| BOS | AGR | EEN | IENT | NO. | |
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AMENDMENT TO BOARD OF SUPERVISORS AGREEMENT NO. JA-J19-012

This Amendment to BOS Agreement No. <u>JA-J19-012</u> is entered into this <u>1</u> day of <u>June</u>, 2020, by and between the COUNTY OF MENDOCINO, a political subdivision of the State of California, hereinafter referred to as "COUNTY" and <u>In-Custody Transportation Inc.</u>, hereinafter referred to as "CONTRACTOR".

WHEREAS, BOS Agreement No. JA-J19-012 was entered into on July 1, 2019; and

WHEREAS, upon execution of this document by the Chair of the Mendocino County Board of Supervisors and the <u>CONTRACTOR</u>, 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 extend the termination date set out in the original BOS Agreement No. <u>JA-J19-012</u>, from <u>June 30, 2020</u> to <u>June 30, 2021</u>; and

NOW, THEREFORE, we agree as follows:

- 1. The termination date set out in the original BOS Agreement No. JA-J19-012 will be extended from June 30, 2020 to June 30, 2021.
- 2. **Amount of agreement:** The amount set out in the original Agreement No. JA-J19-012 will be changed from \$50,000 to \$100,000 with the addition of \$50,000.
- 3. **Payment Terms:** The Payment Terms, Exhibit B, number 5, set out in the original Agreement No. JA-J19-012 has been altered and a new Payment Terms, Exhibit B, is attached herein with the changes denoted in bold font.
- 4. **Insurance Requirements:** The Insurance Requirements, Exhibit C, set out in the original Agreement No. JA-J19-012 has been altered and a new Exhibit C is attached herein with the changes denoted in bold font.

All other terms and conditions of BOS Agreement No. <u>JA-J19-012</u> shall remain in full force and effect.

| IN WITNESS WHEREOF, the parties hereto have e | xecuted this Agreement as of the day and | | |
|---|---|--|--|
| year first above written. DEPARTMENT FISCAL REVIEW: | CONTRACTOR/COMPANY NAME: | | |
| Get 1/001/2 6-3-20 | | | |
| DEPARTMENT HEAD DATE | By: See page 29 | | |
| Budgeted: X Yes No | NAME AND ADDRESS OF CONTRACTOR: | | |
| Budget Unit: 2510 | In-Custody Transportation Inc. | | |
| Line Item: 862253 | 301 E. Arrow Highway #110 | | |
| Grant: Yes No | San Dimas, CA 91773 | | |
| Grant No.: n/a | Phone: <u>800-631-6211</u> | | |
| | EM: <u>Charles@incustodytrans.com</u> | | |
| By: JOHN HASCHAK, Chair BOARD OF SUPERVISORS | 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 | | |
| ATTEST: | COUNTY COUNSEL REVIEW: | | |
| CARMEL J. ANGELO, Clerk of said Board | APPROVED AS TO FORM: | | |
| By: | CHRISTIAN M. CURTIS, County Counsel By: Deputy | | |
| CARMEL J. ANGELO, Clerk of said Board | Jopany | | |
| Ву: | | | |
| Deputy | Y | | |
| INSURANCE REVIEW: | | | |
| Carnel of Agele | | | |
| By: | | | |
| Risk Management | | | |
| EXECUTIVE OFFICE/FISCAL REVIEW: | | | |
| APPROVAL RECOMMENDED | | | |
| By: Smile Ray | | | |
| Deputy CEO | | | |
| Signatory Authority: \$0-25,000 Department; \$25,001-50,000 Pu Exception to Bid Process Required/Completed Mendocino County Business License: Valid Exempt Pursuant to MCC Section: | rchasing Agent; \$50,001+ Board of Supervisors | | |

