



BOARD OF SUPERVISORS  
AGENDA LETTER

Agenda Number:

Clerk of the Board of Supervisors  
105 E. Anapamu Street, Suite 407  
Santa Barbara, CA 93101  
(805) 568-2240

Submitted on: SEP 14 PM 3:22  
(COB Stamp)

COUNTY OF SANTA BARBARA  
CLERK OF THE BOARD OF SUPERVISORS

Department Name: County Executive Office  
Department No.: 990  
For Agenda Of: 9/26/06  
Placement: Administrative  
Estimate Time:  
Continued Item: NO  
If Yes, date from:  
Vote Required Majority

0926-25

**TO:** ☐ Board of Directors, Redevelopment Agency

**FROM:** Department Director: Michael F. Brown, Executive Director, Redevelopment Agency  
Contact Info: Terri Maus-Nisich, Assistant County Executive Officer  
Jamie Goldstein, Deputy Director, Redevelopment Agency  
884-8053

**SUBJECT:** Extend contract with P & D Consultants to revise the Isla Vista Master Plan

**County Counsel Concurrence:**

As to form/legality: ☐ Yes ☐ No ☒ N/A

**Auditor-Controller Concurrence:**

As to form: ☐ Yes ☐ No ☒ N/A SEP 26 2006

**Recommended Action(s):**

That the County of Santa Barbara Redevelopment Agency Board of Directors authorize the Chair to execute a contract amendment with P&D Consultants to extend the contract termination date to November 30, 2006, to provide additional time to complete the project.

**Summary:**

The Board appropriated funding in the 2005-2006 budget to provide services to revise the Isla Vista Master Plan. The services include information gathering such as, but not limited to, proposed zoning codes, draft EIR, Local Coastal Plan, maps, workshops, and public hearings. The original contract was approved by this Board on October 4, 2005. The implementation of the contract has been delayed to allow staff time to complete additional analysis of project alternatives during the environmental impact report (EIR) process. The County Executive Office recommends the Board approve the contract extension to November 30, 2006 to allow proper review and coordination with other County Agencies to finalize the Isla Vista Master Plan.

**Background:**

This item is on the agenda to extend the existing contract to allow further work on the Isla Vista Master Plan. In 1990, the Santa Barbara County Board of Supervisors adopted the Isla Vista Redevelopment Plan. The primary Redevelopment Plan goals were to remedy, remove and prevent physical blight and economic obsolescence; encourage housing rehabilitation; develop public infrastructure improvements; increase open space; protect environmentally sensitive areas; address infrastructure issues; and construct public facilities.

Since 2000, staff have worked with the community, the Isla Vista Project Area Committee/General Plan Advisory Committee, the University of California Santa Barbara, and Isla Vista Recreation and Parks District to prepare the Isla Vista Master Plan.

On October 4, 2005, the Board approved a contract for \$201,800 between the County of Santa Barbara Redevelopment Agency and P&D Consultants to provide support for the various procedures and processes required for the Isla Vista Master Plan revision. The support will be to the Redevelopment Agency Staff at public hearings, meetings with the Planning Commission, Board of Supervisors' workshops and public hearings, and meetings with the California Coastal Commission prior to drafting the final IV Master Plan and Design Guidelines.

**Fiscal and Facilities Impacts:**

Funds for this contract have been appropriated and are available in Fund 3100, Department 990, Program 4075, Account 7460.

Budgeted: ☒ Yes    ☐ No

**Fiscal Analysis**

<u>Funding Sources</u>	<u>Current FY Cost:</u>	<u>Annualized Cost:</u>	<u>Total Project Cost</u>
General Fund	\$0.00	\$0.00	\$0.00
State	\$0.00	\$0.00	\$0.00
Federal	\$0.00	\$0.00	\$0.00
Fees	\$0.00	\$0.00	\$0.00
Other: Property Tax	\$178,770.00	\$0.00	\$201,800.00
Other:	\$0.00	\$0.00	\$0.00
Total:	\$178,770.00	\$ 0.00	\$201,800.00

Narrative: No change is made in contract maximum. Current year cost is based on contract balance available after payments for work performed in fiscal year 2005-06.

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**Staffing Impact(s):**

**Legal Positions:**

**FTEs:**

N/A.

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**Special Instructions:**

Please send two copies of the fully executed contract and minute order to Jette Christiansson, CEO's office.

**Attachments: (list all)**

Attachment 1: Amendment 1.

