

**AMENDMENT No. 5 TO AGREEMENT BY AND BETWEEN
COUNTY OF MONTEREY & ISS FACILITY SERVICES, INC.**

THIS AMENDMENT No. 5 is made and entered into by and between ISS FACILITY SERVICES, INC., hereinafter "CONTRACTOR", and the County of Monterey, a political subdivision of the State of California, on behalf of its Health Department, hereinafter referred to as "County".

WHEREAS, the County and CONTRACTOR have heretofore entered into an Agreement to provide specialized custodial maintenance services and supplies for the County of Monterey Health Clinics, per RFP #10484, for the period of July 1, 2014 to June 30, 2016 ("Agreement"); and

WHEREAS, on or around April 1, 2016, the County and CONTRACTOR entered into an executed Amendment No. 1 to extend the term of the Agreement for one (1) year, for a new Agreement amount not to exceed \$527,676.86 for the period of July 1, 2014 to June 30, 2017; and

WHEREAS, on or around June 1, 2016, the County and CONTRACTOR entered into an executed Amendment No. 2 to extend the term of the Agreement for one (1) year, for a new Agreement amount not to exceed \$1,166,948.66 for the period of July 1, 2014 to June 30, 2018; and

WHEREAS, on or around July 1, 2017, the County and CONTRACTOR entered into an executed Amendment No. 3 to increase the total amount of the Agreement by \$47,970.92 for a new Agreement amount not to exceed \$1,214,919.28 for the period of July 1, 2014 to June 30, 2018; and

WHEREAS, on or around July 1, 2018, the County and CONTRACTOR entered into an executed Amendment No. 4 to increase the total amount of the Agreement by \$700,000 for a new Agreement amount not to exceed \$1,914,919.28 for the period of July 1, 2014 to June 30, 2020; and

WHEREAS, the County and CONTRACTOR wish to amend the Agreement, as specified below.

NOW THEREFORE, the County and CONTRACTOR hereby agree to amend the AGREEMENT in the following manner:

1. **SECTION 2.0 SCOPE OF SERVICE** shall be amended as follows: Exhibit A is replaced with Exhibit A-5. All references in the Agreement to Exhibit A shall be construed to refer to Exhibit A-3.
2. **SECTION 5.1 TERM OF AGREEMENT** is replaced as follows: The Term of the Agreement shall be July 1, 2014 to December 31, 2020. The total amount of the Agreement is increased by \$170,229 for a new amount not to exceed of \$2,085,148.28.

IN WITNESS WHEREOF, the parties have executed this AMENDMENT No. 5 on the day and year written below.

MONTEREY COUNTY

ISS FACILITY SERVICES, INC.

Contracts/Purchasing Officer

By: Jason Pitcock
Signature of Chair, President, or
Vice-President

Dated: _____

Jason Pitcock - Vice President

Printed Name and Title

Approved as to Fiscal Provisions:

DocuSigned by:
Burcu Mousa
811C33356389474...

Deputy Auditor/Controller

Dated: 05/20/2020

Dated: 5/28/2020 | 8:47 AM PDT

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

Approved as to Liability Provisions:

Risk Management

Printed Name and Title

Dated: _____

Dated: _____

Approved as to Form:

DocuSigned by:
Stacy Saetta
C0E0E1B99F444A9...

Deputy County Counsel

Dated: 5/27/2020 | 3:12 PM PDT

*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

ZONE A1: SERVICE LOCATION SPECIFICATIONS AND PRICING SHEET

HEALTH DEPARTMENT LOCATIONS	EST SQ FT	EST SQ FT CARPET	EST SQ FT TILE	EST # EXAM ROOMS	EST # SINKS IN EXAM ROOMS	EST # REST ROOMS	EST # SINKS IN REST ROOMS	EST # TOILETS/ URINALS	EST # OFFICES	EST # STORAGE/LAB/SOILED UTIL	EST # SHOWERS	EST # BABY CHANGING STATIONS	EST # EXTERNAL SINKS	EST # WATER FOUNTAINS	EST # JANITOR SINKS	EST # TOILET PAPER DISP.	EST # PAPER TOWEL DISP.	EST # SEAT COVER DISP.	EST # LIQUID SOAP DISP.	EST # JANITORIAL CLOSETS	TYPE OF SERVICE	TOTAL MONTHLY FLAT RATE	EQUIVALENT PRICE PER A SQ FT	2.5% Incr. x SQ FT eff 7/1/2020	New 2.5% MONTHLY RATE eff 7/1/2020
Monterey County Health Clinic at Marina	1,790	354	1,436	4	4	2	2	2	3	1	0	0	5	0	0	2	10	9	2	0	Five Day + Noon	\$1,067.98	0.5966	0.6116	\$1,094.68
Seaside Family Health Center After Expansion	18,572			32	33	10	11	14	20	15	1	3	7	0	3	12	40	37	12	2	Five Day + Noon	\$6,914.36	0.3723	0.3816	\$7,087.21
Seaside Family Health Center PLAYGROUND (23x29)	667	0	0	0	0	0	0	0	0	0										0	Five Day + Noon	\$397.93	0.5966	0.6115	\$407.88
ALL ZONE A1 LOCATIONS	21,029	354	1,436	36	37	12	13	16	23	16	1	3	12	0	3	14	50	46	14	2	Five Day + Noon	\$8,380.27	0.3985	0.4085	\$8,589.77
In the event Dental Space is added to this contract, the following square footage and rates will apply. County shall inform Contractor if Dental space shall be added. ** WITH DENTAL SPACE** - ETA 5/1/17. DO NOT SERVICE OR BILL DENTAL SPACE WITHOUT WRITTEN AUTHORIZATION FROM COUNTY.																									
Seaside Family Health CSVS - Dental	658			1					1												Five Day + Noon	\$244.97	0.3723	0.3816	\$251.10
ALL ZONE A1 LOCATIONS (inc.Dental space)	21,687	354	1,436	37	37	12	13	16	24	16	1	3	12	0	3	14	50	46	14	2	Five Day + Noon	\$8,625.24	0.3977	0.4077	\$8,840.87

