

**AMENDMENT No. 2 TO PARAMEDIC SERVICE PROVIDER AGREEMENT  
BETWEEN  
COUNTY OF MONTEREY  
AND  
CARMEL-BY-THE-SEA**

**THIS AMENDMENT No. 2** is made to the Paramedic Service Provider Agreement (“AGREEMENT”) by and between Carmel-by-the-Sea hereinafter referred to as “PROVIDER,” and the County of Monterey, a political subdivision of the State of California, acting through its Emergency Medical Services Agency (EMSA), hereinafter referred to as “COUNTY.”

**WHEREAS**, on or about October 5, 2012, COUNTY and PROVIDER entered into an AGREEMENT for the provision of paramedic services in the County of Monterey for a period of four (4) years effective October 6, 2012; and

**WHEREAS**, on or about October 3, 2017, COUNTY and PROVIDER entered into an AGREEMENT TO RETROACTIVELY RENEW AGREEMENT, retroactive to October 6, 2016 for the provision of paramedic services in the County of Monterey; and amending the agreement to extend to June 30, 2018; and

**WHEREAS**, COUNTY and PROVIDER wish to amend the AGREEMENT to extend the AGREEMENT on the same terms and conditions to January 31, 2020.

**NOW THEREFORE**, COUNTY and PROVIDER hereby agree to amend the AGREEMENT in the following manner:

1. Section 1 of AGREEMENT shall be amended by removing “Once signed by the authorized representatives for all parties, this agreement becomes effective at 8:00 a.m. on 10-6-2012 and shall continue through June 30, 2018,” and replacing it with “Once signed by the authorized representatives for all parties, this agreement becomes effective at 8:00 a.m. on 10-6-2012 and shall continue through January 31, 2020.”
2. Except as provided herein, all remaining terms, conditions and provisions of the AGREEMENT and AGREEMENT TO RETROACTIVELY RENEW AGREEMENT shall continue in full force and effect.
3. A copy of AMENDMENT No. 2 shall be attached to the original AGREEMENT dated October 5, 2012 and shall be incorporated therein as if fully set forth in the AGREEMENT.

**IN WITNESS WHEREOF**, the parties hereto have executed this AMENDMENT No. 2 as of the last date opposite the respective signatures below.

**AMENDMENT No. 2 TO PARAMEDIC SERVICE PROVIDER AGREEMENT  
BETWEEN  
COUNTY OF MONTEREY  
AND  
CARMEL-BY-THE-SEA**

**COUNTY OF MONTEREY**

**PROVIDER**

By:   
Michael Petrie, EMSA Director

Date: 7/12/18

By:   
Department Head (if applicable)

Date: 07/02/2018

Approved as to Form<sup>1</sup>

By:   
County Counsel

Date: 6/7/18

Approved as to Fiscal Provisions<sup>2</sup>

By:   
Auditor/Controller

Date: 6-8-18

Carmel-by-the-Sea  
Contractor's Business Name\*

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

\_\_\_\_\_  
Name and Title

Date: \_\_\_\_\_

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

\_\_\_\_\_  
Name and Title

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.

<sup>1</sup>Approval by the Office of the County Counsel is required for all Agreement.

<sup>2</sup>Approval by the Auditor/Controller's Office is required for all Agreements.

**AMENDMENT No. 2 TO PARAMEDIC SERVICE PROVIDER AGREEMENT  
BETWEEN  
COUNTY OF MONTEREY  
AND  
CARMEL-BY-THE-SEA**

**COUNTY OF MONTEREY**

**PROVIDER**

By: \_\_\_\_\_

Michael Petrie, EMSA Director

Date: 7/12/18

By: \_\_\_\_\_

Department Head (if applicable)

Date: \_\_\_\_\_

Approved as to Form<sup>1</sup>

By: \_\_\_\_\_

County Counsel

Date: \_\_\_\_\_

Approved as to Fiscal Provisions<sup>2</sup>

By: \_\_\_\_\_

Auditor/Controller

Date: \_\_\_\_\_

Carmel-by-the-Sea

Contractor's Business Name\*

By: \_\_\_\_\_

(Signature of Chair, President, or Vice-President)\*

Date: \_\_\_\_\_

Name and Title

By: \_\_\_\_\_

(Signature of Secretary, Asst. Secretary, CFO, Treasurer or Asst. Treasurer)\*

THOMAS A. GAUSS, CITY CLERK

Name and Title

Date: June 23, 2018

\*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.

<sup>1</sup>Approval by the Office of the County Counsel is required for all Agreement.

<sup>2</sup>Approval by the Auditor/Controller's Office is required for all Agreements.