Attachment 2: Agreement for services of P&D Consultants

**Authored by:** Jette Christiansson, Business Manager, CEO, 568-3403  
Jamie Goldstein, Deputy Director, Isla Vista Redevelopment Agency

**cc:**

## AMENDMENT 2006-2008

### TO AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR

This is an amendment (hereafter referred to as the "Amended Contract") to the Agreement for Services of Independent **CONTRACTOR**, number **BC06099**, by and between the **County of Santa Barbara Redevelopment Agency (AGENCY)** and **P&D Consultants (CONTRACTOR)**, for the continued provision of **Isla Vista Master Plan and Guidelines revision**.

Whereas, **AGENCY** intends to extend the term of the existing contract through November 30, 2006 and to compensate **CONTRACTOR** for the services to be provided during those Fiscal Years; and

Whereas, this Amended Contract incorporates the terms and conditions set forth in the original contract, approved by the **County of Santa Barbara Redevelopment Agency** Board of Directors on October 4, 2005, except as modified by this Amended Contract;

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, **AGENCY** and **CONTRACTOR** agree as follows:

**I. Delete Item 4, TERM, of the Agreement and replace with the following:**

- 4. TERM. CONTRACTOR** shall commence performance on **November 1, 2005**, and end performance upon completion, but no later than **November 30, 2006**, unless otherwise directed by **AGENCY** or unless earlier terminated.

AMENDMENT 2006-2008

SIGNATURE PAGE

Amended Contract for Services of Independent Contractor between the County of Santa Barbara and **P&D Consultants** for FY 2006-2007.

**IN WITNESS WHEREOF**, the parties have executed this Amended Contract to be effective July 1, 2006.

COUNTY OF SANTA BARBARA

By: \_\_\_\_\_  
Chair, Board of Directors

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

ATTEST:  
MICHAEL F. BROWN  
EXECUTIVE DIRECTOR

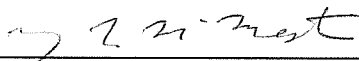
CONTRACTOR:  
P&D CONSULTANTS

By: \_\_\_\_\_  
Deputy

By: \_\_\_\_\_  
Tax ID No. 95-4473104

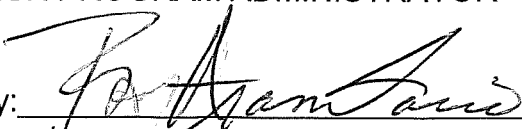
APPROVED AS TO FORM:  
STEPHEN SHANE STARK  
AGENCY COUNSEL

APPROVED AS TO FORM:  
ROBERT W. GEIS, CPA  
TREASURER

By:  \_\_\_\_\_  
Deputy Agency Counsel

By:  \_\_\_\_\_  
Deputy

APPROVED AS TO INSURANCE  
FORM:  
RAY AROMATORIO  
RISK PROGRAM ADMINISTRATOR

By:  \_\_\_\_\_  
Deputy

Contract Summary Form:

Contract Number :

BC06099

Complete data below, print, obtain signature of authorized departmental representative, and submit this form (and attachments) to the Clerk of the Board (>\$100,000). If less than (<\$100,000) submit a Purchasing Requisition to the Purchasing Division of General Services. See "online purchasing manual" under General Services, Purchasing, Policies and Procedures. Form not applicable to revenue contracts.

D1. Fiscal Year ..... : FY 06-07  
 D2. Budget Unit Number (plus -Ship/-Bill codes in paren's) :  
 D3. Requisition Number ..... :  
 D4. Department Name ..... : Redevelopment Agency  
 D5. Contact Person ..... : Jamie Goldstein  
 D6. Phone ..... : 884-8053

K1. Contract Type (check one): ☒ Personal Service ☐ Capital Project/Construction

K2. Brief Summary of Contract Description/Purpose :

K3. Original Contract Amount ..... : \$201,800

K4. Contract Begin Date ..... : November 1, 2005

K5. Original Contract End Date ..... : June 30, 2006

K6. Amendment History (leave blank if no prior amendments):

Seq#	Effective Date	This Amndt	Amt Cum	Amndt To	Date New	Total Amt	New End Date	Purpose (2-4 words)
	June 30, 2006		\$	\$	\$		November 30, 2006	Extend Contract

K7. Department Project Number ..... :

B1. Is this a Board Contract? (Yes/No) ..... :

B2. Number of Workers Displaced (if any) ..... :

B3. Number of Competitive Bids (if any) ..... :

B4. Lowest Bid Amount (if bid) ..... : \$

B5. If Board waived bids, show Agenda Date ..... :

B6. ... and Agenda Item Number ..... : #

B7. Boilerplate Contract Text Unaffected? (Yes / or cite ¶¶) : :

F1. Encumbrance Transaction Code ..... : 1701

F2. Current Year Encumbrance Amount ..... : \$178,770

F3. Fund Number ..... : 3100

F4. Department Number ..... : 990

F5. Division Number (if applicable) ..... :

F6. Account Number ..... :

F7. Cost Center number (if applicable) ..... :

