

Board Contract Summary

BC _____ - _____

For use with Expenditure Contracts submitted to the Board for approval. Complete information below, print, obtain signature of authorized departmental representative, and submit this form, along with attachments, to the appropriate departments for signature. See also: *Auditor-Controller Intranet Policies->Contracts*.

D1.	Fiscal Year	FY 2020/2021 to FY 2021/2022
D2.	Department Name	Public Works
D3.	Contact Person	Jody Rundle
D4.	Telephone	805-882-3602

K1.	Contract Type (check one): <input checked="" type="checkbox"/> Personal Service <input type="checkbox"/> Capital	
K2.	Brief Summary of Contract Description/Purpose	Operation of the Community Hazardous Waste Collection Center located at the University of California at Santa Barbara
K3.	Department Project Number	195001
K4.	Original Contract Amount	\$ 1,522,698.00
K5.	Contract Begin Date	July 1, 2020
K6.	Original Contract End Date	June 30, 2022
K7.	Amendment? (Yes or No)	No
K8.	- New Contract End Date	
K9.	- Total Number of Amendments	
K10.	- This Amendment Amount	\$
K11.	- Total Previous Amendment Amounts	\$
K12.	- Revised Total Contract Amount	\$

B1.	Intended Board Agenda Date	June 16, 2020
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	
	and Agenda Item Number	
B6.	Boilerplate Contract Text Changed? (If Yes, cite Paragraph)	

F1.	Fund Number	1930
F2.	Department Number	054
F3.	Line Item Account Number	7460
F4.	Project Number (if applicable)	195001
F5.	Program Number (if applicable)	1950
F6.	Org Unit Number (if applicable)	
F7.	Payment Terms	Net 30

V1.	Auditor-Controller Vendor Number	836001
V2.	Payee/Contractor Name	UCSB Regents
V3.	Mailing Address	EH&S, Building 565, Mesa Road
V4.	City State (two-letter) Zip (include +4 if known)	Santa Barbara, CA 93106-5132
V5.	Telephone Number	805-893-8533
V6.	Vendor Contact Person	Ali Aghayan
V7.	Workers Comp Insurance Expiration Date	June 30, 2020
V8.	Liability Insurance Expiration Date	June 30, 2020
V9.	Professional License Number	
V10.	Verified by (print name of county staff)	Jody Rundle

V11 Company Type (Check one): Individual Sole Proprietorship Partnership Corporation

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

Date: 5/7/2020 Authorized Signature: 