

# Attachment A

# Contract Summary

BC 16-196

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.

D1.	Fiscal Year	15/16, 16/17, 17/18, 18/19, 19/20
D2.	Department Name:	Resource Recovery and Waste Management
D3.	Contact Person:	Todd Curtis
D4.	Telephone:	(805) 882-3621

K1.	Contract Type:	Design Professional Services
K2.	Brief Summary of Contract Description/Purpose:	Landfill Closure Project Construction Quality Assurance Services
K3.	Department Project Number:	129913
K4.	Original Bid Amount:	368,862.00
K4a.	Supplemental:	\$0.00
K4b.	Contingency:	\$36,886.00
K4c.	Total Contract Amount:	\$405,748.00
K5.	Contract Begin Date:	05/04/2016
K6.	Original Contract End Date:	10/31/18
K7.	Amendment? (Yes or No):	Yes
K8.	- New Contract End Date:	12/31/19
K9.	- Total Number of Amendments:	1
K10.	- This Amendment Amount:	\$0.00
K11.	- Total Previous Amendment Amounts:	\$0.00
K12.	- Revised Total Contract Amount:	\$405,748.00

B1.	Is this a Board Contract? (Yes/No):	Yes
B1a.	Intended Agenda Date:	October 16, 2018
B2.	Number of Workers Displaced (if any):	None
B3.	Number of Competitive Bids (if any):	None
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:	1930
F2.	Department Number:	054
F3.	Line Item Account Number:	7460
F4.	Project Number (if applicable):	129913
F5.	Program Number (if applicable):	1750
F6.	Org Unit Number (if applicable):	
F7.	Payment Terms:	NET 30

V1.	Auditor-Controller Vendor Number:	370470
V2.	Payee/Contractor Name:	Geo-Logic Associates, Inc.
V3.	Mailing Address:	2777 East Guasti Road, Suite 1
V4.	City State (two-letter) Zip (include +4 if known):	Ontario, CA 91761
V5.	Telephone Number:	909-626-2282
V6.	Vendor Contact Person:	Stacy Baird
V7.	Workers Comp Insurance Expiration Date:	
V8.	Liability Insurance Expiration Date:	
V9.	Professional License Number:	N/A
V10.	Verified by (print name of county staff):	Gloria Alvarez

V11 Company Type (Check one):      Individual      Sole Proprietorship      Partnership      x Corporation

I certify information is complete and accurate; designated funds available; required concurrences evidenced on signature page.

Date: 9/6/18 Authorized Signature: \_\_\_\_\_

**AMENDMENT NO. 1 TO  
AGREEMENT FOR SERVICES OF INDEPENDENT CONTRACTOR  
BETWEEN COUNTY OF SANTA BARBARA AND GEO-LOGIC ASSOCIATES (BC-16-196)**

This Amendment (hereinafter referred to as "Amendment No. 1") to the Agreement of Services of Independent Contractor (hereinafter referred to as "Agreement") is made by and between the County of Santa Barbara (hereinafter referred to as "COUNTY"), and Geo-Logic Associates (hereinafter referred to as "CONTRACTOR") with reference to the following:

**WHEREAS**, COUNTY and CONTRACTOR executed the Agreement, Contract BC-16-196 on May 3, 2016; and

**WHEREAS**, to accommodate the change in scope, the previously agreed upon Term is to be extended; and

**WHEREAS**, COUNTY and CONTRACTOR desire to amend the text of **SECTION 4. TERM** of the Agreement.

NOW, THEREFORE, in consideration of the mutual covenants and conditions contained herein, COUNTY AND CONTRACTOR agree to amend the Agreement as follows:

1. The text of **SECTION 4. TERM**, shall be deleted in its entirety and replaced by the following:  
  
"CONTRACTOR shall commence performance on May 4, 2016 and end performance upon completion, but no later than December 31, 2019 unless otherwise directed by COUNTY or unless earlier terminated."
2. Except as set forth in Sections 1 hereof, this Amendment No. 1 shall not modify or change any of the provisions of the Agreement and the parties to this Agreement are bound by its provisions, as amended herein.

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Agreement for Services of Independent Contractor between the **County of Santa Barbara** and Geo-Logic Associates.

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

**ATTEST:**

Mona Miyasato  
County Executive Officer  
Clerk of the Board

**COUNTY OF SANTA BARBARA:**

By: \_\_\_\_\_  
Deputy Clerk

By: \_\_\_\_\_  
Chair, Board of Supervisors

Date: \_\_\_\_\_

**RECOMMENDED FOR APPROVAL:**

Santa Barbara County Public Works  
Department

**CONTRACTOR:**

Geo-Logic Associates, Inc.

By:   
\_\_\_\_\_  
Scott D. McGowan  
Department Head, Public Works  
Director

By:   
\_\_\_\_\_  
Authorized Representative

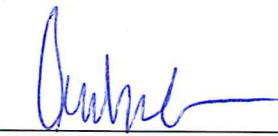
Name: GARY L. CASE  
Title: CEO


**APPROVED AS TO FORM:**

Michael C. Ghizzoni  
County Counsel

**APPROVED AS TO ACCOUNTING FORM:**


Theodore A. Fallati, CPA  
Auditor-Controller

By:   
\_\_\_\_\_  
Deputy County Counsel

By:   
\_\_\_\_\_  
Deputy

**APPROVED AS TO FORM:**

Ray Aromatorio, ARM, AIC  
Risk Manager

By:   
\_\_\_\_\_  
Risk Management