

**AMENDMENT NO. 3
TO PROFESSIONAL SERVICES AGREEMENT
BETWEEN COUNTY OF MONTEREY AND
FRANK J. CONTE DBA CONTE'S GENERATOR SERVICE**

THIS AMENDMENT NO. 3 to the Professional Services Agreement between the County of Monterey, a political subdivision of the State of California (hereinafter, "County") and Frank J. Conte dba Conte's Generator Service (hereinafter, "CONTRACTOR") is hereby entered into between the County and the CONTRACTOR (collectively, the County and CONTRACTOR are referred to as the "Parties") as of the last date opposite the respective signatures.

WHEREAS, CONTRACTOR entered into a Professional Services Agreement with County on October 6, 2010, (hereinafter, "Agreement"); and

WHEREAS, Agreement was amended by the Parties on September 20, 2011 (hereinafter, "Amendment No. 1") and September 28, 2012 (hereinafter, "Amendment No. 2"); and

WHEREAS, the County has a continuing need for regular preventative maintenance and emergency repairs and parts for the diesel generators operated and maintained by the Monterey County Resource Management Agency - Public Works; and

WHEREAS, additional time and funding are necessary; and

WHEREAS, the Parties wish to further amend the Agreement to extend the term to October 1, 2014 and increase the amount by \$34,050 to allow CONTRACTOR to continue to provide services identified in the Agreement and as amended by this Amendment No. 3.

NOW, THEREFORE, the Parties agree to amend the Agreement as follows:

1. Amend the first sentence of Paragraph 1, "Services to be Provided", to read as follows:

The County hereby engages CONTRACTOR to perform, and CONTRACTOR hereby agrees to perform, the services described in Exhibits A, A-1 and A-2 in conformity with the terms of this Agreement.

2. Amend Paragraph 2, "Payments by County", to read as follows:

County shall pay the CONTRACTOR in accordance with the payment provisions set forth in Exhibits A, A-1 and A-2, subject to the limitations set forth in this Agreement. The total amount payable by County to CONTRACTOR under this Agreement shall not exceed the sum of \$94,097.13.

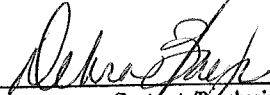
3. Amend the first sentence of Paragraph 3, "Term of Agreement", to read as follows:

The term of this Agreement is from October 1, 2010 to October 1, 2014, unless sooner terminated pursuant to the terms of this Agreement.
4. Amend Paragraph 4, "Additional Provisions/Exhibits", by adding "Exhibit A-2, Scope of Services/Payment Provisions".
5. All other terms and conditions of the Agreement remain unchanged and in full force.
6. This Amendment No. 3 shall be attached to the Agreement and incorporated therein as if fully set forth in the Agreement.


IN WITNESS WHEREOF the Parties hereto have executed this Amendment No. 3 to the Agreement as of the last date opposite the respective signatures below:

COUNTY OF MONTEREY

CONTRACTOR

By: 
Contracts/Purchasing Officer
Date: 10/1/13

**Approved as to Form and Legality
Office of the County Counsel**

By: 
Deputy County Counsel
Date: 9-30-13

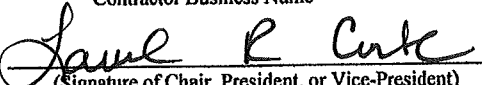
Approved as to Fiscal Provisions

By: _____
Auditor/Controller
Date: _____

Approved as to Indemnity and Insurance Provisions

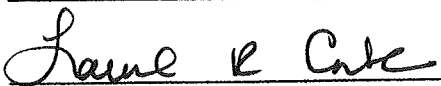
By: _____
Risk Management
Date: _____

Frank J. Conte dba Conte's Generator Service
Contractor Business Name*

By: 
(Signature of Chair, President, or Vice-President)

Its: Laurel R Conte, owner
(Print Name and Title)

Date: 9-26-2013

By: 
(Signature of Secretary, Asst. Secretary, CFO, Treasurer or Asst. Treasurer)

Its: Laurel R Conte, owner
(Print Name and Title)


Date: 9-26-2013

*INSTRUCTIONS: IF CONTRACTOR is a corporation, including limited liability and non-profit corporations, the full legal name of the corporation shall be set forth above together with the signatures of two specified officers. If CONTRACTOR is a partnership, the name of the partnership shall be set forth above together with the signature of a partner who has authority to execute this Agreement on behalf of the partnership. IF CONTRACTOR is contracting in an individual capacity, the individual shall set forth the name of the business, if any, and shall personally sign the Agreement.

