

**Exhibit A**  
**Master City of San José Consultant Agreement**  
**Approved Service Order Form**  
 (Capital Projects)  
**Cover Page**

**1a.** CPMS Contract No.: 9431-1 **1B.** AC Contract No.: 665622  
**2.** Approved Service Order No. 4  
**3.** Consultant's Name: CSG Consultants, Inc.

**4.** Project Name: 9051- Bassett Street Improvement Project  
**5.** Project Location: Bassett Street  
**6.** The Consultant and the City will implement this Approved Service Order in accordance with the Master Agreement, this cover page and Attachments "A" (Tasks), "B" (Terms and Conditions), "C" (Compensation Table), and "D" (Schedule of Specific Services) which are incorporated herein by references.

**7. Budget/Fiscal:**

a. Current <b>unencumbered</b> amount in Master Agreement:	\$	\$165,335.00
b. <b>Maximum Service Order Compensation for this Approved Service Order:</b>	\$	\$10,540.00
c. New unencumbered balance in Master Agreement (7.a – 7.b):	\$	\$154,795.00

**d. Appropriation Certification:** I certify that an unexpended appropriation in the amount of the Maximum Service Order Compensation is available in the following fund(s) and that such fund(s) will be encumbered to pay for this Approved Service Order.

Fund: <u>465</u>	Appn: <u>410M</u>	RC: <u>196395</u>	Amount: <u>\$10,540.00</u>
Fund: _____	Appn: _____	RC: _____	Amount: \$ _____
Fund: _____	Appn: _____	RC: _____	Amount: \$ _____

**Authorized Signature:** Phillip Vuong Date: 9-10-21

**8. Division Analyst Approval:** Phillip Vuong Date: 9-10-21

**9. Consultant Approval:** Tom Jellison Date: 9-3-21

**10. Approval as to Form (City Attorney):**

Service Order Form Approved by the Office of the City Attorney  
 (Maximum Service Order Compensation is \$100,000 or less, and the provisions of the service order form are not altered.)

Approved as to Form: \_\_\_\_\_ Date: \_\_\_\_\_  
 (Sr.) Deputy City Attorney

**11. City Director Approval:** John Date: 9/13/21

## Attachment A: Tasks

The Consultant shall provide the services and deliverables set forth in this **Attachment A**. The Consultant shall provide all services and deliverables required by this **Attachment A** to the satisfaction of the City's contract manager.

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**General Description of Project for which Consultant will Provide Services:** The consultant will provide the construction inspection services for the sidewalk reinforcement and drill and bond dowel installation.

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### Task No. 1: Construction Engineering Inspection Support

- A. Services:** Services include providing Construction engineering support for the inspection of the sidewalk reinforcement and drill and bond dowel installation.
- B. Deliverable:** Construction engineering inspection support, as needed.
- C. Completion Time:** The Consultant must complete the services and deliverable for this task in accordance with whichever one of the following time is marked:
- On or before the following date: \_\_\_\_\_.
- On or before completion of the sidewalk reinforcement construction.

## Attachment B: Terms and Conditions

1. **City's Contract Manager:** The City's contract manager for this Approved Service Order is:

Name: Derek Yee	Phone No.: (408) 794-1957
Department: Transportation	E-mail: Derek.yee@sanjoseca.gov
Address: 1404 Mabury Rd, San Jose, CA 95133	

2. **Consultant's Contract Manager and Other Staffing:** Identified below are the following: (a) the Consultant's contract manager for this Approved Service Order, and (b) the Consultant(s) and/or employee(s) of the Consultant who will be principally responsible for providing the services and deliverables. ***If an individual identified below does not have a current Form 700 on file with the City Clerk for a separate agreement with the City, and is required to file a Form 700, the Consultant must comply with the requirements of Subsection 17.2 of the Master Agreement, entitled "Filing Form 700."***

		<u>Required to File Form 700?</u>		
		Yes Already Filed (Date Filed)	Yes Need to File	No
<b><u>Consultant's Contract Manager</u></b>				
Name: Tom Walker	Phone No.: (650)-307-9765			X
Address: 550 Pilgrim Dr., Foster City, CA 94404	E-mail: tomwalker@csgengr.com			
<b><u>Other Staffing</u></b>				
<u>Name:</u>	<u>Assignment:</u>			
1. James Mazzone	Task No. 1			X
2.				X
3.				X
3.				X

**3. Subconsultants:** Whichever of the following is marked applies to this Approved Service Order:

- The Consultant can **not** use any subconsultants.
- The Consultant can use the following subconsultants to assist in providing the required services and deliverables:

<u>Subconsultant's Name</u>	<u>Area of Work</u>
1.	
2.	
3.	

**4. Reimbursable Expenses:** If the Compensation Table set forth in **Attachment C** of this Approved Service Order states that the City will reimburse the Consultant for expenses, then only the expenses identified in Subsection 10.5.3 of the Master Agreement are Reimbursable Expenses unless the following box is marked and additional reimbursable expenses are set forth:

- In addition to the expenses identified in Subsection 10.5.3 of the Master Agreement, the following expenses are Reimbursable Expenses:

<u>Additional Reimbursable Expense(s)</u>	<u>Mark-up</u>
1. _____	_____
2. _____	_____
3. _____	_____

**Notwithstanding the foregoing, any additional reimbursable expense(s) set forth in the above table will be disregarded if the Compensation Table states that the City will *not* reimburse the Consultant for any expenses.**

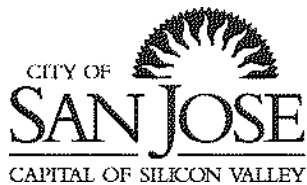
### Attachment C: Compensation Table

The City will compensate the Consultant for providing the services and deliverables set forth in **Attachment A** in accordance this Compensation Table. This Compensation Table is subject to the terms and conditions set forth in the Master Agreement, including without limitation Section 10 of the Master Agreement.

