

Contract Number : BC-11-085

D1. Fiscal Year : FY 12-13
D2. Budget Unit Number (plus -Ship/-Bill codes in paren's): 054
D3. Requisition Number :
D4. Department Name : Water Agency
D5. Contact Person : Matt Naftaly
D6. Phone : 568-3542

K1. Contract Type (check one): [] Personal Service [] Capital Project/Construction
K2. Brief Summary of Contract Description/Purpose : engineering services
K3. Original Contract Amount : \$120,400
K4. Contract Begin Date : 04/19/11
K5. Original Contract End Date : 05/31/13

K6. Amendment History (leave blank if no prior amendments):
Table with columns: Seq#, Effective Date, This Amndt Amt, Cum Amndt To Date, New Total Amt, New End Date, Purpose (2-4 words)
Row 1: 1, 10/02/12, \$4,000, \$124,400, increase contract amount

K7. Department Project Number :
B1. Is this a Board Contract? (Yes/No) : yes
B2. Number of Workers Displaced (if any) : N/A
B3. Number of Competitive Bids (if any) : N/A
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 : \$
F3. Fund Number : 3050
F4. Department Number : 054
F5. Division Number (if applicable) : 07
F6. Account Number : 7460
F7. Cost Center number (if applicable) :
F8. Payment Terms : Net 30

V1. Vendor Numbers (A=uditor; P=urchasing) : 243526
V2. Payee/Contractor Name : Dudek
V3. Mailing Address : 605 Third Street
V4. City State (two-letter) Zip (include +4 if known) : Encinitas, CA 92024
V5. Telephone Number : (805) 963-0651
V6. Contractor's Federal Tax ID Number (EIN or SSN) :
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) :
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 [Signature] : [Signature]

**Amendment No. 1 to the Agreement to for Engineering and Administrative
Services with Dudek
(BC No. 11-085)**

The agreement between the Santa Barbara County Water Agency (County) and Dudek (Contractor) which was entered into on April 19, 2011 (Board Contract No. 11-085), is hereby modified and amended as follows:

Exhibit B, paragraph A is hereby amended to read:

A. For CONTRACTOR services to be rendered under this contract, CONTRACTOR shall be paid a total contract amount, including reimbursements, not to exceed \$124,400.

All other terms and conditions of the agreement will remain in full force and effect. This amendment is effective on _____, 2012.

ATTEST:
CHANDRA L. WALLAR
CLERK OF THE BOARD

By: _____
Deputy

SANTA BARBARA COUNTY WATER
AGENCY

By: _____
Chair, Board of Directors

Date: _____

APPROVED AS TO ACCOUNTING FORM:
ROBERT W. GEIS
AUDITOR-CONTROLLER

By: *Juli Ager*
Deputy

APPROVED AS TO INSURANCE:
RAY AROMATORIO, ARM, AIC
RISK MANAGER

By: *Marianne Ranc*

APPROVED AS TO FORM:
DENNIS A. MARSHALL
COUNTY COUNSEL

By: *Dennis Marshall*
Deputy County Counsel

CONTRACTOR:
Dudek

By: *Frank Dudek*
Dudek 8/15/12
Title: Frank Dudek
President

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APPROVED AS TO ACCOUNTING FORM:
ROBERT W. GEIS
AUDITOR-CONTROLLER

By: _____
Deputy

By: *Julie Hager*
Deputy

SANTA BARBARA COUNTY WATER
AGENCY

APPROVED AS TO INSURANCE:
RAY AROMATORIO, ARM, AIC
RISK MANAGER

By: _____
Chair, Board of Directors

By: *Marianne Ranch*

Date: _____

APPROVED AS TO FORM:
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COUNTY COUNSEL

CONTRACTOR:
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By: *Dennis Marshall*
Deputy County Counsel

By: *Frank Dudek*
Dudek 8/15/12
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By: *Julie Hager*
Deputy

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By: *D. Seibetz*
Deputy County Counsel

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