SCO ID:

STA	TE OF CALIFORI	NIA - DEPARTMENT OF GENERAL SERVICES					
STANDARD AGREEMENT			AGREEMENT NUMBER	PURCHASING AUTHORITY NUMBER (If Applicable		oplicable)	
STD 213 (Rev. 04/2020)			21-CDBG-HK-00098				
1. This Agreement is entered into between the Contracting Agency and the Contractor named below:							
CONTRACTING AGENCY NAME							
Department of Housing and Community Development (HCD)							
CONTRACTOR NAME							
County of El Dorado							
2. The term of this Agreement is:							
START DATE							
Upon HCD Approval							
THROUGH END DATE							
Six (6) Months from the Effective Date							
3. The maximum amount of this Agreement is:							
\$1,498,000							
4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.							
	Exhibits Title					Pages	
	Exhibit A Authority, Purpose and Scope of Work				7		
	Exhibit B Budget Detail and Payment Provisions				7		
	Exhibit C * General Terms and Conditions					4 / 2017	
+	Exhibit D CDBG Program Terms and Conditions					4	
+	Exhibit E Program Application					67	
	Items shown with an asterisk (*), are hereby incorporated by reference and made part of this agreement as if attached hereto.						
These documents can be viewed at https://www.dgs.ca.gov/OLS/Resources IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.							
CONTRACTOR							
CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)							
	inty of El Dora		action, partiteismp, etc.,				
CONTRACTOR BUSINESS ADDRESS					TATE	ZIP	
2850 Fairlane Court				erville C.		95667	
PRINTED NAME OF PERSON SIGNING							
CON	TRACTOR AUTHO	DRIZED SIGNATURE	DATE	SIGNED			

SCO ID:

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

AGREEMENT NUMBER PURCHASING AUTHORITY NUMBER (If Applicable) STANDARD AGREEMENT 21-CDBG-HK-00098 STD 213 (Rev. 04/2020) STATE OF CALIFORNIA CONTRACTING AGENCY NAME Department of Housing and Community Development (HCD) CONTRACTING AGENCY ADDRESS CITY STATE ZIP CA 2020 W. El Camino Avenue Sacramento 95833 PRINTED NAME OF PERSON SIGNING TITLE Michael White Contracts Manager CONTRACTING AGENCY AUTHORIZED SIGNATURE DATE SIGNED CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL EXEMPTION (If Applicable) Exempt per SCM Vol. 1 4.04. A.3 (DGS memo dated 6/12/1981)