

Contract Summary

BC 120912

Complete data below, print, obtain signature of authorized departmental representative, and submit this form (and attachments) to the Clerk of the Board (>\$25,000) or Purchasing (<\$25,000). See also "Contracts for Services" policy. Form is not applicable to revenue contracts.

D1.	Fiscal Year.....	2011/2012 - 2013/2014
D2.	Budget Unit Number (plus -Ship/Bill codes in parenthesis).....	063
D3.	Requisition Number	115
D4.	Department Name	General Services
D5.	Contact Person.....	Roy Hapeman
D6.	Telephone.....	568-2628

K1.	Contract Type (check one): <input type="checkbox"/> Personal Service <input type="checkbox"/> Capital	
K2.	Brief Summary of Contract Description/Purpose	EV Charging Stations
K3.	Original Contract Amount	105,968
K4.	Contract Begin Date	1/1/2012
K5.	Original Contract End Date.....	12/31/2013
K6.	Amendment History (leave blank if no prior amendments)	
K7.	Department Project Number	

B1.	Is this a Board Contract? (Yes/No)	No
B2.	Number of Workers Displaced (if any)	0
B3.	Number of Competitive Bids (if any)	N/A
B4.	Lowest Bid Amount (if bid)	N/A
B5.	If Board waived bids, show Agenda Date	N/A
	and Agenda Item Number.....	N/A
B7.	Boilerplate Contract Text Unaffected? (Yes / or cite Paragraph)	

F1.	Encumbrance Transaction Code	N/A
F2.	Current Year Encumbrance Amount.....	N/A
F3.	Fund Number.....	1920
F4.	Department Number	063
F5.	Division Number (if applicable)	
F6.	Account Number	7325
F7.	Cost Center number (if applicable)	1206
F8.	Payment Terms	2 years

V1.	Vendor Numbers (A=Auditor; P=Purchasing)	
V2.	Payee/Contractor Name.....	Coulomb Technologies Inc. Clean fuel
V3.	Mailing Address	1692 Dell Ave
V4.	City State (two-letter) Zip (include +4 if known).....	Campbell, CA 95008
V5.	Telephone Number	858-218-4719
V7.	Contact Person	Michael Jones/John Whitney
V8.	Workers Comp Insurance Expiration Date	3/29/2012
V9.	Liability Insurance Expiration Date[s] (G=Genl; P=Prof).....	3/29/2012
V10.	Professional License Number	CSLB# 770564
V11.	Verified by (name of county staff)	Roy Hapeman

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: 1/5/12 Authorized Signature: [Signature]