

AMENDMENT No. 2
to
Agreement for Professional Services
Between
Monterey County Water Resources Agency and Salinas Pump Company

The undersigned parties hereby agree to amend that certain Agreement for Professional Services between the Monterey County Water Resources Agency (hereinafter "Agency") and Salinas Pump Company, a California Corporation (hereinafter "CONTRACTOR") executed and effective on August 24, 2015, and amended on December 6, 2016 (hereinafter "Agreement").

Section 3 of the Agreement is hereby amended to read as follows:

3. Payment to CONTRACTOR; maximum liability. Subject to the limitations set forth herein, Agency shall pay to CONTRACTOR the amounts provided in Exhibit B for work completed and/or in progress pursuant this Agreement, summarized below:

Original Agreement:	\$ 156,000
Amendment No. 1:	\$ 150,000
<u>Amendment No. 2:</u>	<u>\$ 300,000</u>
Total:	\$ 606,000

The maximum amount payable to CONTRACTOR under this Agreement as amended by Amendments 1 and 2 is **\$606,000**.

All other provisions of the Agreement shall remain in full force and effect.

IN WITNESS WHEREOF, Agency and CONTRACTOR have caused this Amendment No. 2 to be executed as follows:

**MONTEREY COUNTY
WATER RESOURCES AGENCY**

SALINAS PUMP COMPANY

David E. Chardavoyne, General Manager

By _____
(signature)

DATE: _____

(print name and title)*

DATE: _____

By _____
(signature)

(print name and title)*

DATE: _____

* INSTRUCTIONS: If CONTRACTOR is a corporation (including limited liability and nonprofit corporations), the full legal name of the corporation shall be set forth together with the signatures of two specified officers. If CONTRACTOR is a partnership, the name of the partnership shall be set forth together with the signature of a partner with 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 his or her business, if any, and shall personally sign the Agreement.

**Salinas Pump Company
Amendment No. 2**

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Approved as to form:

Approved as to fiscal provisions:

Deputy County Counsel

CAO Analyst

DATE: _____

DATE: _____

Risk Management

Auditor-Controller

DATE: _____

DATE: _____