(461



# **County of Santa Cruz**

#### DEPARTMENT OF PUBLIC WORKS

701 OCEAN STREET, ROOM 410, SANTA CRUZ, CA 950604070 (931) **454-2160** FAX (631) 454-2385 TDD (831) 454-2123

AGENDA: June 22, 1999

June 10, 1999

SANTA CRUZ COUNTY BOARD OF SUPERVISORS 701 Ocean Street Santa Cruz, California 95060

SUBJECT: WASTE REDUCTION GRANT PROGRAM PROPOSAL

Members of the Board:

In accordance with the Waste Reduction Grants Program Procedures approved by your Board on June 3, 1997, the grant evaluation team convened on June 2, 1999, to rate a grant application from Karin Grobe. The evaluators gave a qualifying score to the proposal, in which Ms. Grobe proposed to continue work in assisting food waste generators in diverting this material to beneficial use. This project would be the third in a series of grant projects aiming to achieve a significant landfill diversion of food waste.

In the first phase, successfully completed in 1997, Ms. Grobe surveyed 130 food waste generators and users and studied the potential for such diversions. In the second phase, which is nearing completion, Ms. Grobe has worked individually with a small number of food waste generators to determine their specific needs and constraints and help them design a system for diverting food waste customized to their organic wastestream and their facility layout and location. Project experience to date has shown that offering direct assistance is an effective means to promote participation in the project.

The proposed third phase will allow Ms. Grobe to provide detailed hands-on technical assistance to food waste generators through the process of acquiring, setting up, operating, and maintaining on-site cornposting systems. The grant amount includes \$5,000 to partially fund the purchase price of compost systems as an added incentive for businesses and institutions to participate and agree to serve as models in the community of this new type of waste diversion technology.

According to the Procedures, Public Works has negotiated a contract with Karin Grobe. The contract is attached for your Board's approval. Total cost for the proposed project is \$25,000, and sufficient funds are available in the CSA 9C Solid Waste Budget for this purpose.

It is therefore recommended that the Board of Supervisors take the following action:

- 1. Approve an Independent Contractor Agreement with Karin Grobe for Phase Three of the Food Waste Project for a not-to-exceed amount of \$25,000.
- 2. Authorize the Director of Public Works to execute the contract on behalf of the County of Santa Cruz.

Yours truly,

JOHN A. FANTHAM Director of Public Works

JS:rw

Attachments

**RECOMMENDED** FOR APPROVAL:

County Administrative Officer

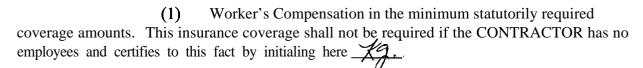
copy to: Public Works

#### INDEPENDENT CONTRACTOR AGREEMENT

THIS CONTRACT is entered into this 22nd day of June, 1999, by and between the COUNTY OF SANTA CRUZ, hereinafter called COUNTY, and KARIN GROBE hereinafter called CONTRACTOR. The parties agree as follows:

- 1. <u>DUTIES.</u> CONTRACTOR agrees to exercise special skill to accomplish the following result: Food Waste Project Phase 3, as described in Exhibit A: Scope of Work.
- 2. <u>COMPENSATION.</u> In consideration for CONTRACTOR accomplishing said result, COUNTY agrees to pay CONTRACTOR as follows: Not to exceed \$25,000, in a manner described in Exhibit A: Scope of Work.
  - 3. <u>TERM.</u> The term of this contract shall be: Date of execution until completion.
- 4. <u>EARLY TERMINATION</u>. Either party hereto may terminate this contract at any time by giving 30 days written notice to the other party.
- 5. <u>INDEMNIFICATION FOR DAMAGES. TAXES AND CONTRIBUTIONS.</u> CONTRACTOR shall exonerate, indemnify, defend, and hold harmless COUNTY (which for the purpose of paragraphs 5 and 6 shall include, without limitation, its officers, agents, employees and volunteers) from and against:
- A. Any and all claims, demands, losses, damages, defense costs, or liability of any kind or nature which COUNTY may sustain or incur or which may be imposed upon it for injury to or death of persons, or damage to property as a result of, arising out of, or in any manner connected with the CONTRACTOR'S performance under the terms of this Agreement, excepting any liability arising out of the sole negligence of the COUNTY. Such indemnification includes any damage to the person(s), or property(ies) of CONTRACTOR and third persons.
- B. Any and all Federal, State and Local taxes, charges, fees, or contributions required to be paid with respect to CONTRACTOR and CONTRACTORS officers, employees and agents engaged in the performance of this Agreement (including, without limitation, unemployment insurance, social security and payroll tax withholding).
- 6. <u>INSURANCE</u>. CONTRACTOR at its sole cost and expense, for the full term of this Agreement (and any extensions thereof), shall obtain and maintain at a minimum compliance with all of the following insurance coverage(s) and requirements. Such insurance coverage shall be primary coverage as respects COUNTY and any insurance or self-insurance maintained by County shall be excess of CONTRACTORS insurance coverage and shall not contribute to it.

