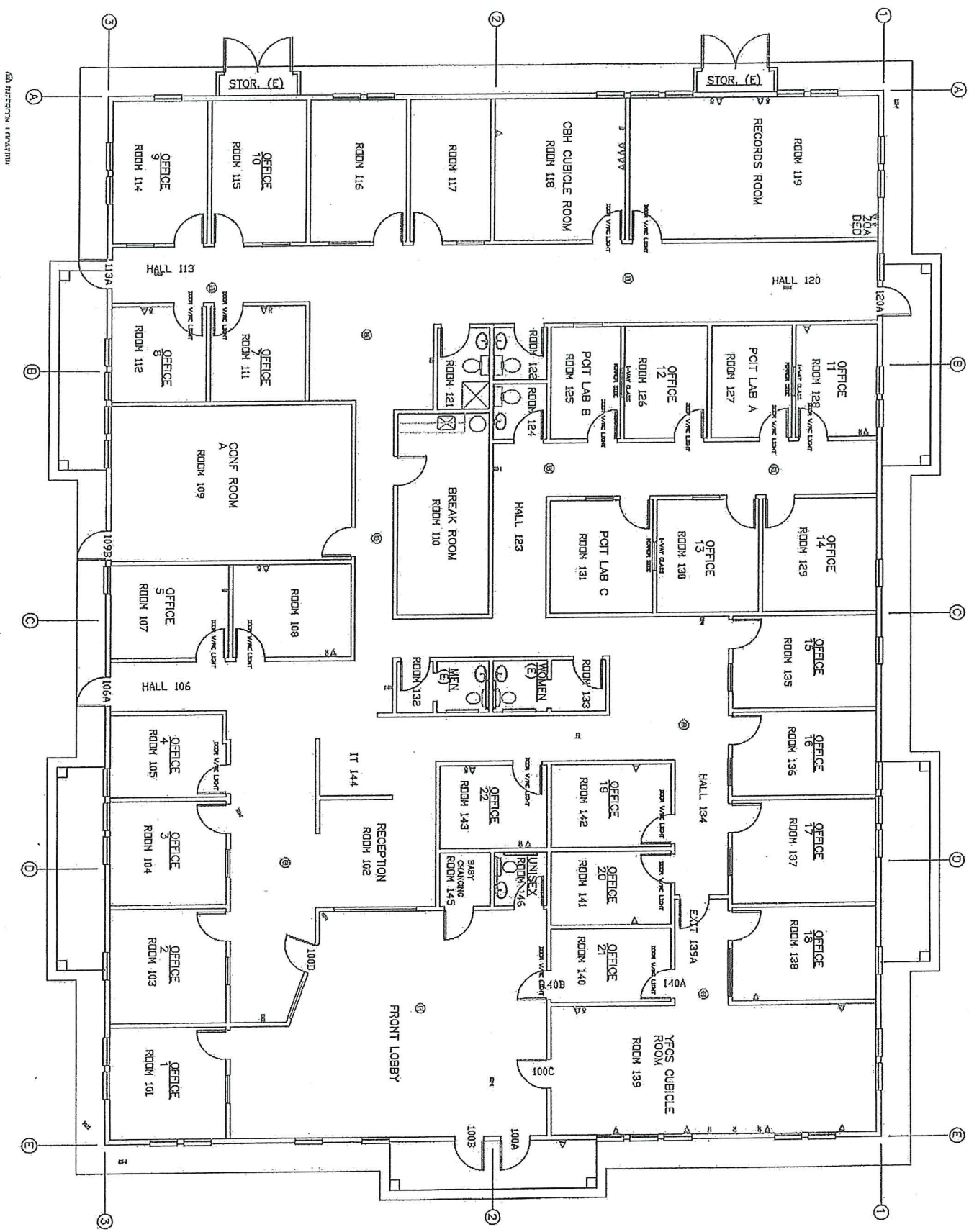

Jeremiah Elliott, Sr. Admin Srvs. Mgr. Date 3/22/19

LANDLORD:

PIONEER TRUST BANK, N.A., TRUSTEE
SALEM FOUNDATION

BY: 
PROPERTY MANAGER

EXHIBIT C



620 INTERIOR FINISH

EXHIBIT C - REVISED

Actual Pricing Sheet - Village - Bldg F - Marion County Health

Description	QTY	Bid		Estimated		Actual		Difference	
		Total W/O&P	Tenant	Landlord	Total W/O&P	Tenant	Landlord	Tenant	Landlord
Supervision and Coordination	8	\$ 15,844.00	\$ 9,982.00	\$ 5,862.00	\$ 37,186.80	\$ 23,428.00	\$ 13,758.80	\$ -	\$ -
Superintendent	8	\$ 21,342.80	\$ 13,446.00	\$ 7,896.80					
Demo	1	\$ 10,019.00	\$ 10,019.00		\$ 10,019.00	\$ 10,019.00		\$ -	
Framing	1	\$ 5,242.50	\$ 5,242.50		\$ 5,242.50	\$ 5,242.50		\$ -	
Insulation	1	\$ 2,330.00	\$ 2,330.00		\$ 2,330.00	\$ 2,330.00		\$ -	
Drywall	1	\$ 8,562.75	\$ 8,562.75		\$ 8,562.75	\$ 8,562.75		\$ -	
New Ceiling Tile in Existing Grid	1	\$ 18,640.00		\$ 18,640.00	\$ 18,640.00		\$ 18,640.00		\$ -
Painting Throughout incl new Doors	1	\$ 28,393.38		\$ 28,393.38	\$ 28,393.38		\$ 28,393.38		\$ -
Electrical	1	\$ 10,135.50	\$ 10,135.50		\$ 10,135.50	\$ 10,135.50		\$ -	
LED Retrofit Kits	130				\$ 25,455.25		\$ 25,455.25		\$ (25,455.25)
Add 10 - 2 - x 2' LED Troffers as needed	1	\$ 2,796.00	\$ 2,796.00		\$ 2,796.00	\$ 2,796.00		\$ -	
Plumbing	1	\$ 2,196.03	\$ 2,196.03		\$ 2,196.03	\$ 2,196.03		\$ (0.01)	
HVAC	1	\$ 7,572.50	\$ 7,572.50		\$ 7,572.50	\$ 7,572.50		\$ -	
Low Voltage	1	\$ 11,731.55	\$ 11,731.55		\$ 11,731.55	\$ 11,731.55		\$ -	
Exterior Doors and Infills	8	\$ 6,249.99	\$ 6,249.99		\$ 6,249.99	\$ 6,249.99		\$ 0.00	
Interior Doors and Trim	19	\$ 10,434.44	\$ 10,434.44		\$ 10,434.44	\$ 10,434.44		\$ (0.00)	
Carpet/Vinyl and Base	1	\$ 25,972.93		\$ 25,972.93	\$ 25,972.93		\$ 25,972.93		\$ (0.00)
Bathroom Dispenser	6	\$ 2,748.47	\$ 2,748.47		\$ 2,748.47	\$ 2,748.47		\$ (0.00)	
ADA Hardware	6	\$ 1,350.47	\$ 1,350.47		\$ 1,350.47	\$ 1,350.47		\$ (0.00)	
One way Windows	3	\$ 2,196.96	\$ 2,196.96		\$ 2,196.96	\$ 2,196.96		\$ (0.00)	
Misc Labor and Materials	8	\$ 17,968.96	\$ 17,968.96		\$ 17,968.96	\$ 17,968.96		\$ -	
Toilets	3	\$ 961.13	\$ 961.13						
Dumpsters	6	\$ 5,751.37	\$ 5,751.37		\$ 9,430.20	\$ 9,430.20		\$ 0.01	
Final Cleaning	1	\$ 2,717.71	\$ 2,717.71						
Change Order 1 - Drywall					\$ 474.00	\$ 474.00		\$ (474.00)	
Change Order 1 - Door					\$ 252.00	\$ 252.00		\$ (252.00)	
Change Order 2 - Low Voltage					\$ 35,946.00	\$ 35,946.00		\$ (35,946.00)	
Change Order 3 - Low Voltage Certifications					\$ 3,910.00	\$ 3,910.00		\$ (3,910.00)	
		\$ 221,158.43	\$ 134,393.32	\$ 86,765.11	\$ 287,195.68	\$ 174,975.32	\$ 112,220.36	\$ (40,582.00)	\$ (25,455.25)