

**AMENDMENT TO BOARD OF SUPERVISORS
AGREEMENT NO. BOS-22-084
STATE NO. 1CA05264**

This Amendment to BOS Agreement No. BOS-22-084 is entered into this 11th day of July, 2023, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and **California Department of Forestry and Fire Protection (CALFIRE)**, hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. BOS-22-084 was entered into on July 1, 2021; and

WHEREAS, upon execution of this document by the Chair of the Mendocino County Board of Supervisors and CALFIRE, this document will become part of the aforementioned contract and shall be incorporated therein; and

WHEREAS, it is the desire of CONTRACTOR and COUNTY to add a paragraph to the "Service" portion of Exhibit E regarding CAD enhancements.

NOW, THEREFORE, we agree as follows:

1. The following paragraph shall be added to the end of the Service portion of Exhibit E of BOS Agreement No. BOS-22-084, on page 21:

CALFIRE has supported a request for a CAD enhancement with our current statewide CAD vendor and the County of Mendocino, and will honor the CAD enhancement through 6/30/2026;. It is the intent of CALFIRE to honor this enhancement as long as the integration is viable and meets the implementation standards with the CALFIRE CAD system in place.

All other terms and conditions of BOS Agreement No. BOS-22-084 shall remain in full force and effect.

IN WITNESS WHEREOF

DEPARTMENT FISCAL REVIEW:

By: [Signature]
DEPARTMENT HEAD

Date: 06/20/2023

Budgeted: ☒ Yes ☐ No

Budget Unit: 4016

Line Item: 86-3113

Org/Object Code: EMOES

Grant: ☐ Yes ☒ No

Grant No.:

COUNTY OF MENDOCINO

By: [Signature]
GLENN MCGOURTY, Chair
BOARD OF SUPERVISORS

Date: 07/11/2023

ATTEST:

DARCIE ANTLE, Clerk of said Board

By: [Signature]
Deputy 07/11/2023

I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made.

DARCIE ANTLE, Clerk of said Board

By: [Signature]
Deputy 07/11/2023

INSURANCE REVIEW:

By: [Signature]
Risk Management

Date: 06/20/2023

CONTRACTOR/COMPANY NAME

By: _____
SIGNATURE

Date: _____

NAME AND ADDRESS OF CONTRACTOR:

California Dept of Forestry & Fire Protection
P.O. Box 944246
Sacramento, CA 94244

By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement

COUNTY COUNSEL REVIEW:

APPROVED AS TO FORM:

CHRISTIAN M. CURTIS,
County Counsel

By: [Signature]
Deputy

Date: 06/20/2023

EXECUTIVE OFFICE/FISCAL REVIEW:

By: [Signature]
Deputy CEO or Designee

Date: 06/20/2023

Signatory Authority: \$0-25,000 Department; \$25,001- 50,000 Purchasing Agent; \$50,001+ Board of Supervisors

Exception to Bid Process Required/Completed ☐ N/A

Mendocino County Business License: Valid ☐

Exempt Pursuant to MCC Section: State _____