#### A. Types of Insurance and Minimum Limits



(2) Automobile Liability Insurance for each of CONTRACTOR's
vehicles used in the performance of this Agreement, including owned, non-owned (e.g. owned
by CONTRACTOR's employees), leased or hired vehicles, in the minimum amount of \$500,000
combined single limit per occurrence for bodily injury and property damage. This insurance
coverage shall not be required if vehicle use by CONTRACTOR is not a material part of
performance of this Agreement and CONTRACTOR and COUNTY both certify to this fact by
initialing here/

- (3) Comprehensive or Commercial General Liability Insurance coverage in the minimum amount of \$1,000,000 combined single limit, including coverage for: (a) bodily injury, (b) personal injury, (c) broad-form property damage, (d) contractual liability, and (e) cross-liability.
- (4) Professional Liability Insurance in the minimum amount of \$1,000,000.00 combined single limit, **if**, and only if, this Subparagraph is initialed by CONTRACTOR and COUNTY \(\beta\)

#### B. Other Insurance Provisions

- (1) If any insurance coverage required in this Agreement is provided on a "Claims Made" rather than "Occurrence" form, CONTRACTOR agrees to maintain the required coverage for a period of three (3) years after the expiration of this Agreement (hereinafter "post agreement coverage") and any extensions thereof CONTRACTOR may maintain the required post agreement coverage by renewal or purchase of prior acts or tail coverage. This provision is contingent upon post agreement coverage being both available and reasonably affordable in relation to the coverage provided during the term of this Agreement. For purposes of interpreting this requirement, a cost not exceeding 100% of the last annual policy premium during the term of this Agreement in order to purchase prior acts or tail coverage for post agreement coverage shall be deemed to be reasonable.
- (2) All required Automobile and Comprehensive or Commercial General Liability Insurance shall be endorsed to contain the following clause:

"The County of Santa Cruz, its officials, employees, agents and volunteers are added as an additional insured as respects the operations and activities of, or on behalf of, the named insured performed under Agreement with the County of Santa Cruz."

(3) All required insurance policies shall be endorsed to contain the following clause:

4465

"This insurance shall not be canceled until after thirty (30) days prior written notice has been given to:

Dan deGrassi

County of Santa Cruz Department of Public Works 70 1 Ocean Street, Room 410 Santa Cruz, CA 95060

(4) CONTRACTOR agrees to provide its insurance broker(s) with a full copy of these insurance provisions and provide COUNTY on or before the effective date of this Agreement with Certificates of Insurance for all required coverages. All Certificates of Insurance shall be delivered or sent to:

Dan deGrassi

County of Santa Cruz Department of Public Works 70 1 Ocean Street, Room 410 Santa Cruz, CA 95060

- 7. <u>EOUAL EMPLOYMENT OPPORTUNITY.</u> During and in relation to the performance of this Agreement, CONTRACTOR agrees as follows:
- A. The CONTRACTOR shall not discriminate against any employee or applicant for employment because of race, color, religion, national origin, ancestry, physical or mental disability, medical condition (cancer related), marital status, pregnancy, sex, sexual orientation, age (over 18), veteran status or any other non-merit factor unrelated to job duties. Such action shall include, but not be limited to the following: recruitment; advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training (including apprenticeship), employment, upgrading, demotion, transfer. The CONTRACTOR agrees to post in conspicuous places, available to employees and applicants for employment, notice setting forth the provisions of this non-discrimination clause.
- B. If this Agreement provides compensation in excess of \$50,000 to CONTRACTOR and if CONTRACTOR employs fifteen (15) or more employees, the following requirements shall apply:
- (1) The CONTRACTOR shall, in all solicitations or advertisements for employees placed by or on behalf of the CONTRACTOR state that all qualified applicants will receive consideration for employment without regard to race, color, religion, national origin, ancestry, physical or mental disability, medical condition (cancer related), marital status, pregnancy, sex, sexual orientation, age (over 18), veteran status, or any other non-merit factor unrelated to job duties. In addition, the CONTRACTOR shall make a good faith effort to consider Minority/Women/Disabled Owned Business Enterprises in CONTRACTOR's solicitation of goods and services. Definitions for Minority/Women/Disabled Business Enterprises are available from the COUNTY General Services Purchasing Division.

