

WHATCOM COUNTY CONTRACT INFORMATION SHEET

Whatcom County Contract No. _____

Originating Department: _____	
Division/Program: <i>(i.e. Dept. Division and Program)</i> _____	
Contract or Grant Administrator: _____	
Contractor's / Agency Name: _____	
Is this a New Contract? If not, is this an Amendment or Renewal to an Existing Contract? Yes No Yes No If Amendment or Renewal, (per WCC 3.08.100 (a)) Original Contract #: _____ Does contract require Council Approval? Yes No If No, include WCC: _____ Already approved? Council Approved Date: _____ (Exclusions see: Whatcom County Codes 3.06.010, 3.08.090 and 3.08.100) Is this a grant agreement? Yes No If yes, grantor agency contract number(s): _____ ALN: _____ Complete ALN field if contract involves direct federal grants/ cooperative agreements or pass-through federal funds. Is this contract grant funded? Yes No If yes, Whatcom County grant contract number(s): _____ Is this contract the result of a RFP or Bid process? Contract Yes No If yes, RFP and Bid number(s): _____ Cost Center: _____ Is this agreement excluded from E-Verify? No Yes If no, include Attachment D Contractor Declaration form. If YES, indicate exclusion(s) below: ☐ Professional services agreement for certified/licensed professional. Goods and services provided due to an emergency ☐ Contract work is for less than \$100,000. ☐ Contract for Commercial off the shelf items (COTS). ☐ Contract work is for less than 120 days. ☐ Work related subcontract less than \$25,000. ☐ Interlocal Agreement (between Governments). ☐ Public Works - Local Agency/Federally Funded FHWA.	
Contract Amount:(sum of original contract amount and any prior amendments): \$ _____ This Amendment Amount: \$ _____ Total Amended Amount: \$ _____	Council approval required for; all property leases, all Interlocal agreements, contracts or bid awards exceeding \$75,000, and grants exceeding \$40,000 and and professional service contract amendments that have an increase greater than \$10,000 or 10% of contract amount, whichever is greater, except when: 1. Exercising an option contained in a contract previously approved by the council. 2. Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance. 3. Bid or award is for supplies. 4. Equipment is included in Exhibit "B" of the Budget Ordinance. 5. Contract is for manufacturer's technical support and hardware maintenance of electronic systems and/or technical support and software maintenance from the developer of proprietary software currently used by Whatcom County.
Summary of Scope: _____	
Term of Contract: _____	Expiration Date: _____

Contract Routing:	1. Prepared by: _____	Date: _____
	2. Attorney signoff: _____	Date: _____
	3. AS Finance reviewed: _____	Date: _____
	4. IT reviewed (if IT related): _____	Date: _____
	5. Contractor signed: _____	Date: _____
	6. Executive contract review: _____	Date: _____
	7. Council approved, if necessary: _____	Date: _____
	8. Executive signed: _____	Date: _____
	9. Original to Council: _____	Date: _____

**AMENDMENT ONE
CONTRACT BETWEEN WHATCOM COUNTY AND
Whatcom County Fire Protection District #7**

THIS AMENDMENT is to the Contract between Whatcom County and Whatcom County Fire Protection District #7, dated January 1, 2026, and designated "Whatcom County Contract No 202508031. In consideration of the mutual benefits to be derived, the parties agree to the following:

This Amendment increases the maximum consideration by \$149,951 for the county's reimbursement of up to two (2) laterals for WCFD7, resulting in a new total contract amount of \$495,488.16.

Lateral Hire. Whatcom County Fire Protection #7 also provides on-the-job training to state-certified paramedics hired by the Whatcom County Fire Protection #7 as lateral hires. Lateral paramedics are experienced and certified paramedics who are hired by the Whatcom County Fire Protection #7. Lateral Paramedics must be further trained and certified to work in Whatcom County by the Whatcom County Medical Program Director. This process typically takes approximately four (4) months; however, this onboarding training and evaluation can take as long as six (6) months.

Funding. The County shall provide funding for the 2026 Lateral Hire training program on a reimbursement basis.

This Amendment also adds the following to the Scope of Work, Exhibit C:

**Exhibit C
Funding for the 2026 Lateral Hire Training Program**

The County shall provide reimbursement funding for up to 2 lateral paramedic hires in 2026 as follows:

	Per month, per lateral	6-month cost per lateral	6-month cost for 2 laterals
Trainee Wages	\$11,674.00	\$70,049.00	\$140,088.00
Preceptor Fees	\$611.00	\$3,669.00	\$7338.00
Evaluation fees	\$210.38	\$1,262.30	\$2525.00
Total	\$13,116.00	\$74,940.00	\$149,951

Invoicing & Payment

- a. Whatcom County Fire Protection District #7 may invoice the County for reimbursable costs by the 15th of the month following the month in which the expenses were incurred.
- b. Payment shall be made within 30 days of receipt of a proper invoice.

Unless specifically amended by this agreement, all other terms and conditions of the original contract shall remain in full force and effect.

This Amendment takes effect: January 1, 2026, regardless of the date of signature.

IN WITNESS WHEREOF, Whatcom County and District 7 have executed this Amendment on the date and year below written.

Dated this day of, _____ 2025

Each person signing this Amendment represents and warrants that he or she is duly authorized and has the legal capacity to execute and deliver this addendum.

Whatcom Fire Protection District No. 7:

Ben Boyko, Fire Chief

Kendra Cristelli, Board Chair

Whatcom County: Recommend for Approval:

Brandon Waldron, Prosecuting Attorney

Approved:
Accepted for Whatcom County
Satpal Sidhu, Whatcom County Executive