IN WITNESS WHEREOF the Parties hereto have executed this Amendment No. 3 to the Agreement as of the last date opposite the respective signatures below:

COUNTY OF MONTEREY

CONTRACTOR

By: 
Contracts/Purchasing Officer
Date: 10/11/13


Frank J. Conte dba Conte's Generator Service
Contractor Business Name*

By: _____
(Signature of Chair, President, or Vice-President)

Its: _____
(Print Name and Title)

Date: _____

**Approved as to Form and Legality
Office of the County Counsel**

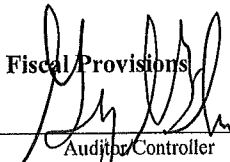
By: 
Deputy County Counsel
Date: 9-30-13

By: _____
(Signature of Secretary, Asst. Secretary, CFO, Treasurer or
Asst. Treasurer)

Its: _____
(Print Name and Title)

Date: _____

Approved as to Fiscal Provisions

By: 
Auditor/Controller
Date: 9-27-13

Approved as to Indemnity and Insurance Provisions

By: _____
Risk Management

Date: _____

*INSTRUCTIONS: IF CONTRACTOR is a corporation, including limited liability and non-profit corporations, the full legal name of the corporation shall be set forth above together with the signatures of two specified officers. If CONTRACTOR is a partnership, the name of the partnership shall be set forth above together with the signature of a partner who has authority to execute this Agreement on behalf of the partnership. IF CONTRACTOR is contracting in an individual capacity, the individual shall set forth the name of the business, if any, and shall personally sign the Agreement.

EXHIBIT A-2 – SCOPE OF SERVICES/PAYMENT PROVISIONS**CONTE'S GENERATOR SERVICE
GENERATOR MAINTENANCE AND REPAIRS
2013-2014****PUBLIC WORKS**

	Generator Site	Generator KW	Annual Service Cost	Load Bank Service Cost
1	Portable Yard	20 KW Generac	\$750.00	\$300.00
2	Portable Yard	45 KW Marathon	\$950.00	\$300.00
3	Boronda Oaks	60 KW Olympian	\$1,400.00	\$300.00
4	Las Lomas Pump Station	85 KW Kohler	\$1,400.00	\$300.00
5	Pajaro Lift Station	85 KW Kohler	\$1,400.00	\$300.00
6	Susan Street Levy Pump Station	200 KW Kohler	\$1,400.00	\$300.00
7	Miscellaneous Projected Repairs			<u>\$4,500.00</u>
	SUB-TOTAL COST			\$13,600.00

FACILITIES ADMINISTRATION

	Generator Site	Generator KW	Annual Service Cost	Load Bank Service Cost
1	Monterey Courthouse	60 KW Cummins	\$1,600.00	\$300.00
2	Monterey Courthouse	12 KW Lister	\$1,000.00	\$300.00
3	Mt. Toro Upper Site	35 KW Onan	\$1,250.00	\$300.00
4	Mt. Toro Lower	20 KW	\$1,400.00	\$300.00
5	Huckleberry	10 KW	\$750.00	\$300.00
6	Fleet Management, Lister Co. Yard	K99X157901	\$1,200.00	\$300.00
7	522 N 2 nd	30 KW	\$1,600.00	\$300.00
8	CID Building, 1 st Avenue, Marina	25 KW	\$1,200.00	\$300.00
9	Salinas Courthouse	450 KW	\$2,250.00	\$300.00
10	Miscellaneous Projected Repairs			<u>\$5,500.00</u>
	SUB-TOTAL COST			\$20,450.00

Services provided under Amendment No. 3 to the Agreement shall not exceed the sum of **\$34,050.00**



CERTIFICATE OF LIABILITY INSURANCE

CONTE01

OP ID: DS

DATE (MM/DD/YYYY)

10/01/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER G.L. Anderson Ins. Svcs., Inc. Professional Insurance Assoc. 101 Parkshore Dr., St 230 Folsom, CA 95630 GLA		Phone: 916-353-5130 Fax: 916-353-5135	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS: FAX (A/C, No):
INSURED Conte's Generator Service P.O. Box 1469 Monterey, CA 93942		INSURER(S) AFFORDING COVERAGE INSURER A: Atain Specialty Insurance Co. INSURER B: Evanston Ins. Co. INSURER C: Wesco Insurance Company INSURER D: INSURER E: INSURER F:	
		NAIC # 35378 25011	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**


THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	X		CIP190534	09/28/2013	09/28/2014	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/> Owner/Cont Prot.						PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COM/OP AGG \$ 2,000,000
							GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
B	UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			XOBW4122913	09/28/2013	09/28/2014	EACH OCCURRENCE \$ 3,000,000
	<input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 3,000,000
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$						
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	N/A	WWC3071451	10/01/2013	10/01/2014	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT \$ 1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
							E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

County of Monterey, Officers and employees are shown as Additional Insured for General Liability per form CG20330704. Insurance is Primary & Non-Contributory. Monterey County Public Works
Job Description: Various Sites Monterey County
*10 Day Notice of Cancellation Applies for Non Payment of Premium

CERTIFICATE HOLDER**CANCELLATION**

County of Monterey Department of Public Works 168 W. Alisal 2nd Floor Salinas, CA 93901	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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CI CW A01 10 11

CERTIFICATE OF INSURANCE

This certificate is issued for informational purposes only. It certifies that the policies listed in this document have been issued to the Named Insured. It does not grant any rights to any party nor can it be used, in any way, to modify coverage provided by such policies. Alteration of this certificate does not change the terms, exclusions or conditions of such policies. Coverage is subject to the provisions of the policies, including any exclusions or conditions, regardless of the provisions of any other contract, such as between the certificate holder and the Named Insured. The limits shown below are the limits provided at the policy inception. Subsequent paid claims may reduce these limits.

Certificate Holder: THE COUNTY OF MONTEREY ITS OFFICERS AGENTS AND EMPLOYEES 168 W ALISAL ST 2ND FLOOR SALINAS, CA 93901	Named Insured: FRANK CONTE 100 CALERA CANYON ROAD SALINAS CA 93908
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Automobile Liability			
Insurer Name: Allstate Insurance Company			
Policy Number: 648533407			
<input checked="" type="checkbox"/> 1 – Any Auto	<input type="checkbox"/> 2 – Owned Autos Only	<input type="checkbox"/> 3 – Owned Priv. Pass. Autos Only	
<input type="checkbox"/> 4 – Owned Autos Other Than Priv. Pass. Autos Only	<input type="checkbox"/> 5 – Owned Autos Subject to No Fault	<input type="checkbox"/> 6 – Owned Autos Subject to a Compulsory UM Law	
<input checked="" type="checkbox"/> 7 – Specifically Described Autos	<input checked="" type="checkbox"/> 8 – Hired Autos Only	<input checked="" type="checkbox"/> 9 – Nonowned Autos Only	
Policy Effective Date: 12-04-2012		Policy Expiration Date: 12-04-2013	
Limits of Insurance:	\$ 1,000,000	Combined Single Limit (each accident)	
	BI Per Person	BI Per Accident	PD Per Accident
Description of Operations/Locations/Vehicles/Endorsements/Special Provisions			
Interested Party Type: ADDITIONAL INSURED			
THIS CERTIFICATE DOES NOT GRANT ANY COVERAGE OR RIGHTS TO THE CERTIFICATE HOLDER. IF THIS CERTIFICATE INDICATES THAT THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED, THE POLICY(IES) MUST EITHER BE ENDORSED OR CONTAIN SPECIFIC LANGUAGE PROVIDING THE CERTIFICATE HOLDER WITH ADDITIONAL INSURED STATUS. THE CERTIFICATE HOLDER IS AN ADDITIONAL INSURED ONLY TO THE EXTENT INDICATED IN SUCH POLICY LANGUAGE OR ENDORSEMENT.			
Cancellation			
In the event of cancellation of any policy described above, the insurer will attempt to mail 30 days written notice to the certificate holder prior to the effective date of cancellation. However, failure to do so will not impose any duty or liability upon the insurer, its agents or representatives, nor will it delay cancellation.			

Producer: CLAUDIA DEMARANVILLE	Date:
Authorized Representative:	

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THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED – OWNERS, LESSEES OR
CONTRACTORS – AUTOMATIC STATUS WHEN
REQUIRED IN CONSTRUCTION AGREEMENT WITH YOU**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

A. Section II - Who Is An Insured is amended to include as an additional insured any person or organization for whom you are performing operations when you and such person or organization have agreed in writing in a contract or agreement that such person or organization be added as an additional insured on your policy. Such person or organization is an additional insured only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by:

1. Your acts or omissions; or
2. The acts or omissions of those acting on your behalf;

in the performance of your ongoing operations for the additional insured.

A person's or organization's status as an additional insured under this endorsement ends when your operations for that additional insured are completed.