- (2) The CONTRACTOR shall furnish COUNTY Affirmative Action Office information and reports in the prescribed reporting format (PER 40 12) identifying the sex, race, physical or mental disability and job classification of its employees and the names, dates and methods of advertisement and direct solicitation efforts made to subcontract with Minority/Women/Disabled Business Enterprises.
- (3) In the event of the CONTRACTORS non-compliance with the non-discrimination clauses of this Agreement or with any of the said rules, regulations, or orders said CONTRACTOR may be declared ineligible for **further** agreements with the COUNTY.
- (4) The CONTRACTOR shall cause the foregoing provisions of this Subparagraph 7B. to be inserted in all subcontracts for any work covered under this Agreement by a subcontractor compensated more than \$50,000 and employing more than fifteen (15) employees, provided that the foregoing provisions shall not apply to contracts or subcontracts for standard commercial supplies or raw materials.
- 8. <u>INDEPENDENT CONTRACTOR STATUS</u>. CONTRACTOR and COUNTY have reviewed and considered the principal test and secondary factors below and agree that CONTRACTOR is an independent contractor and not an employee of COUNTY. CONTRACTOR is responsible for all insurance (workers compensation, unemployment, etc.) and all payroll related taxes. CONTRACTOR is not entitled to any employee benefits. COUNTY agrees that CONTRACTOR shall have the right to control the manner and means of accomplishing the result contracted for herein.

<u>PRINCIPAL TEST</u>: The CONTRACTOR rather than COUNTY has the right to control the manner and means of accomplishing the result contracted for.

SECONDARY FACTORS: (a) The extent of control which, by agreement, COUNTY may exercise over the details of the work is slight rather than substantial; (b) CONTRACTOR is engaged in a distinct occupation or business; (c) In the locality, the work to be done by CONTRACTOR is usually done by a specialist without supervision, rather than under the direction of an employer; (d) the skill required in the particular occupation is substantial rather than slight; (e) The CONTRACTOR rather than the COUNTY supplies the instrumentalities, tools and work place; (f) The length of time for which CONTRACTOR is engaged is of limited duration rather than indefinite; (g) The method of payment of CONTRACTOR is by the job rather than by the time; (h) The work is part of a special or permissive activity, program, or project, rather than part of the regular business of COUNTY; (i) CONTRACTOR and COUNTY believe they are creating an independent contractor relationship rather than an employer-employee relationship; and (j) The COUNTY conducts public business.

It is recognized that it is not necessary that all secondary factors support creation of an independent contractor relationship, but rather that overall there are significant secondary factors which indicate that CONTRACTOR is an independent contractor.

By their signatures to this Agreement, each of the undersigned certifies that it is his or her considered judgment that the CONTRACTOR engaged under this Agreement is in fact an independent contractor.

- 9. CONTRACTOR represents that its operations are in compliance with applicable (467) County planning, environmental and other laws or regulations.
- 10. <u>CONTRACTOR</u> is responsible to pay prevailing wages and maintain records as required by Labor Code Section 1770 and following.
- 11. <u>NONASSIGNMENT.</u> CONTRACTOR shall not assign this agreement without the prior written consent of the COUNTY.
- 12. <u>RETENTION AND AUDIT OF RECORDS</u>. CONTRACTOR shall retain records pertinent to this Agreement for a period of not less than five (5) years after final payment under this Agreement or until a final audit report is accepted by COUNTY, whichever occurs first. CONTRACTOR hereby agrees to be subject to the examination and audit by the Santa Cruz County Auditor-Controller, the Auditor General of the State of California, or the designee of either for a period of five (5) years after final payment under this Agreement.
- 13. <u>PRESENTATION OF CLAIMS.</u> Presentation and processing of any or all claims arising out of or related to this Agreement shall be made in accordance with the provisions contained in Chapter 1.05 of the Santa Cruz County Code, which by this reference is incorporated herein.
- 14. <u>ATTACHMENTS.</u> This Agreement includes the following attachments: Attachment A: Amendment of Automobile Liability Insurance Requirement; Attachment B: Amendment of Comprehensive or Commercial General Liability Insurance Requirement; Attachment C: Insurance Representations by Contractor; Exhibit A: Scope of Work.

