WHATCOM COUNTY CONTRACT INFORMATION SHEET

Whatcom County Contract No. **202005003-3**

| Originating Department: | Sheriff's Office | | | | |
|---|---|--|--|--|--|
| Division/Program: (i.e. Dept. Division and Program) | Corrections/Alternative Programs | | | | |
| Contract or Grant Administrator: | Laurie Reid | | | | |
| Contractor's / Agency Name: | US Forest Service | | | | |
| - | ewal to an Existing Contract? /CC 3.08.100 (a)) Original Contract #: 202005003 | | | | |
| Does contract require Council Approval? Yes O No O Already approved? Council Approved Date: | If No, include WCC: (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 in the second s | | | | | |
| Is this contract grant funded? Yes No No If yes, Whatcom County grant of | contract number(s): 202005003-3 | | | | |
| Is this contract the result of a RFP or Bid process? Yes No No If yes, RFP and Bid number(s): | Contract Cost Center: | | | | |
| Is this agreement excluded from E-Verify? No O Yes • | If no, include Attachment D Contractor Declaration form. | | | | |
| Contract work is for less than \$100,000. Contract work is for less than 120 days. Interlocal Agreement (between Governments). Contract Amount:(sum of original contract amount and any prior amendments): \$\frac{244,008.00}{5.000}\$ This Amendment Amount: \$\frac{109,512.00}{5.000}\$ Total Amended Amount: \$\frac{353,520.00}{5.000}\$ Council approv \$\frac{40,000}{5.000}\$, and prior amendments is capital cos apital cos 3. Bid or away 4. Equipment 5. Contract is electronic selectronic selectron | fessional. Goods and services provided due to an emergency Contract for Commercial off the shelf items (COTS). Work related subcontract less than \$25,000. Public Works - Local Agency/Federally Funded FHWA. Tal required for; all property leases, contracts or bid awards exceeding rofessional service contract amendments that have an increase greater r 10% of contract amount, whichever is greater, except when: an option contained in a contract previously approved by the council of for design, construction, r-o-w acquisition, prof. services, or other its approved by council in a capital budget appropriation ordinance. The supplies is included in Exhibit "B" of the Budget Ordinance. To manufacturer's technical support and hardware maintenance of systems and/or technical support and software maintenance from the | | | | |
| Whatcom County provides a Jail Work Crew to the US Forestry Service for the purpose of improving the National Forest System lands and providing job training for inmates. This Amendment adds more money to the Grant. Term of Contract: 1 year, 10 months Description Date: 04/01/2025 | | | | | |
| Contract Routing: 1. Prepared by: Laurie Reid | Date: 06/05/23 | | | | |
| Attorney signoff: AS Finance reviewed: IT reviewed (if IT related): Contractor signed: Submitted to Exec.: Council approved (if necessary): Executive signed: Original to Council: | Date: 6.6.23 Date: 6.6.23 Date: 0.6.23 Date: | | | | |



