Board Contract Summary

BC 18-063

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*.

Department Name.	D1.	Fiscal Year	FY 17-18 and 18-19
Contract Person			Flood Control
Reconstruct Type (check one):			Karen Sullivan
K2. Brief Summary of Contract Description/Purpose Single Summary of Contract Description Summary of Single Sing	D4.	Telephone	X3458
K2. Brief Summary of Contract Description/Purpose Single Summary of Contract Description Summary of Single Sing			
Brief Summary of Contract Description/Purpose signeement	K1.	Contract Type (check one): Personal Service Capital	La constant de la con
Scheme Scheme Scheme St., 556, 154.09 (St.) 840, 622.95 plus \$115,631.14 contingency and additional work)	K2.	Brief Summary of Contract Description/Purpose	agreement
Contract Begin Date	K3.		NAME OF THE PARTY
K5. Contract Begin Date	K4.	Original Contract Amount	
K6. Original Contract End Date Upon project completion K7. Amendment? (Yes or No)	K5.	Contract Begin Date	
New Contract End Date	K6.	Original Contract End Date	Upon project completion
K8. - New Contract End Date N/A K9. - Total Number of Amendments. 1 K10. - This Amendment Amount. \$122,310.37 (\$116,486.06 plus \$5,824.31 Contingency) K11. - Total Previous Amendment Amount. \$122,310.37 (\$116,486.06 plus \$5,824.31 Contingency) K11. - Revised Total Contract Amount. \$2,078,484.46 (\$1,957,109.01 plus \$121,355.45 Cont/Add Work B1. Intended Board Agenda Date. 9/11/18 B2. Number of Workers Displaced (if any). 2 B3. Number of Competitive Bids (if any). 2 B4. Lowest Bid Amount (if bid). \$1,840,622.95 B5. If Board waived bids, show Agenda Date. NI/A and Agenda Item Number. NI/A B6. Boilerplate Contract Text Changed? (if Yes, cite Paragraph). F1. Fund Number 2560 F2. Department Number. 8400 F4. Project Number (if applicable). SM8313 and SM8205 F5. Program Number (if applicable). SM8313 and SM8205 F6. Org Unit Number (if applicable). Net 30 F7. <td>K7.</td> <td>Amendment? (Yes or No)</td> <td></td>	K7.	Amendment? (Yes or No)	
Fluid Number Competitive Bids Competitive Bid	K8.		N/A
K11	K9.	- Total Number of Amendments	1
R12	K10.	- This Amendment Amount	\$122,310.37 (\$116,486.06 plus \$5,824.31 Contingency)
B1. Intended Board Agenda Date	K11.	- Total Previous Amendment Amounts	
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. B6. Boilerplate Contract Text Changed? (If Yes, cite Paragraph). F2. Department Number. B6. Boilerplate Contract Text Changed? (If Yes, cite Paragraph). F3. Line Item Account Number. B6. Boilerplate (Text) Show Agenda Date. F4. Project Number (if applicable). F5. Program Number (if applicable). F6. Org Unit Number (if applicable). F7. Payment Terms. Auditor-Controller Vendor Number. V1. Auditor-Controller Vendor Number. V2. Payee/Contractor Name. V3. Mailing Address. V6. Vendor Contact Person. V7. Verified by (vendor Contact Person. V8. Liability Insurance Expiration Date. V9. Verified by (print name of county staff). V1. Company Type (Check one): I certify information is complete and accurate; designated funds available; required concurrences evidenced on signature page. Date: S1. 84. 84. 84. 84. 84. 84. 84. 84. 84. 84	K12.	- Revised Total Contract Amount	\$2,078,464.46 (\$1,957,109.01 plus \$121,355.45 Cont/Add Work
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. B6. Boilerplate Contract Text Changed? (If Yes, cite Paragraph). F2. Department Number. B6. Boilerplate Contract Text Changed? (If Yes, cite Paragraph). F3. Line Item Account Number. B6. Boilerplate (Text) Show Agenda Date. F4. Project Number (if applicable). F5. Program Number (if applicable). F6. Org Unit Number (if applicable). F7. Payment Terms. Auditor-Controller Vendor Number. V1. Auditor-Controller Vendor Number. V2. Payee/Contractor Name. V3. Mailing Address. V6. Vendor Contact Person. V7. Verified by (vendor Contact Person. V8. Liability Insurance Expiration Date. V9. Verified by (print name of county staff). V1. Company Type (Check one): I certify information is complete and accurate; designated funds available; required concurrences evidenced on signature page. Date: S1. 84. 84. 84. 84. 84. 84. 84. 84. 84. 84	R1	Intended Board Agenda Date	9/11/18
B3. Number of Competitive Bids (if any)			21/4
B4. Lowest Bid Amount (if bid) \$1,840,622.95 B5. If Board waived bids, show Agenda Date. N/A and Agenda Item Number			_
B5. If Board waived bids, show Agenda Date			21 212 222 25
and Agenda Item Number	0-31 0 0		11/4
B6. Boilerplate Contract Text Changed? (If Yes, cite Paragraph)			
F1. Fund Number	B6.		
F2. Department Number	E1	Fund Number	0500
F3. Line Item Account Number		A Section of Control and the Control of Cont	
F4. Project Number (if applicable)			0.100
F5. Program Number (if applicable) 3002 F6. Org Unit Number (if applicable) net 30 V1. Auditor-Controller Vendor Number	2000		2000000 100000
F6. Org Unit Number (if applicable)			2222
F7. Payment Terms			
V1. Auditor-Controller Vendor Number			
V2. Payee/Contractor Name	1.7.	T dymone romo	
V3. Mailing Address	V1.	Auditor-Controller Vendor Number	
V4. City State (two-letter) Zip (include +4 if known)	V2.	Payee/Contractor Name	
V5. Telephone Number	V3.	O	
V6. Vendor Contact Person	V4.	City State (two-letter) Zip (include +4 if known)	
V7. Workers Comp Insurance Expiration Date	V5.	Telephone Number	
V8. Liability Insurance Expiration Date	V6.	14. 14. 17. 14. 14. 14. 14. 14. 14. 14. 14. 14. 14	
V9. Professional License Number	V7.	Workers Comp Insurance Expiration Date	
V10 Verified by (print name of county staff)	V8.	Liability Insurance Expiration Date	. 10/1/18
V10 Verified by (print name of county staff)		Professional License Number	,
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: 8/28/18 Authorized Signature: 444/400		Verified by (print name of county staff)	clopez
Date: 8/28/18 Authorized Signature: HUNDA LEX			
Date: 8/28/18 Authorized Signature: HUNDA LEX	I certify information is complete and accurate; designated funds available; required concurrences evidenced on signature page.		
DAMAGA 1/19/1/11	Date: 8/28/18 Authorized Signature: AUNION SEX		