F8. Payment Terms ..... : Net 30

V1. Vendor Numbers (A=uditor; P=urchasing) ..... : (A) 002889

V2. Payee/Contractor Name ..... : P&D Consultants

V3. Mailing Address ..... : 800 East Colorado Blvd, Suite 270

V4. City State (two-letter) Zip (include +4 if known) : Pasadena, CA 91101

V5. Telephone Number ..... : 626-304-0102

V6. Contractor's Federal Tax ID Number (EIN or SSN) : 95-4473-104

V7. Contact Person ..... :

V8. Workers Comp Insurance Expiration Date ..... :

V9. Liability Insurance Expiration Date[s] (G=enl; P=rofl) : :


V10. Professional License Number ..... : #

V11. Verified by (name of County staff) ..... : Tony Manuel

V12. Company Type (Check one): ☐ Individual ☐ Sole Proprietorship ☐ Partnership ☒ Corporation

I certify: information complete and accurate; designated funds available; required concurrences evidenced on signature page.

Date : Authorized Signature



9/13/06

CERTIFICATE NUMBER  
LOS-000485844-05

VALID AS OF: 04/01/06

DA Dewan

# ACORD CERTIFICATE OF INSURANCE

ISSUE DATE (MM/DD/YY)

3/31/2006

<b>PRODUCER</b>  Aon Risk Services, Inc. of Southern California 707 Wilshire Boulevard, Suite 6000 Los Angeles, California 90017 (213) 630-3200	DM	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW															
<b>COMPANIES AFFORDING COVERAGE</b>																	
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">COMPANY</td> <td style="width:10%;">LETTER</td> <td style="width:75%;">A Insurance Company of the State of Pennsylvania</td> </tr> <tr> <td>COMPANY</td> <td>LETTER</td> <td>B National Union Fire Insurance Company</td> </tr> <tr> <td>COMPANY</td> <td>LETTER</td> <td>C</td> </tr> <tr> <td>COMPANY</td> <td>LETTER</td> <td>D</td> </tr> <tr> <td>COMPANY</td> <td>LETTER</td> <td>E</td> </tr> </table>			COMPANY	LETTER	A Insurance Company of the State of Pennsylvania	COMPANY	LETTER	B National Union Fire Insurance Company	COMPANY	LETTER	C	COMPANY	LETTER	D	COMPANY	LETTER	E
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COMPANY	LETTER	D															
COMPANY	LETTER	E															
<b>CODE</b>  <b>INSURED</b>  P&D Consultants, Inc. Attn: Judy White 999 Town & Country Rd., 4th FL. Orange, CA 92868	<b>SUB-CODE</b>																

## COVERAGES

THIS IS TO CERTIFY THAT POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF SUCH POLICIES. THE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	ALL LIMITS IN THOUSANDS		
	<b>GENERAL LIABILITY</b> COMMERCIAL GENERAL LIABILITY CLAIMS MADE OCCURRENCE OWNERS & CONTRACTORS PROTECTIVE				GENERAL AGGREGATE PRODUCTS-COMP/OPS AGGREGATE PERSONAL & ADVERTISING INJURY EACH OCCURRENCE FIRE DAMAGE (ANY ONE FIRE) MEDICAL EXPENSE (ANY ONE PERSON)	\$	
	<b>AUTOMOBILE LIABILITY</b> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS GARAGE LIABILITY				CSL BODILY INJURY (PER PERSON) BODILY INJURY (PER ACCIDENT) PROPERTY DAMAGE		
	<b>EXCESS LIABILITY</b> UMBRELLA FORM OTHER THAN UMBRELLA FORM					EACH OCCURRENCE \$ \$	AGGREGATE \$ \$
A A B A A	<b>WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY</b>	WC4786252 (AOS) WC4786253 (CA) WC4786577 (WI,OH,WA,WY) WC4786254 (FL) WC4786576 (OR)	4/1/2006 4/1/2006 4/1/2006 4/1/2006 4/1/2006	4/1/2007 4/1/2007 4/1/2007 4/1/2007 4/1/2007	STATUTORY <input checked="" type="checkbox"/> \$ 1,000 (EACH ACCIDENT) \$ 1,000 (DISEASE POLICY LIMIT) \$ 1,000 (DISEASE EACH EMPLOYEE)		
	OTHER						

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/RESTRICTIONS/SPECIAL ITEMS:

PDCICA10284

RE: Isla Vista Master Plan

## CERTIFICATE HOLDER

County of Santa Barbara Redevelopment Agency  
 Attn: Jamie Goldstein, Deputy Director  
 105 East Anapamu Street, Room 303  
 Santa Barbara, CA 93105

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

*Aon Risk Services, Inc. of Southern California Insurance Services*