| | MODIFICATION O | E CDANT | OD A CDEEMENT | | PAGE | OF PAGES |
|--|---|--|---------------------------------|--------------|-----------|------------|
| | MODIFICATION O | r GRANI | OR AGREEMENT | | 1 | 3+Att. |
| | VICE GRANT/AGREEMENT NUMBER: | | | 3 MODIFICAT | TION NUME | BER: |
| | 00-009 (Whatcom County | 202005003- | * | 003 | | |
| | try Work Crew) | | | | | |
| 4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4): | | 5. NAME/ADDRESS OF U.S. FOREST PROJECT/ACTIVITY (unit name, stree | | | ERING | |
| Mt. Baker-Snoqualmie National Forest | | Mt. Baker-Snoqualmie Nat | ional Fores | t | | |
| 2930 Wetmore Ave., Ste. 3A | | 810 State Route 20 | | | | |
| Everett, WA 98201 | | Sedro-Woolley, WA 98284 | | | | |
| 6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip + 4, county): | | 7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only): | | | | |
| Whatcom Coun | nty | | | | | |
| 311 Grand AVE STE 503 | | | | | | |
| Bellingham, Washington 98225-4050 | | | | | | |
| 8. PURPOSE OF MODIFICATION | | | | | | |
| CHECK ALL | This modification is issued p | ursuant to the | modification provision in the | ne grant/agr | eement | |
| THAT APPLY: | referenced in item no. 1, above. | | | | | |
| | CHANGE IN PERFORMANCE PERIOD: | | | | | |
| \boxtimes | CHANGE IN FUNDING: Add funds in the amount of \$109,512.00 | | | | | |
| \boxtimes | ADMINISTRATIVE CHANGES: Update Provisions PAYMENT/REIMBURSEMENT; NONDISCRIMINATION. | | | | | |
| | See Block 9 Below. | | | | | |
| | OTHER (Specify type of modificat | | | | | |
| | ed herein, all terms and conditions | of the Grant/A | Agreement referenced in 1, abov | e, remain un | changed a | nd in full |
| force and effect. | | | | | | |

9. ADDITIONAL SPACE FOR DESCRIPTION OF MODIFICATION (add additional pages as needed):

This modification to the agreement with Whatcom County (the County) adds funds in the amount of \$109,512.00 to continue supporting the job training program through public lands management and ecosystem management projects, as described in the original agreement and as oulined in the revised Financial Plan, Attachment A.3. Previously obligated funding unspent remains available.

Original Agreement \$191,548.00

Mod 001 \$34,460.00

Mod 002 \$18,000.00

Mod 003 \$109,512.00

Revised Total \$353,520.00

Update the following Provisions:

PAYMENT/REIMBURSEMENT. The U.S. Forest Service shall reimburse the County for the U.S. Forest Service's share of actual expenses incurred, not to exceed the additional \$109,512.00 funds shown in the Financial Plan A.3, to the current available, for a revised total not to exceed \$353,520.00. In order to approve a Request for Reimbursement, the U.S. Forest Service shall review such requests to ensure payments for reimbursement are in compliance and otherwise consistent with the terms of the agreement. The U.S. Forest Service shall make payment upon receipt of the County's monthly invoice. Each invoice from the County shall display the total project costs for the billing period, separated by U.S. Forest Service and the County's share. In kind contributions must be displayed as a separate line item and must not be included in the total project costs available for reimbursement. The final invoice must display the County's full match towards the project, as shown in the financial plan, and be submitted no later than 120 days from the expiration date.

Send Invoice to: SM.FS.ASC_GA@usda.gov Send Copy to: Nikolai.Ferrell@usda.gov

LIMITATION OF FUNDS. U.S. Forest Service's additional funds in the amount of \$109,512.00 are currently available for performance of this agreement through April 1, 2025. All previously obligated funds remain available. The older funding should be expended first. The U.S. Forest Service's obligation for performance of this agreement beyond this date is contingent upon the availability of appropriated funds from which payment can be made. There is no legal liability on the part of the U.S. Forest Service for any payment may arise for performance under this agreement beyond this amount until the County receives notice of availability to be confirmed in a written modification by the U.S. Forest Service.



NONDISCRIMINATION. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or a part of an individual's income is derived

