



Item 4D.  
BCWMC 12-21-17  
Original agreement online

**METROPOLITAN COUNCIL**  
390 North Robert Street, St. Paul, MN 55101-1805  
(651) 602-1000

**AMENDMENT NUMBER ONE**  
to  
**COOPERATIVE AGREEMENT**  
**Metropolitan Council Contract No. 151071**

**Bassett Creek Watershed Management Commission** and the **Metropolitan Council (“COUNCIL”)** agree that the contract entered into on October 1, 2015, relating to “Agreement for Reimbursement of Staff Time,” is amended in the following particulars.

**1. II. COMPENSATION, METHOD OF PAYMENT**

**2.01 Maximum Total Compensation** is deleted and the following inserted in its place.

**“MAXIMUM TOTAL COMPENSATION.** The maximum total compensation to be paid to the to BCWMC for work performed under this Agreement must not exceed \$45,000:

- A. \$30,000 pursuant to the contract, as originally executed; and
- B. \$45,000 pursuant to Amendment Number One.”

**2. III. GENERAL TERMS**

**3.01 Term and Termination** is deleted and the following inserted in its place:

**“3.01 Term and Termination.** This Agreement is effective as of June 29, 2015 and will terminate on the earlier of December 31, 2019 or the date that all obligations have been satisfactorily fulfilled. This Agreement may be terminated upon 30 days’ written notice by either Party, or immediately upon mutual agreement of the Parties. Termination of this agreement will not relieve the Council from its obligation to reimburse the SCWMC for its actual costs up to the effective date of the termination.

The termination date of this contract:

- A. as originally executed was December 31, 2017; and
- B. is extended to December 31, 2019, by Amendment Number One.”

Except as amended hereby, the provisions of the above-referenced contract shall remain in force and effect without change.

**IN WITNESS WHEREOF**, the parties have caused this amendment to be executed by their duly authorized officers on the dates set forth below.

**BASSETT CREEK WATERSHED  
MANAGEMENT COMMISSION**

**METROPOLITAN COUNCIL**

By: \_\_\_\_\_  
(Please print name legibly below)

By: \_\_\_\_\_  
Daniel Soler

Its: \_\_\_\_\_

Its: Assist. General Mgr. TSD-BLRT

Date: \_\_\_\_\_

Date: \_\_\_\_\_