# Contract Summary

BC_____-_____

Complete data below, print, obtain signature of authorized departmental representative, and submit this form (and attachments) to the Clerk of the Board (>$100,000) or to Purchasing (<$100,000). *See also: Auditor-Controller Intranet Policies->Contracts, Form is not applicable to revenue contracts.*

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|---|---|---|
| D1. | Fiscal Year | Monday, December 02, 2013 |
| D2. | Department Name | Transportation / Engineering |
| D3. | Contact Person | Walter Rubalcava |
| D4. | Telephone | (805) 568-3047 |

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|---|---|---|
| K1. | Contract Type | Construction |
| K2. | Brief Summary of Contract Description/Purpose | |
| K3. | Department Project Number | 810542 |
| K4. | Original Bid Amount | $898,670.00 |
| K4a | Supplemental | $53,047 |
| K4b | Contingency | $60,085.85 |
| K4c | Total Contract Amount | $1,011,802.85 |
| K5. | Contract Begin Date | Monday, December 02, 2013 |
| K6. | Original Contract End Date | Friday, June 27, 2014 |
| K7. | Amendment? (Yes or No) | |
| K8. | - Total Number of Amendments | |
| K9. | - This Amendment Amount | $ |
| K10. | - Total Previous Amendment Amounts | $ |
| K11. | - Revised Total Contract Amount | $ |

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| B1. | Is this a Board Contract? *(Yes/No)* | |
| B2. | Number of Workers Displaced *(if any)* | None |
| B3. | Number of Competitive Bids *(if any)* | (3) |
| B4. | If Board waived bids, show Agenda Date | |
| | and Agenda Item Number | |
| B5. | Boilerplate Contract Text Changed? *(If Yes, cite Paragraph)* | |

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|---|---|---|
| F1. | Fund Number | 0016 |
| F2. | Department Number | 054 |
| F3. | Line Item Account Number | 7510 |
| F4. | Project Number *(if applicable)* | 810542 |
| F5. | Program Number *(if applicable)* | 2710 |
| F6. | Org Unit Number *(if applicable)* | 0500 |
| F7. | Payment Terms | NET 30 |

| | | |
|---|---|---|
| V1. | Auditor-Controller Vendor Number | |
| V2. | Payee/Contractor Name | Toro Enterprises, Inc. |
| V3. | Mailing Address | 2101 E. Ventura Blvd |
| V4. | City State (two-letter) Zip (include +4 if known) | Oxnard, Ca 93036 |
| V5. | Telephone Number | Toro Enterprises, Inc. |
| V6. | Vendor Contact Person | Toro Enterprises, Inc. |
| V7. | Workers Comp Insurance Expiration Date | |
| V8. | Liability Insurance Expiration Date | |
| V9. | Professional License Number | 93031 |
| V10 | Verified by (print name of county staff) | Brian Gilbert, CPA |

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: _____ Authorized Signature: _____