| IN WITNESS WHEREOF, the parties hereto have year first above written. | executed this Agreement as of the day and | | | |
|--|--|--|--|--|
| DEPARTMENT FISCAL REVIEW: | CONTRACTOR/COMPANY NAME: | | | |
| See page 2 DEPARTMENT HEAD DATE | ву: | | | |
| Budgeted: X Yes No | NAME AND ADDRESS OF CONTRACTOR: | | | |
| Budget Unit: 2510 | In-Custody Transportation Inc. | | | |
| Line Item: <u>8</u> 62253 | P.O. Box 25 | | | |
| Grant: Tyes No | San Dimas, CA 91773 | | | |
| Grant No.: n/a | Phone: 800-631-6211 EM: charles@incustodytrans.com | | | |
| By: See page 2 | By signing above, signatory warrants and represents that he/she executed this Agreement in his/her authorized capacity and that by his/her | | | |
| JOHN HASCHAK, Chair BOARD OF SUPERVISORS | signature on this Agreement, he/she or the entity upon behalf of which he/she acted, executed this Agreement | | | |
| ATTEST: | COUNTY COUNSEL REVIEW: | | | |
| CARMEL J. ANGELO, Clerk of said Board | APPROVED AS TO FORM: | | | |
| By: <u>See page 2</u> Deputy | CHRISTIAN M. CURTIS, County Counsel | | | |
| I hereby certify that according to the provisions of Government Code section 25103, delivery of this document has been made. | By: See page 2 Deputy | | | |
| CARMEL J. ANGELO, Clerk of said Board | Deputy | | | |
| By: <u>See page 2</u> Deputy | | | | |
| INSURANCE REVIEW: | | | | |
| | | | | |
| By: See page 2 Risk Management | | | | |
| EXECUTIVE OFFICE/FISCAL REVIEW: | | | | |
| APPROVAL RECOMMENDED | | | | |
| By: See page 2 Deputy CEO | | | | |
| Signatory Authority: \$0-25,000 Department; \$25,001-50,000 P Exception to Bid Process Required/Completed Mendocino County Business License: Valid Exempt Pursuant to MCC Section: | urchasing Agent; \$50,001+ Board of Supervisors | | | |

EXHIBIT B

PAYMENT TERMS

- A. COUNTY shall pay CONTRACTOR per the following instructions:
 - 1. Rates (within California to Mendocino County intrastate):

| Pick up Rates: | | |
|-----------------------|--------------------------------------|---------------------------|
| | Regular \$125.00 | ^ |
| | After Hours \$125.00 | |
| | Holidays \$125.00 | |
| Mileage Rates: | | |
| | Regular \$1.25 per mile | |
| | After Hours \$1.25 per mile | |
| | Holiday \$1.25 per mile | |
| Mileage rates include | de male, female, juvenile, special r | eeds, high risk prisoners |

- 2. CONTRACTOR provides:
 - a. 50% discount off pick up fee, if additional person is picked up from the same facility.
- 3. Per Exhibit A, Definition of Services B. 1. a-d, COUNTY will reimburse CONTRACTOR for applicable costs as stated in the aforementioned section of Exhibit A.
- 4. CONTRACTOR shall send itemized invoices to:

Mendocino County Sheriff-Coroner Office 951 Low Gap Rd. Ukiah, Ca. 95482 Attn: Fiscal

OR

Email invoices to mcso-accounting@mendocinocounty.org

CONTRACTOR will include their County vendor # and Contract # on each invoice.

5. Payment under this agreement shall not exceed \$100,000 for the term of the agreement.

EXHIBIT C

INSURANCE REQUIREMENTS

Insurance coverage in a minimum amount set forth herein shall not be construed to relieve CONTRACTOR for liability in excess of such coverage, nor shall it preclude COUNTY from taking such other action as is available to it under any other provisions of this Agreement or otherwise in law. Insurance requirements shall be in addition to, and not in lieu of, Contractor's indemnity obligations under Paragraph 2 of this Agreement.

CONTRACTOR shall furnish to COUNTY certificates of insurance with Automobile Liability/General Liability Endorsements evidencing at a minimum the following:

- a. Combined single limit bodily injury liability and property damage liability \$1,000,000 each occurrence, \$2,000,000 aggregate.
- b. Vehicle / Bodily Injury combined single limit vehicle bodily injury and property damage liability \$500,000 each occurrence.