**Consultant:** Interwest Consulting Group, Inc. March 2023

### Exhibit A Master City of San José Consultant Agreement Approved Service Order Form (Non-Capital Projects)

#### Cover Page

-		Covern	ugo			
1a.	Intentionally Omitted		1b.	AC Contract No	.: 33341	
2.	Approved Service Order No. 1					
3.	Consultant's Name: Interwest Cons	sulting Group, Inc. ("Consultan	t")			
4.	Project Name: SB1333 Zoning cod	le updates & future Housing El	ement ("Pr	oject")		
5.	Project Location: Citywide					
6.	The Consultant and the City will im and Attachments "A" (Tasks), "B" ( Services) which are incorporated h	Terms and Conditions), and "C	Order in a " (Compen	ccordance with the sation Table), and	e Master Agreement, Exhibit "D" (Schedule	this cover page e of Specific
7.	Budget/Fiscal:					
	a. Current unencumbered amour	nt in Master Agreement:			\$	2,000,000.00
	b. Maximum Service Order Com	pensation for this Approved	Service C	Order:	\$	88,400.00
	c. New unencumbered balance in	Master Agreement (7.a – 7.b)	:		\$	1,911,600.0
	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.					Order oved Service
	Fund: <u>239</u>	Appn: <u>2050</u>	RC: _	564411	Amount: \$ <u>88,4</u>	00.00
	Authorized Signature:	Katyla Email: kayla.do@sanjoseca.gov Date: 03/08/2023 GMT	Da		Date:	
8.	Division Analyst Approval:	Kun Email: kenneth.dekay@sanjos	e de Kay			
9.	Consultant Approval:	Date: 03/08/2023 GMT		1.	Date:	
		Email: pmeschino@interwestg Date: 03/08/2023 GMT			Date:	
	Form Name: Master Consultant A Exhibit A: App Form File: 1348133_3/T-32026 City Attorney Approval Date: Se T-24177.014.0011989839	roved Service Order Form	ts)			Page: 1 of 7

Service Order No. 1 Consultant: Interwest Consulting Group, Inc. March 2023

#### 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:

(Sr.) Deputy City Attorney

11. City Director Approval:

Chu Chang

Email: chu.chang@sanjoseca.gov Date: 03/08/2023 GMT Date:

Date:

## 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.

**General Description of Project for which Consultant will Provide Services:** SB1333 Zoning code updates and future Housing Element support work.

#### Task No. 1: Senate Bill 1333 General Plan and Zoning Alignment work

- A. <u>Services</u>: Services provided include GIS data analysis to determine the properties that need to be rezoned, writing staff reports and memos, public outreach noticing, and fielding questions from the community.
- B. <u>Deliverable</u>: The Consultant will provide the following to the City's Contract Manager: staff reports and memos, public outreach notices, maps, excel spread sheets, and updates on our rezoning map that shows which properties are being rezoned.
- C. <u>Completion Time</u>: 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: 6/30/23.
  - On or before \_\_\_\_\_ Business Days from \_\_\_\_\_\_

# Attachment B: Terms and Conditions

1. <u>City's Contract Manager</u>: The City's contract manager for this Approved Service Order is:

Name: Justin Daniels	Phone No.: 408-535-7842
Department: PBCE – Planning Division	Email: justin.daniels@sanjoseca.gov
Address: 200 E. Santa Clara St., San Jose, CA 95113	

2. <u>Consultant's Contract Manager and Other Staffing</u>: 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."* 

			Required to File Form 700?		
<u>Consultant's (</u>		Yes Already Filed (Date Filed)	Yes Need to File	No	
Name: Paul Meschino	Phone No.: 510-796-3003				<u>×</u>
Address: 39355 California St. Ste 200, Fremont, CA 94538	Email: pmeschino@interwestgrp.com				
Other					
<u>Name</u> :	<u>Assignment</u> :	<u>Email</u> :			
1. Ami Upadhyay	Task 1 – Advanced Planner – 40hrs/wk	aupadhyay@interwestgrp.com	X (4/5/2022)		
2.					
3.					

Service Order No. 1 Consultant: Interwest Consulting Group, Inc. March 2023

- **3.** <u>**Subconsultants**</u>: 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:

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

4. <u>Reimbursable Expenses</u>: 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:

Additional Reimburs	able Expense(s)	Mark-up
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.

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5. Background Check Confirmation: As the Consultant's Project Manager, I certify that Consultant has conducted or caused to be conducted a criminal history background check of the Temporary Personnel selected for this Approved Service Order and that the assigned employee(s) listed in this Approved Service Order meet the City of San José's Background Clearance Requirements.

# 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 Comp	ensation	Invoice Period			Compensation	
1	Time & Materials	Fixed Fee	🛛 Monthly	Completion of Task(s)	Completion of Work	\$88,400.00	
	☐ Time & Materials	Fixed Fee	Monthly	Completion of Task(s)	Completion of Work	\$	
	☐ Time & Materials	Fixed Fee	Monthly	Completion of Task(s)	Completion of Work	\$	
Part 2 – Reimbursable Expenses							
No expenses are separately reimbursable. The amount(s) in Column 4 of Part 1 include(s) payment for all expenses.			Expenses are separately reimbursable in the maximum amount of:			\$0.00	
Part 3 – Subconsultant Costs							
Subconsultant costs are <i>not</i> separately compensable. The amount(s) in Column 4 of Part 1 include(s) subconsultant costs.			Subconsultant costs are separately compensable in the maximum amount of:			\$0.00	
Maximum Service Order Compensation (sum of Parts 1 through 3): \$8					\$88,400.00		



For your Electronic signature Fully Executed Copy to Follow

CITY STAFF: Page Benway

STAFF EMAIL: \_page.benway@sanjoseca.gov

2

# SCANNED SIGNATURE AUTHORIZATION

DATE: 3/10/23

TOTAL PAGES: (INCLUDING THIS PAGE)

CONSULTANT NAME:

EMAIL: PHONE: pmeschino@interwestgrp.com 510-796-3003

Paul Meschino

VI agree to use electronic signatures

SIGNATURE OF CONSULTANT:

and Neile -

## **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): MELISSA.LOPEZ@SANJOSECA.GOV

## 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