| | | | pply to all programs.) Persons with disabilities who | | | |
|---|--|---|---|----------------------|--|--|
| | | | print, audiotape, and so forth.) should contact USD of discrimination, write to USDA, Director, Office of | | | |
| | | | 0 or call (800) 795-3272 (voice) or (202) 720-6382 | | | |
| an equal opp | portunity provider and employer. | | | <u> </u> | | |
| | 10. ATTACHED I | OCUMENT | TATION (Check all that apply): | | | |
| | Revised Scope of Work | | | | | |
| \boxtimes | Revised Financial Plan | | | | | |
| | Other: | | | | | |
| | | 11. SIGN | IATURES | | | |
| | | | G PARTIES CERTIFY THAT THEY ARE THE OFFICIAL RE | | | |
| | | ACT IN THEIR RE | SPECTIVE AREAS FOR MATTERS RELATED TO THE ABO | OVE- | | |
| | RANT/AGREEMENT. | 11 D DATE | 11.C. U.S. FOREST SERVICE SIGNATURE | 11.D. DATE | | |
| TI.A. WHATCOM | COUNTY SIGNATURE | 11 B. DATE SIGNED | The U.S. Porest Service Signature | SIGNED | | |
| MAX | 1/ O FOR | | | 1 1 | | |
| (Signature of Signatory Official) (Signature of Signatory Official) | | | | | | |
| 11 E. NAME (type | or print): BILL ELFO | | 11.F. NAME (type or print): JODY L. WEIL | | | |
| | or print): Sheriff, Whatcom County Si | heriff's Office | 11.H. TITLE (type or print): Forest Supervisor, Mt. Bal National Forest | cer-Snoqualmie | | |
| 11.I. WHATCOM | COUNTY SIGNATURE | 11.J. DATE SIGNED | | | | |
| (Signature of Signa | tory Official) | | | " | | |
| 11.M. NAME (type | or print): SATPAL SINGH SIDE | HU | | | | |
| 11.O. TITLE (type | or print): Whatcom County Executive | | | | | |
| | COUNTY SIGNATURE . | 11.R. DATE | | | | |
| Approve | d via emale | SIGNED | | | | |
| <u> </u> | w -(ir) | 6.6.23 | | | | |
| (Signature of Signat | | N.T. | | 4 | | |
| | or print): BRANDON WALDRO | N | | | | |
| 11 W. TITLE (type | or print): Prosecuting Attorney | | | | | |
| | | | REVIEW | | | |
| 12.A. The author CYNT | ority and format of this modification Digital THIA MOSCOSO Date: 2 | on have been re ly signed by CYN 2023.06.02 12:21 | eviewed and approved for signature by: or high MOSCOSO 1:52 -07'00' | 12.B. DATE SIGNED | | |
| | IIA L. MOSCOSO (Mod | d. 003; 20-PA | 11060500-009) | | | |



Burden Statement

According to the Paperwork Reduction Act of 1995, an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0217. The time required to complete this information collection is estimated to average 30 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.

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To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice). USDA is an equal opportunity provider and employer.

| | | | | | L2-130 |
|-------------|--------|------------------------|--------------------|-----------|--------|
| \ttachment: | A.3 | | | | |
| | Ď | USFS Agreement No.: | 20-PA-11060500-009 | Mod. No.: | 003 |
| | Cooper | oerator Agreement No.: | | | |
| | | | | | |

Agreements Financial Plan (Short Form)

| Financial Plan Matrix: | Note: All columns ma | Note: All columns may not be used. Use depends on source and type of contribution(s), | pends on source and | d type of contribution | (s) |
|------------------------|----------------------|---|--------------------------|------------------------|--------------|
| | FOREST SERVICE | FOREST SERVICE CONTRIBUTIONS | COOPERATOR CONTRIBUTIONS | ONTRIBUTIONS | |
| | (a) | (q) | (c) | (b) | |
| | | Cash | | | |
| COST ELEMENTS | Noncash | to | Noncash | In-Kind | (e) |
| Direct Costs | | Cooperator | | | Total |
| Salaries/Labor | \$9,114.60 | \$60,992.00 | \$20,082.50 | \$203,520.00 | \$293,709.10 |
| Travel | \$2,250.00 | \$18,560.00 | \$0.00 | \$0.00 | \$20,810.00 |
| Equipment | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Supplies/Materials | \$0.00 | \$13,440.00 | \$0.00 | \$0.00 | \$13,440.00 |
| Printing | \$0.00 | \$0.00 | \$0.00 | \$0.00 | \$0.00 |
| Other | \$0.00 | \$16,520.00 | \$4,000.00 | \$0.00 | \$20,520.00 |
| Other | | | | | \$0.00 |
| Subtotal | \$11,364.60 | \$109,512.00 | \$24,082.50 | \$203,520.00 | \$348,479.10 |
| Coop Indirect Costs | | \$0.00 | \$0.00 | | \$0.00 |
| FS Overhead Costs | \$1,704.69 | | | | \$1,704.69 |
| Total | \$13,069.29 | \$109,512.00 | \$24,082.50 | \$203,520.00 | |
| | Tot | Total Project Value: | | | \$350.183.79 |