EXHIBIT A

ZONE A2: SERVICE LOCATION SPECIFICATIONS AND PRICING SHEET

HEALTH DEPARTMENT LOCATIONS	EST SQ FT	EST SQ FT CARPET	EST SQ FT TILE	EST # EXAM ROOMS	EST # SINKS IN EXAM ROOMS	EST # REST ROOMS	EST # SINKS IN REST ROOMS	EST # TOILETS/ URINALS	EST # OFFICES	EST # STORAGE/LAB/ SOILED UTIL	EST # SHOWERS	EST # BABY CHANGING STATIONS	EST # EXTERNAL SINKS	EST # WATER FOUNTAINS	EST # JANITOR SINKS	EST # TOILET PAPER DISP.	EST # PAPER TOWEL DISP.	EST # SEAT COVER DISP.	EST # LIQUID SOAP DISP.	EST # JANITORIAL CLOSETS	TYPE OF SERVICE	TOTAL MONTHLY FLAT RATE	EQUIVALENT PRICE PER A SQ FT	2.5% Incr. x SQ FT eff 7/1/2020	New 2.5% MONTHLY RATE eff 7/1/2020
Laurel Internal Medicine Clinic (includes Medical Records space)	7,410	1,619	5,791	12	12	5	5	1	13	4	0	1	1	0	0	5	19	14	10	0	Five Day + Noon	\$3,454.31	0.4662	0.4778	\$3,540.67
Laurel Pediatrics (expanded 10/31/16)	11,985	754	11,231	20	20	4	4	4	5	4	0	2	9	2	1	4	44	44	6	1	Five Day + Noon	\$4,551.90	0.3798	0.3893	\$4,665.70
Laurel Family Practice and Laurel Vista	18,569	0	18,569	38	38	10	12	13	13	10	0	7	0	2	1	12	50	12	65	1	Five Day + Noon	\$7,540.88	0.4061	0.4163	\$7,729.40
NIDO Clinic 1441 Constitution Blvd Building 760	2,600	269	2,331	4	4	2	2	2	3	2	0	0	2	0	0	2	3	2	2	0	Five Day + Noon	\$1,552.00	0.5969	0.6118	\$1,590.74
ALL ZONE A-2 LOCATIONS:	40,564	2,642	37,922	74	74	21	23	20	34	20	0	10	12	4	2	23	116	72	83	2	Five Day + Noon	\$17,099.09	0.4215	0.4321	\$17,526.51

NIDO added effective 2/1/2020

EXHIBIT A

ZONE A3: SERVICE LOCATION SPECIFICATIONS AND PRICING SHEET

HEALTH DEPARTMENT LOCATIONS	EST SQ FT	EST SQ FT CARPET	EST SQ FT TILE	EST # EXAM ROOMS	EST # SINKS IN EXAM ROOMS	EST # REST ROOMS	EST # SINKS IN REST ROOMS	EST # TOILETS/ URINALS	EST # OFFICES	EST # STORAGE/LAB/ SOILED UTIL	EST # SHOWERS	EST # BABY CHANGING STATIONS	EST # EXTERNAL SINKS	EST # WATER FOUNTAINS	EST # JANITOR SINKS	EST # TOILET PAPER DISP.	EST # PAPER TOWEL DISP.	EST # SEAT COVER DISP.	EST # LIQUID SOAP DISP.	EST # JANITORIAL CLOSETS	TYPE OF SERVICE	TOTAL MONTHLY FLAT RATE	EQUIVALENT PRICE PER A SQ FT	2.5% Incr. x SQ FT eff 7/1/2020	New 2.5% MONTHLY RATE eff 7/1/2020
Alisal Health Center	11,761	852	10,909	16	16	10	9	10	8	8	0	3	3	2	2	10	31	30	10	2	Five Day + Noon	\$4,711.55	0.3999		
ALL Zone A3 LOCATIONS:	11,761	852	10,909	16	16	10	9	10	8	8	0	3	3	2	2	10	31	30	10	2	Five Day + Noon	\$4,711.55	0.3999	0.4099	\$4,820.80

Zone 6 Day half
 1 \$922.93
 2 \$912.60
 3 \$468.85

6 Day Full
 \$1,479.38
 \$1,785.61
 \$864.18

Note: This is a Monthly Price
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