B. With respect to the insurance afforded to these additional insureds, the following additional exclusions apply:

This insurance does not apply to:

1. "Bodily injury", "property damage" or "personal and advertising injury" arising out of the rendering of, or the failure to render, any professional architectural, engineering or surveying services, including:
 - a. The preparing, approving, or failing to prepare or approve, maps, shop drawings, opinions, reports, surveys, field orders, change orders or drawings and specifications; or
 - b. Supervisory, inspection, architectural or engineering activities.
2. "Bodily injury" or "property damage" occurring after:
 - a. All work, including materials, parts or equipment furnished in connection with such work, on the project (other than service, maintenance or repairs) to be performed by or on behalf of the additional insured(s) at the location of the covered operations has been completed; or
 - b. That portion of "your work" out of which the injury or damage arises has been put to its intended use by any person or organization other than another contractor or subcontractor engaged in performing operations for a principal as a part of the same project.

ENDORSEMENT

This Endorsement Changes the Policy - Please Read it Carefully

**PRIMARY AND NON-CONTRIBUTING INSURANCE
(Third-Party's Sole Negligence)**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART
OWNERS AND CONTRACTORS PROTECTIVE LIABILITY COVERAGE PART
PRODUCTS/ COMPLETED OPERATIONS LIABILITY COVERAGE PART
RAILROAD LIABILITY COVERAGE PART
BUSINESSOWNERS LIABILITY COVERAGE FORM

The following is added to Section IV - Commercial General Liability Conditions, Paragraph 4:

Section IV: Commercial General Liability Conditions

4. Other Insurance:

- d. Notwithstanding the provisions of sub-paragraphs a, b, and c of this paragraph 4, with respect to the Third Party shown below, it is understood and agreed that in the event of a claim or "suit" arising out of the Named Insured's sole negligence, this insurance shall be primary and any other insurance maintained by the additional insured named as the Third Party below shall be excess and non-contributory.

The Third Party to whom this endorsement applies is:

"ANY PERSON OR ORGANIZATION WITH WHOM THE INSURED HAS AGREED BY WRITTEN CONTRACT TO PERFORM SERVICES AND PRIOR TO ANY LOSS THAT ARE WITHIN THE TERMS AND CONDITIONS OF THIS POLICY TO WHICH THIS FORM IS ATTACHED".

Absence of a specifically named Third Party above means that the provisions of this endorsement apply "as required by written contractual agreement with any Third Party for whom you are performing work."

All other terms and conditions of this policy remain unchanged.

This endorsement is effective on the inception date of the policy unless otherwise stated herein. (The information below is required only when this endorsement is issued subsequent to preparation of the policy.)

Policy Number: CIP190534

Named Insured: LAUREL CONTE
DBA: CONTE'S GENERATOR SERVICE

Endorsement Effective Date: 09-28-2013



Allstate
You're in good hands.

Policy Number
648533407

COMMON POLICY CHANGE ENDORSEMENT

Allstate Insurance Company

Endorsement No. 005

Named Insured FRANK CONTE

Effective Date: 10-01-13

12:01 A.M., Standard Time

Agent Name CLAUDIA DEMARANVILLE

POLICY CHANGES ENDORSEMENT DESCRIPTION (CONT'D)

THE FOLLOWING ADDITIONAL INTEREST (WC) HAS BEEN CHANGED FROM:
100 CALERA CANYON ROAD
SALINAS CA 93908
TO:
100 CALERA CANYON RD
SALINAS CA 93908-9433

THE FOLLOWING ADDITIONAL INTEREST (ADDITIONAL NAMED INSURED) HAS BEEN ADDED TO THE POLICY:

THE COUNTY OF MONTEREY, ITS OFFICERS, AGENTS AND EMPLOYEES. IT IS UNDERSTOOD AND AGREED THAT THE INSURANCE IS PRIMARY AND ANY OTHER INSURANCE MAINTAINED BY THE ADDITIONAL INSURED SHALL BE EXCESS ONLY AND NOT CONTRIBUTING WITH THIS INSURANCE
168 W ALISAL ST 2ND FLOOR
SALINAS CA 93901

THE FOLLOWING FORM(S) HAS BEEN DELETED:
NA CW 02 10-11 CONVERSION LTR CO60 TO CO10

THE FOLLOWING FORM(S) HAS BEEN ADDED:
AQ CW A01 10-11 QUOTE PROPOSAL NS
AQCWA01 SA 10-11 QUOTE PROPOSAL CW

THE FOLLOWING FORM(S) HAS BEEN AMENDED:
DM CW 50 03-12 ADDITIONAL INSURED CITY OF MONTEREY

THE FOLLOWING FORM(S) HAS BEEN DELETED:
TA CA 01 10-11 CA-UM/WAIVER OF COLL COV SELECT/REJECT

ALL OTHER TERMS AND CONDITIONS REMAIN THE SAME

REMOVAL PERMIT

If this policy includes the Commercial Property Coverage Part, the following applies with respect to the Coverage Part:

If Covered Property is removed to a new location that is described on this Policy Change, you may extend this insurance to include that Covered Property at each location during the removal. Coverage at each location will apply in the proportion that the value at each location bears to the value of all Covered Property being removed. This permit applies up to 10 days after the effective date of this Policy Change; after that, this insurance does not apply at the previous location.

DM CW 30 0110

Allstate Insurance Company

Insured Copy



COUNTY OF MONTEREY

PURCHASE ORDER

ORDER DATE 10-21-2013

BSC 3000 0000002527

IMPORTANT

THE ABOVE NUMBER AND SHIP TO DEPARTMENT MUST
APPEAR ON ALL SHIPPING LABELS, PACKING SLIPS,
TRANSPORT DOCUMENTS, INVOICES AND CORRESPONDENCE.

VENDOR
FRANK J CONTE
CONTE GENERATOR SERVICE
P O Box 1469
Monterey CA 93942

S H I P T O
PUBLIC WRK
168 W. ALISAL ST.,
2ND FLOOR
SALINAS CA 93901

B I L T O
RMA FINANCE
168 W ALISAL STREET
2ND FLOOR
SALINAS CA 93901

VENDOR NUMBER: CV000001760

DELIVERY DATE:

F.O.B.:

ITEM	QUANTITY	UNIT	COMMODITY CODE	ITEM DESCRIPTION	UNIT PRICE	SALES TAX	EXTENDED PRICE
				PURCH DESC: ***AMENDMENT NO. 3 TO THE PSA EXTENDS THE TERM OF THE PSA FROM 10/01/13 TO 10/01/14 AND INCREASES THE AMOUNT BY \$34,050.00 FOR A TOTAL AMOUNT NOT TO EXCEED \$94,097.13*** ***AMENDMENT NO. 2 TO THE PSA EXTENDS THE TERM OF THE PSA FROM 10/01/12 TO 10/01/13 AND INCREASES PO BY \$35,047.13*** ***AMENDMENT NO. 1 TO THE PSA EXTENDS THE TERM OF THE PSA FROM 10/01/2011 TO 10/01/2012.*** BLANKET SERVICE CONTRACT issued to Frank J conte DBA Conte's Generator Service for the furnishings of: Professional Services Agreement between Frank J Conte dba Conte's Generator Service and the County of Monterey to provide regular preventative maintenance and emergency repairs and parts for the diesel generators located at the pumping stations that the Monterey County Department of Public Works operate and maintains for a total amount not to exceed \$25,000.00 for the term October 1, 2010 to October , 2011. The total of the purchase order is not to exceed \$18,568.81. ***This Blanket Purchase Order is valid from 07/01/13 through 10/01/13*** (Replaces Prior Year PO# BSC0000002080)			
1	0.0		93639	COMM LINE DESC: Generators, Portable & Stationary, Incl Parts & Accs Maint & MSDS: Not Required	.00	.00	48,939.69
				002 - 3000 - 8195 - RMA012 - 6321 - - - 24489.69			
				001 - 3000 - 8176 - RMA006 - 6321 - - - 24450.00			

RECEIVED
BY mm DATE 10/01/13

RECEIVED
BY *mm* DATE *10/21/13*

THE SHADED ROWS ARE FOR MONTEREY COUNTY DEPARTMENT USE ONLY

ORDER TOTAL 48,939.69

All Vendors are required to review the Monterey County general terms and conditions which apply to all contracts, purchase orders, and other electronic procurements made with the County unless otherwise noted. Said terms and conditions can be found on the County website at http://www.co.monterey.ca.us/admin/terms_conditions.htm

TAX EXEMPTION INFORMATION:
FEDERAL EXCISE TAX EXEMPTION NUMBER 94-6000524

COUNTY BUYER INFORMATION

EMAIL:

TELEPHONE:

AUTHORIZED BY COUNTY OF MONTEREY
DEPUTIZED PURCHASING AGENT

Michael R. Te...

PRINT DATE: 11/20/13

CONTRACTS/PURCHASING DIVISION
168 W. Alisal St. 3rd Floor, Salinas, CA 93901

PAGE NUMBER: 1 OF 1