| Matching Costs | Determination |
|--|------------------|
| Total Forest Service Share = | (f) |
| $(\mathbf{a}+\mathbf{b}) \div (\mathbf{c}) = (\mathbf{f})$ | 35.00% |
| Total Cooperator Share | (b) |
| (c+d) + (e) = (g) | 65.00% |
| Total (f+g) = (h) | (h) |
| | 100.00% |

FS Non-Cash Contribution Cost Analysis, Column (a)

| Salaries/Labor | | M | | | |
|---|---------------|-------------------|------------|-------------|------------|
| Standard Calculation | | | | | |
| Job Description | | Cost/Day | # of Days | Total | |
| FS Liason between coworkers and Whatcom | | | | | |
| County Crew Supervisor | | \$455.73 | 3 20.00 | • | \$9,114.60 |
| Total Salaries/Labor | | | | | \$9,114.60 |
| Travel | | Ī | | | |
| Standard Calculation | | | | | |
| Travel Expense | Employees | Cost/Mile | # of Miles | Total | |
| Standard Truck (Vehicle #5136) | | \$0.4 | 5 5000.00 | | 2,250.00 |
| Total Travel | 37.5 | | | | 2,250.00 |
| Subtotal Direct | Costs | To all the second | | \$11,364.60 | |
| Forest Service Overhead Cost | |] - | | | |
| Current Overhead Rate | Subtotal Dire | ect Costs | | Total | |
| 15.00% | | \$11,364.60 |) | 9 | 1,704.69 |
| Total FS Overhead Costs | | | | | 1,704.69 |
| | | | | | |

| V | VORKSHEET FO | K | |
|---|---------------------|---------------|-------------|
| FS Cash to the Coo | perator Cost A | nalysis, (| Column (b) |
| Salaries/Labor | | | |
| Standard Calculation | | - v. | |
| Job Description | # of Days | Cost/ day | Total |
| Work Crew Supervisor (10 | | | |
| hours/day@\$35.50/hr) | 1 | 28 \$355.00 | \$45,440.00 |
| Description | % salary | Salary | Total |
| Fringe Benefits (30%) | | % \$45,440.00 | |
| Crew (insurance) L&I (5 member crew @\$3/day) | 1 | 28 \$15.00 | \$1,920.00 |
| Total Salaries/Labor | | | \$60,992.00 |
| | | | 1 |
| Travel | | | |
| Standard Calculation | | | |
| | mployees # of Days | Cost/day | Total |
| Crew transport truck rental per day | 128. | 00 \$75.00 | \$9,600.00 |
| Travel Expense | # Days | Cost/Day | Total |
| Crew transport truck fuel | 128. | 00 \$70.00 | \$8,960.00 |
| Total Travel | | | \$18,560.00 |
| | | | |
| Supplies/Materials | | | |
| Standard Calculation | | | |
| Supplies/Materials | # of Days | Cost/day | Total |
| Forest Service Owned Equipment fuel | 128. | 00 \$45.00 | \$5,760.00 |
| Forest Service Owned Equipment maintenance | 128. | 00 \$50.00 | \$6,400.00 |
| Replacement tools and supplies (such as | 120. | JO 400.00 | ψο, του.υ. |
| hand tools, mower and trimmer blades, | | | |
| trimmer line, gloves, safety gear, etc.) | | | |
| ammer ame, grottee, earlety goar, etc.) | 128.0 | 00 \$10.00 | \$1,280.00 |
| Total Supplies/Materials | | | \$13,440.00 |
| | | | |
| Other Expenses | | | |
| Standard Calculation | | | |
| tem | # of Days | Cost/day | Total |
| Equipment rental - Mini excavator, backhoe, | (A) == 14 | | |
| prusher, excavator, boom lift, etc. Crew | | | |
| ransport vehicle is not included here. | 35.0 | 00 \$300.00 | \$10,500.00 |
| Repair of Forest Service Owned tools and | 00.0 | ,0 \$300.00 | \$10,300.00 |
| equipment: hydro hoses,tracks,tuneups, | | | |
| pearings,rollers,pulleys, blades,welding | | | |
| spark plugs,etc. | | | |
| spark plugs, etc. | 25.0 | 0 \$160.00 | \$4,000.00 |
| Satellite Phone | 128.0 | | \$896.00 |
| Cell Phone | 128.0 | | \$640.00 |
| Aiscellaneous expenses (hand sanitizer, | 120.0 | υ ψυμου | \$040.00 |
| portable outhouse waste disposal, etc.) | | | 0404.00 |
| | | | \$484.00 |
| otal Other | | | \$16,520.00 |
| Subtotal Direct C | osts | \$ | 109,512.00 |
| | | | , |
| Cooperator Indirect Costs | | | |
| Current Overhead Rate Sul | btotal Direct Costs | | Total |
| 0.00% | \$109,512.00 | | \$0.00 |
| otal Coop. Indirect Costs | | | \$0.00 |
| | | | |
| | | | |
| TOTAL COOT | | #400 | 540.00 |
| TOTAL COST | | \$109,5 | 512.00 |
| | | | |

