# WHATCOM COUNTY CONTRACT INFORMATION SHEET

Whatcom County Contract Number: 202106002 – 1

Originating Department:				85 Health								
Division/Program: (i.e. Dept. Division and Program)				8510 Administration / 851000 Administration								
Contract or Grant Administrator:				Sue Sullivan								
Contractor's / Agency Name:				Parker Corporate Services, Inc. dba Pacific Security								
Is this a New Contract? If not, is this an Amendment or Renewal Yes □ No ⊠ If Amendment or Renewal, (per WCC				Il to an Existing Contract? Yes [				⊠ 20210	No □ 6002			
Does contract require Council Approval? Yes ⊠ No □				If No, include WCC:								
			163 🔼	INO		<u> </u>				)\		
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 of the second			contract number(s): CFDA#: 21			21.01	9/93.3	23				
Is this contract grant funded?       Yes ☒ No ☐     If yes, Whatcom County grant contract number(s):     201801023												
Is this contract the re-	cult of a DED	or Pid process	2									
Is this contract the result of a RFP or Bid process?  Yes ☑ No ☐ If yes, RFP and Bid number				):	Contract Cost Center:			COSI	660430/660480/FEMA			
Is this agreement exc	luded from E	-Verify?	No ⊵	] Y	es 🗌							
If YES, indicate exclusi	on(s) below:											
☐ Professional ser			ed/licens	ed pro	ofessio	nal.						
☐ Contract work is t						☐ Contract for Commercial off the shelf items (COTS).						
☐ Contract work is t	or less than	120 days.		☐ Work related subcontract less t			tract less tha	. ,				
☐ Interlocal Agreem	ent (betweer	n Governments	s).			☐ Public Works - Local Agency/Federally Funded FHWA.						
Contract Amount:(sum	of original co	ontract amount	and C	ouncil a	approva	l required for; all	oroperty lea	ses, contrac	ts or bid	awards <b>exc</b>	eeding	\$40,000,
any prior amendments	):					I service contract				ease greate	r than \$	10,000 or
\$ 71,736					of contract amount, whichever is greater, <b>except when:</b>							
This Amendment Amo	unt:			<ol> <li>Exercising an option contained in a contract previously approved by the council.</li> <li>Contract is for design, construction, r-o-w acquisition, prof. services, or other capital costs approved by council in a capital budget appropriation ordinance.</li> <li>Bid or award is for supplies.</li> <li>Equipment is included in Exhibit "B" of the Budget Ordinance</li> </ol>								
\$   51,752												
Total Amended Amour	nt:											
\$   123,488												
			5.	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: This contract provides funding for security services at the COVID-19 temporary housing facility and large-scale community vaccination clinics.												
Term of Contract:	7 Month					Expiration Dat	e:	12/31/202	1			
0 / 15 //	1. Prepared	by:	JT						Date:	09/09/20	21	
Contract Routing:		dget Approval	KF	R/JG					Date:	09/15/20		
3. Attorney signoff:				RB			Date:	09/17/2021				
4. AS Finance reviewed:				M Caldwell				Date:	9/16/21			
		ed (if IT related):							Date:			
	6. Contracto		A.C.						Date:			
	/. ⊏xecutive	Contract Revie	w.						Date:			
		pproved (if nece	ssary):						Date:			
	9. Executive	e signed:							Date:			
	10. Original	to Council:							Date:			

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Whatcom County Contract Number:

202106002 - 1

#### WHATCOM COUNTY CONTRACT AMENDMENT

**PARTIES:** 

Whatcom County
Whatcom County Health Department
509 Girard Street
Bellingham, WA 98225

AND CONTRACTOR: Pacific Security 2009 Iron Street Bellingham, WA

**CONTRACT PERIODS:** 

Original: 06/01/2021 – 09/30/2021 Amendment #1: 10/01/2021 – 12/31/2021

THE CONTRACT IDENTIFIED HEREIN, INCLUDING ANY PREVIOUS AMENDMENTS THERETO, IS HEREBY AMENDED AS SET FORTH IN THE DESCRIPTION OF THE AMENDMENT BELOW BY MUTUAL CONSENT OF ALL PARTIES HERETO

### **DESCRIPTION OF AMENDMENT:**

- 1. Extend the terms of the contract through 12/31/2021.
- 2. Amend the designated Administrative Officer in the original contract under "General Terms, Section 37.2, Notice", as follows:

Sue Sullivan, Environmental Health Manager Whatcom County Health Department 509 Girard Street Bellingham, WA 98225 360-778-6026 SSulliva@co.whatcom.wa.us

- 3. Amend Exhibit B Compensation, to list County FEMA funds as an additional source of funding, increase funding by \$51,752 to support the extended contract period, and indicate a final invoice deadline of 01/07/2022.
- 4. Funding for the total contract period (06/01/2021 12/31/2021) is not to exceed \$123,488.
- 5. All other terms and conditions remain unchanged.
- 6. The effective start date of the amendment is 10/01/2021.