Part 1 – Compensation for Services and Deliverables			
Column 1	Column 2	Column 3	Column 4
Task Nos. from Attachment A	Basis of Compensation	Invoice Period	Compensation
Task No. 1	<input checked="" type="checkbox"/> Time & Materials <input type="checkbox"/> Fixed Fee	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Completion of Task(s) <input type="checkbox"/> Completion of Work	\$10,540.00
Part 2 – Reimbursable Expenses			
<input checked="" type="checkbox"/> No expenses are separately reimbursable. The amount(s) in Column 4 of Part 1 include(s) payment for all expenses.		<input type="checkbox"/> Expenses are separately reimbursable in the maximum amount of:	\$0.00
Part 3 – Subconsultant Costs			
<input checked="" type="checkbox"/> Subconsultant costs are <b>not</b> separately compensable. The amount(s) in Column 4 of Part 1 include(s) subconsultant costs.		<input type="checkbox"/> Subconsultant costs are separately compensable in the maximum amount of:	\$0.00
<b>Maximum Service Order Compensation</b> (sum of Parts 1 through 3):			<b>\$10,540.00</b>

## Exhibit B: Schedule of Rates and Charges (Capital Projects)

<b>Staff</b>	<b>Hourly Rate</b>	<b>Working Days</b>	<b>Hours per Day</b>	<b>Precon / Closeout</b>	<b>Total Hours</b>	<b>Fee</b>
Senior Construction Inspector	\$155	8	8	4	68	\$10,540
<b>Total Fee</b>						<b>\$10,540</b>



- FOR YOUR ELECTRONIC SIGNATURE  
 FULLY EXECUTED COPY TO FOLLOW


CITY STAFF: Derek Yee  
STAFF EMAIL: Derek.yee@sanjoseca.gov

## **SCANNED SIGNATURE AUTHORIZATION**

DATE: 9/2/21 TOTAL PAGES: (INCLUDING THIS PAGE) 1

CONSULTANT NAME: CSG Consultants Inc.  
EMAIL: tomwalker@csgengr.com  
PHONE: (650)-522-2500

I agree to use electronic signatures

SIGNATURE OF CONSULTANT: 

### **DIRECTIONS:**

REVIEW THE ENCLOSED DOCUMENT, IF IT IS ACCEPTABLE:

1. SIGN THE DOCUMENT
2. CHECK THE BOX BELOW YOUR NAME AND SIGN AGREEING TO THE USE OF ELECTRONIC SIGNATURES
3. SCAN YOUR EXECUTED DOCUMENT TOGETHER WITH THIS COVER PAGE **IN BLUE INK**
4. EMAIL THE ENTIRE DOCUMENT TO (CITY STAFF EMAIL ADDRESS):

### **TO BE COMPLETED BY CITY STAFF:**

ALTERNATIVE METHODS OF VERIFICATION:

- USE OF A PASSWORD PROTECTED WEBSITE  
 CONFIRMED BY A KNOWN TELEPHONE NUMBER  
 PERSONALLY KNOWN TO CITY STAFF

# City of San José Contract/Agreement Transmittal Form

## Route Order

## Attached / Completed

## Electronically Signed

TO:  City Attorney  
 City Manager  
 City Clerk **OR** Return to  
Dept. (circle one)

Insurance Certificates / Waivers  Electronically Signed: Yes  
 Business Tax Certificate  Audit Trail Attached (if applicable)  
 Contacted Clerk re: Form 700  Scanned Signature Authorization  
 Supplemental Memorandums (if applicable): Select One

Type of Document: Service Order

Type of Contract: Consulting Services

### REQUIRED INFORMATION FOR ALL CONTRACTS:

Existing GILES # 665622 -003

Contractor: CSG Consultants Inc.

Address: 550 Pilgrim Dr., Foster City, CA 94404

Phone: 408-307-9765

Email: tomwalker@csgengr.com

Contract Description: The consultant will provide professional consulting services to the City on an as-needed basis pursuant to individual service orders issued in accordance with the terms and conditions of this Master Agreement.

Term Start Date: 10/15/2019 Term End Date: 12/31/2022 Extension: Select one

Method of Procurement: RFP RFB, RFP or RFQ No.: RFP Date Conducted: 6/21/2019

Agenda Date (if applicable): \_\_\_\_\_

Agenda Item No.: \_\_\_\_\_

Resolution No.: \_\_\_\_\_

Ordinance No.: \_\_\_\_\_

Original Contract Amount: \$290,000.00

Amount of Increase/Decrease: \_\_\_\_\_

Option #: \_\_\_ of \_\_\_ Option Amount: \_\_\_\_\_

NTE/Updated Contract Amount: \_\_\_\_\_

Fund/Appropriation: 465/410M

Form 700 Required (Selection mandatory for processing): No

Revenue Agreement: Select one

Tax Certificate No.: 1032474488

Expiration Date: 1/15/2022

Department: DOT (51)

Department Contact: Derek Yee

Customer (Finance Only): \_\_\_\_\_

Notes: Service Order #4 Amount for \$10,540.00

Department Director Signature: \_\_\_\_\_ Date

Office of the City Manager Signature: \_\_\_\_\_ Date