

ATTACHMENT 2
CONTRACT AMENDMENT NO. 1

D1. Fiscal Year: FY 2011/12 and 2012/13
D2. Budget Unit Number (*plus -Ship/-Bill codes in paren's*) : 1930(054-05-01-1050-1)
D3. Requisition Number.....:
D4. Department Name.....: Public Works, Resource Recovery & Waste Management
D5. Contact Person.....: Joddi Leipner
D6. Phone.....: 805-882-3614

K1. Contract Type (*check one*): Personal Service Capital Project/Construction
K2. Brief Summary of Contract Description/Purpose : Baron Ranch Restoration Implementation
K3. Original Contract Amount.....: \$368,702.50 (+\$36,870.00 contingency)
K4. Contract Begin Date: November 1, 2010
K5. Original Contract End Date.....: December 30, 2012
K6. Amendment History (*leave blank if no prior amendments*):

Seq# EffectiveDateThisAmndtAmtCumAmndtToDateNewTotalAmtNewEndDatePurpose(2-4 words)

1 October 15, 2011 \$199,950 \$368,702.50 \$568,652 December 30, 2012 Phase II Restoration

K7. Department Project Number.....: 129923

B1. Is this a Board Contract? (*Yes/No*).....: Yes
B2. Number of Workers Displaced (*if any*): None
B3. Number of Competitive Bids (*if any*).....: NA
B4. Lowest Bid Amount (*if bid*).....: \$
B5. If Board waived bids, show Agenda Date.....: N/A
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: 1930
F4. Department Number.....: 054
F5. Division Number (*if applicable*).....:
F6. Account Number.....: 7460
F7. Cost Center number (*if applicable*): N/A
F8. Payment Terms.....: Net 30

V1. Vendor Numbers (*A=uditor; P=urchasing*).....:
V2. Payee/Contractor Name: Ecological Conservation and Management
V3. Mailing Address.....: 6755 Mira Mesa Blvd., Suite 123413
V4. City State (*two-letter*) Zip (*include +4 if known*) : San Diego, CA 92121
V5. Telephone Number.....: 858-842-7344
V6. Contractor's Federal Tax ID Number (*EIN or SSN*) : 27-1196276
V7. Contact Person.....: Tito Marchant, President
V8. Workers Comp Insurance Expiration Date: 2/5/11
V9. Liability Insurance Expiration Date[s] (*G=enl; P=rofl*) : G – 1/15/11 P – 2/18/11
V10. Professional License Number.....: #
V11. Verified by (*name of County staff*): Colleen Hankins

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:

**Board of Supervisors Contract Amendment No. 1
to the Contract with Ecological Conservation and Management for the
Tajiguas Landfill Reconfiguration and Baron Ranch Restoration Project – Phase II
(BC-11-051)**

The agreement between the County of Santa Barbara (County) and Ecological Conservation and Management (CONTRACTOR) which was entered into on October 20, 2010 (Board Contract No. BC-11-051) is hereby modified and amended as follows:

1. Exhibit A Statement of Work is hereby amended to include the revised Scope of Work dated July 25, 2011 included herein as Exhibit A-2.

2. Exhibit B Payment Arrangements (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 cost reimbursements, not to exceed **\$568,652**.

All other terms and conditions of the agreement will remain in full force and effect. This amendment is effective on _____, 2011.

IN WITNESS WHEREOF, the parties have executed this Agreement to be effective on the date executed by COUNTY.

COUNTY OF SANTA BARBARA

By: _____
Chair, Board of Supervisors

Date: _____

ATTEST:
CHANDRA L. WALLAR
CLERK OF THE BOARD

CONTRACTOR

By: _____
Deputy

By: _____
TaxID Number: _____

APPROVED AS TO FORM:
DENNIS A. MARSHALL
COUNTY COUNSEL

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

By: _____
Deputy County Counsel

By: _____
Deputy

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

By: _____
Risk Manager

EXHIBIT A-2
STATEMENT OF WORK