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ALL OTHER TERMS AND CONDITIONS OF THE ORIGINAL CONTRACT AND ANY PREVIOUS AMENDMENTS THERETO REMAIN IN FULL FORCE AND EFFECT. ALL PARTIES IDENTIFIED AS AFFECTED BY THIS AMENDMENT HEREBY ACKNOWLEDGE AND ACCEPT THE TERMS AND CONDITIONS OF THIS AMENDMENT. Each signatory below to this Contract warrants that he/she is the authorized agent of the respective party; and that he/she has the authority to enter into the contract and bind the party thereto.

APPROVAL AS TO PROGRAM:  Sua Sullivan	, Environmental Health Manager	 Date
	•	Dute
Erika Lauter	bach, Health Department Director	Date
APPROVAL AS TO FORM:Royce Buckingham,	Date	
FOR THE CONTRACTOR:		
	Johnathan McBride, Operations Manager	I
Contractor Signature	Print Name and Title	Date
FOR WHATCOM COUNTY:		
Satpal Singh Sidhu, County Executive	<u> </u>	Date

## **CONTRACTOR INFORMATION:**

Pacific Security 2009 Iron Street Bellingham, WA 98225 john@pacsecurity.com

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# EXHIBIT "B" – Amendment #1 (COMPENSATION)

Budget and Source of Funding: Funding for this contract may not exceed \$123,488. Funds under the contract are made available by a grant awarded by the US Department of Treasury and subject to Section 601(a) of the Social Security Act, as amended by section 5001 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act, and Title V and VI of the CARES Act, passed through the Washington State Department of Health Emergency Preparedness & Response COVID-19 Local CARES and Epidemiology & Laboratory Capacity Grants (CFDA 21.019 & 93.323).

The contractor shall bill the County at a rate of \$21.35/hour for individual security officers and \$32.03/hour on Federal Holidays for individual security officers. Federal holidays observed include New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving Day, and Christmas Day.

**Temporary Housing Facility (THF)** – the budget for services provided at the THF is as follows:

Month	Regular Days	Total \$21.35/hour per 24 hours	Holidays	Total \$32.03/hour per 24 hours	Month Total
June	30	\$15,372	0		\$15,372
July	30	\$15,372	1	\$768.72	\$16,141
August	31	\$15,884.40	0		\$15,884
September	29	\$14,859.60	1	\$768.72	\$15,628
October	31	\$15,884.40	0		\$15,884
November	29	\$14,859.60	1	\$768.72	\$15,628
December	30	\$15,372	1	\$768.72	\$16,141
			•	TOTAL	\$110,678

**Community Vaccine Clinics (CVC)** – Number of guards, locations, dates and times of services provided at the CVC may vary. The estimated budget for services provided at the CVC is as follows:

Month	Estimated (non-Holiday) Clinic Days	Total \$21.35/hour per estimated 8 hours/week
June	13	\$2,220.40
July	12	\$2,049.60
August	13	\$2,220.40
September	13	\$2,220.40
October	8	\$1,366.40
November	8	\$1,366.40
December	8	\$1,366.40
	ESTIMATED TOTAL	\$12,810

### II. Invoicing

- 1. The Contractor shall submit invoices to (include contract/PO #) HL-BusinessOffice@co.whatcom.wa.us.
- The Contractor shall submit itemized invoices on a monthly basis in a format approved by the County. Monthly invoices
  must be submitted by the 15<sup>th</sup> of the month following the month of service. Invoices submitted for payment must include
  the items identified in the table above. Final invoices must be received by 01/07/2022.

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- 3. Payment by the County will be considered timely if it is made within 30 days of the receipt and acceptance of billing information from Contractor. The County may withhold payment of an invoice if the Contractor submits it more than 30 days after the expiration of this contract.
- 4. Invoices must include the following statement, with an authorized signature and date:

I certify that the materials have been furnished, the services rendered, or the labor performed as described on this invoice.

5. <u>Duplication of Billed Costs or Payments for Service:</u> The Contractor shall not bill the County for services performed or provided under this contract, and the County shall not pay the Contractor, if the Contractor has been or will be paid by any other source, including grants, for those costs used to perform or provide the services in this contract. The Contractor is responsible for any audit exceptions or disallowed amounts paid as a result of this contract.

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