

RUSH!

Contract #: 396-S1211-AMEND I

CONTRACT ROUTING SHEET

Date Prepared: February 12, 2013

Need Date: February 15, 2013

PROCESSING DEPARTMENT:

Department: Chief Administrative Office
Dept. Contact: Terri Knowlton
Phone #: x5577 / x5571
Department
Head Signature: *[Signature]*

CONTRACTOR:

Name: Kimley-Horn & Associates
Address: 11919 Foundation Place #200
Gold River, CA 95670
Phone: (916) 858-5800

CONTRACTING DEPARTMENT: Chief Administrative Office

Service Requested: Travel Demand Model
Amendment revises scope and compensation

Contract Term: 2-Years Contract Value: \$448,997.50

Compliance with Human Resources requirements? Yes: No:

Compliance verified by: Mike Strella approved 2/26/13

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

Approved: Conditional Disapproved: _____ Date: 2/13/2013 By: K. Markham
Approved: _____ Disapproved: _____ Date: _____ By: _____

*See minor changes on pg. 2 "Exhibit B-1"
Bonnie Riches name needs to be deleted from
the cert. of insurance.
Re-issue to just El Dorado County*

RECEIVED
FEB 12 2013
El Dorado County Council

PLEASE FORWARD TO RISK MANAGEMENT. THANKS!

RISK MANAGEMENT: (All contracts and MOU's except boilerplate grant funding agreements)

Approved: Disapproved: _____ Date: 2/11/2013 By: Adams
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: _____