

ATTACHMENT 2

Amendment No. 1 to the Agreement For Services Of Independent Contractor

**AMENDMENT No. 1 to the AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR
For
PROFESSIONAL SERVICES**

This is the First Amendment to the Agreement between THE COUNTY OF SANTA BARBARA (hereinafter “County”) and Kitchell/CEM, Inc., (hereafter CONTRACTOR).

WHEREAS, on July 2, 2019, the parties hereto entered into an Agreement for Services of Independent Contractor BC19320 (hereinafter “Agreement”); and

WHEREAS, the parties hereto desire to amend the Agreement (“First Amendment”), in accordance with the provisions of the Agreement, to add additional services and compensation for said services.

NOW, THEREFORE, Owner and Contractor agree as follows:

1. Exhibit A – Statement of Work is hereby amended to read

“The following shall constitute the Statement of Work for this contract:

The consultant may provide various services including project management, project engineering, architectural, and other support. The consultant will serve as the central point of contact for assigned Santa Barbara County Projects encompassing ...”

2. This First Amendment increases the maximum compensation limit of \$200,000 by \$75,000 for a Maximum Compensation Limit (MCL) of \$275,000. Accordingly, Exhibit B - Payment Arrangements, paragraph A is hereby amended to read

“... CONTRACTOR shall be paid a total contract amount, including cost reimbursements, not to exceed \$275,000. The hourly rates for the project management services shall be based on the following Hourly Rate Schedule.

Hourly Rates

Position	Hourly Rate
Project Executive	\$220
Project Director	\$200
Sr. Project Manager	\$175
Project Manager	\$150
Sr. Project Engineer	\$130
Project Engineer	\$120
Document Control Manager	\$90
Engineering/Architecture Department Manager	\$195
Sr. Architect	\$165
Registered Architect/Licensed Engineer	\$160
Commissioning Engineer	\$160
BIM Manager	\$165
BIM Engineer	\$130
CAD Technician	\$100
Engineering/Architecture Department Admin Support	\$90

Estimating Department Manager	\$190
Estimator	\$150
Scheduling Department Manager	\$170
Scheduler	\$150 “

3. Section 2 – Notices, in the Agreement, is hereby amended to read:

“To COUNTY:
Patrick Zuroske, pzuroske@countyofsb.org
Assistant Director,
General Services Support Services
1105 Santa Barbara Street, 2nd Floor
Santa Barbara, CA 93101”

4. “Except as otherwise amended by this Second Amendment, and previously amended by the First Amendment, all of the terms and conditions of the Agreement shall remain in full force and effect.
5. The signatories to this Second Amendment have the authority to bind the parties. This Second Amendment may be executed in counterparts, each of which shall be deemed to be an original, and all of such counterparts shall together constitute one executed original instrument.

Amendment 1 to the Agreement for Services of Independent Contractor **BC19320** between the **County of Santa Barbara** and **Kitchell/CEM, Inc.**

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

COUNTY

By: _____
STEVE LAVAGNINO, CHAIR
BOARD OF SUPERVISORS

Dated: 10/22/2019

ATTEST:
MONA MIYASATO,
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: _____
Deputy

CONSULTANT:
Kitchell/CEM, INC.

By: _____
Authorized Representative

Name: _____

Title: _____

Address: _____

City/State/Zip: _____

APPROVED AS TO FORM:
MICHAEL C. GHIZZONI
COUNTY COUNSEL

By:  _____
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:
BETSY SCHAFFER, CPA, CPFO
AUDITOR-CONTROLLER

By:  _____
Deputy

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

By:  _____
Risk Manager

RECOMMENDED FOR APPROVAL:
JANETTE D. PELL, DIRECTOR
GENERAL SERVICES DEPARTMENT

By:  _____
Department Head

END OF AGREEMENT

Amendment 1 to the Agreement for Services of Independent Contractor BC19320 between the County of Santa Barbara and Kitchell/CEM, Inc.

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Dated: 10/22/2019

ATTEST:
MONA MIYASATO,
COUNTY EXECUTIVE OFFICER
CLERK OF THE BOARD

By: _____
Deputy

CONSULTANT:
Kitchell/CEM, INC.

By: _____
Authorized Representative

Name: Russell Fox

Title: PRESIDENT

Address: 2950 Venture Center Way Ste 600

City/State/Zip: Sacramento, CA 95833

APPROVED AS TO FORM:
MICHAEL C. GHIZZONI
COUNTY COUNSEL

By: _____
Deputy County Counsel

APPROVED AS TO ACCOUNTING FORM:
BETSY SCHAFFER, CPA, CPFO
AUDITOR-CONTROLLER

By: _____
Deputy

APPROVED AS TO FORM:
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END OF AGREEMENT