

Agreement # 5912 - Amendment # 1 Legistar # 23-1006

CONTRACT AMENDMENT ROUTING SHEET

Date Prepared: 03/28/2024

Need Date: 04/11/2024

PROCESSING DEPARTMENT:

Department: CAO-Procurement and Contracts

Dept. Contact: Matthew Potter

Phone: X 5417

Department Head Signature: Jon Manning

Digitally signed by Jon Manning
Date: 2023.07.21 09:03:14
-07'00'

Jon Manning, CPPB
Administrative Analyst Supervisor

CONTRACTOR:

Name: Mintier Harnish LP

Address: 1415 20th Street

Sacramento, CA 95811

Phone: 916-446-0522

Org Code: 3730300

Project String
(if applicable): _____

CONTRACTING DEPARTMENT: Planning and Building

Service Requested: Review and Approve

Description: First Amendment to Agreement for Land Use Planning Services

Contract Term: Six (6) Years Contract Value: \$826,616 as amended

COUNTY COUNSEL: (must approve all contracts and MOU's)

Approved: Disapproved: Date: 08/11/2023 By: Kathleen Markham

Digitally signed by Kathleen Markham
Date: 2023.08.11 14:08:42 -07'00'

Approved: Disapproved: Date: 05/31/2024 By: Kathleen Markham

Digitally signed by Kathleen Markham
Date: 2024.05.31 15:35:49 -07'00'

Only new/additional work should be included on Exhibit A-1. All work on Exhibit A must be done in accordance with the scope of work on Exhibit A and in accordance with the cost estimate, Exhibit C. Exhibit C-1 should only show cost estimates for the new/additional work.

Please feel free to call me if you have any questions. Thanks.

05/31/2024 - approved as to form only

COUNSEL -- PLEASE FORWARD TO HR AND RISK MANAGEMENT -- THANKS!

HR APPROVAL:

Compliance with Human Resources requirements?

Yes:

No:

Compliance verified by: Lauren Montalvo

Digitally signed by Lauren Montalvo
Date: 2024.06.18 15:46:18 -07'00'

RISK MANAGEMENT APPROVAL: (all contracts & MOU's except boilerplate grant funding contracts)

Approved: Disapproved: Date: 06/17/2024 By: Laveen K. Cheema

Digitally signed by Laveen K. Cheema
Date: 2024.06.17 15:25:46 -07'00'

Approved: Disapproved: Date: _____ By: _____

OTHER APPROVAL: (Specify department(s) participating or directly affected by this contract).

Departments:

Approved: Disapproved: Date: _____ By: _____

Approved: Disapproved: Date: _____ By: _____

PLEASE EMAIL SIGNED DOCUMENT TO: matthew.potter@edcgov.us

THANK YOU!