AMENDMENT NO. 1 TO THE SANTA BARBARA COUNTY FLOOD CONTROL DISTRICT AGREEMENT FOR COUNTY PROJECT NOs. SM8313 AND SM8205 WITH WHITAKER CONSTRUCTION GROUP, INC. (BC 18-063)

Pursuant to Section of the Santa Barbara County Flood Control District Agreement for County Project Nos. SM8313 & SM8205 (hereinafter AGREEMENT) entered into on July11, 2017, as BC No. 18-063, between the Santa Barbara County Flood Control and Water Conservation District (hereafter COUNTY), and Whitaker Construction Group, Inc., having its principal place of business at 2752 Concrete Court, Paso Robles, CA 93446 (hereafter CONTRACTOR), the COUNTY and CONTRACTOR amend the AGREEMENT as provided in this Amendment 1:

Paragraph 1 of Section 6 of the AGREEMENT is amended to read as follows:

PAYMENT As full compensation for furnishing all labor, supervision, overhead, materials and equipment and for doing all the work completed and embraced in this Agreement and subject to adjustments and liquidated damages, if any, as provided in the Contract Documents, the base amount to be paid to the CONTRACTOR for satisfactory completion of all requirements of the CONTRACTOR under this Agreement is and shall be \$1,957,109.01, to be paid as provided in the Contract Documents

Paragraph 3 of Section 6 of the AGREEMENT is amended to read as follows:

The Engineer is authorized to order, as change order work, changes and additions to the work being performed under this contract in an amount not to exceed \$110,355.45 (Contingency) in accordance with California Public Contract Code Sections 20142 and 20395, as applicable, to be paid as provided in the Contract Documents. In no event shall the County be liable for the cost of any changes or additions to work being performed under this contract unless approved in advance and in writing by the Engineer.

In all other respects, the AGREEMENT remains unchanged and in full effect.

[SIGNATURES ON THE FOLLOWING PAGE]

IN WITNESS WHEREOF, the parties have executed this Amendment No. 1 to the Santa Barbara County Flood Control District Agreement for County Project Nos. SM8313 & SM8205 with Whitaker Construction Group, Inc. to be effective on the date executed by COUNTY.

Inc. to be effective on the date executed by COUNTY.			
ATTEST: Mona Miyasato County Executive Officer Ex Officio Clerk of Board of Directors of the Santa Barbara County Flood Control and Water Conservation District	SANTA BARBARA COUNTY FLOOD CONTROL & WATER CONSERVATION DISTRICT:		
By: Deputy Clerk	By: Das Williams, Chair, Board of Directors		
RECOMMENDED FOR APPROVAL: Santa Barbara County Flood Control & Water Conservation District	Date:		
By: Scott D. McGolpin Public Works Director	CONTRACTOR: WHITAKER CONSTRUCTION GROUP, INC.		
APPROVED AS TO FORM: Michael C. Ghizzoni County Counse	By:Authorized Representative		
By: Deputy County Counsel	Name: <u>Marthew Bausnam</u> Title: <u>President</u>		
APPROVED AS TO FORM: Ray Aromatorio, ARM, AIC Risk Manager	APPROVED AS TO ACCOUNTING FORM: Theodore A. Fallati, CPA Auditor-Controller		