Cooperator Non-Cash Contribution Cost Analysis, Column (c)

| Salaries/Labor | | | | |
|---|---------------|----------------------|----------------|--------------------------|
| Standard Calculation | | | | |
| Job Description | | Cost/Day | # of Days | Total |
| Admin Lieutenant (8 hours/day@\$51.63/hr) | | \$413.04 | 12.00 | \$4,956.48 |
| Fringe Benefits (30%) | | \$123.91 | 12.00 | \$1,486.94 |
| Program Sgt. (8 hours/day@\$44.93/hr) | | \$359.44 | 15.00 | \$5,391.60 |
| Fringe Benefits (30%) | | \$107.83 | 15.00 | \$1,617.48 |
| Work Crew Supervisor Training and administrative days (10 hours/day@\$34.00/hr) Fringe Benefits (30%) | | \$340.00 \$102.00 | 15.00 15.00 | \$5,100.00 \$1,530.00 |
| Total Salaries/Labor | | | | \$20,082.50 |
| Other Expenses Standard Calculation Item County Owned Trailer/Truck repairs: | | # of Days | Cost/day | Total |
| tires,brakes,radiator, belts,lights,leaf springs,hitches,doors,etc. | | 25.00 | \$160.00 | \$4,000.00 |
| Total Other | a a | | | \$4,000.00 |
| Subtotal Direct | Costs | | \$24, | 082.50 |
| Cooperator Indirect Costs | | | | |
| Current Overhead Rate 0.00% Total Coop. Indirect Costs | Subtotal Dire | ct Costs 082.50 | | Total |
| TOTAL COST | | \$ | 24,082. | 50 |

Cooperator In-Kind Contribution Cost Analysis, Column (d)

| Salaries/Labor | | | |
|----------------------|----------|-----------|-------|
| Standard Calculation | | | |
| Job Description | Cost/Day | # of Days | Total |

Work Crew Value - 5 crewmembers @ \$31.80/hr/crewmember - 10 hour work day

\$1,590.00

128

\$203,520.00

Crewmembers receive no compensation from the County; \$31.80/hour = current Independent Sector hourly rate for the value of a volunteer hour

Total Salaries/Labor \$203,520.00

Subtotal Direct Costs

\$203,520.00

TOTAL COST

\$203,520.00