IN WITNESS WHEREOF, the parties hereto have set their hands the day and year first above written.

COUNTY OF SANTA CRUZ	CONTRACTOR
	KARINGROBE
By: Director of Public Works	B y : Kair Jula
Director of Public Works	Address: 23 6 Sheldon Avenue Santa Cruz, CA 95060
	Telephone: (83 1) 427-3452

APPROVED AS TO FORM:

Chief Assistant County Counsel

DISTRIBUTION: Auditor-Controller

Contractor Public Works

## Attachment A

## AMENDMENT OF AUTOMOBILE LIABILITY INSURANCE REQUIREMENT

Subparagraph 6A(2) of Contra COUNTY OF SANTA CRUZ (hereinafter called Cocalled CONTRACTOR) is amended to read as follow Reduction in Requirements	
CONTRACTOR represents to COUNTY that it own vehicles and that the result which is to be accomplish use of any such vehicle for other than CONTRACTO passengers, hazardous materials, or valuable (greate said representation COUNTY amends Section 6A(2) personal vehicles each have insurance coverage in the combined single limit per accident. COUNTY further permitting CONTRACTOR to comply with subparagattached "INSURANCE REPRESENTATIONS BY or refusal by insurance providers as to those requirer Liability Insurance requirements of this Agreement re-	hed under this Agreement does not require DR'S personal transportation only (with no r than \$5,000.00) property). In reliance on of said Agreement to require that said the minimum amount of \$100,000.00 ter reduces insurance requirements by graphs 6B(2), (3) and (4) by utilizing the CONTRACTOR" form without request to ments. In all other respects, the Automobile
The above paragraph(s) shall be operative if initialed effective	d by both parties in the space provided,
	COUNTY OF SANTA CRUZ
Law Jalu CONTRACTOR KARIN GRORE	BY

## AMENDMENT OF COMPREHENSIVE OR COMMERCIAL GENERAL LIABILITY INSURANCE REQUIREMENT

Subparagraph 6A(3) of Contract No. \_\_\_\_, dated <u>, by</u> and between County of Santa Cruz (hereinafter called COUNTY) and KARIN GROBE (hereinafter called CONTRACTOR) is amended to read as follows:

#### - / - 1. Guest Speaker Waiver

CONTRACTOR represents to COUNTY that it will accomplish the result required by this Agreement by manner and means similar to those employed by a guest speaker, namely by oral and documentary presentation to a group of persons such that no person will be exposed to reasonably foreseeable risk of personal injury or property damage. In reliance thereon, COUNTY amends the Comprehensive or Commercial General Liability Insurance requirement of said Agreement by waiving same.

#### - / - 2. Teacher. Instructor, Trainer Waiver

CONTRACTOR represents to COUNTY that it will accomplish the result required by this Agreement by manner and means similar to those employed by a teacher, instructor, or trainer and subject to the following limitations: (1) the results will be accomplished entirely within a classroom setting; (2) no minors will be involved; and (3) no person will be exposed to reasonably foreseeable risk of personal injury or property damage. In reliance thereon, COUNTY amends the Comprehensive or Commercial General Liability Insurance requirements of said Agreement by waiving same.

## 79\_ 3. <u>General No Risk Waiver</u>

CONTRACTOR represents to COUNTY that it will accomplish the result required by this Agreement by manner and means which will expose no person to reasonably foreseeable risk of personal injury or property damage, namely as follows: Majority of work to be performed in office; limited field work includes site visits and interviews. In reliance thereon, COUNTY amends the Comprehensive or Commercial General Liability Insurance requirements of said Agreement by waiving same.

The above paragraph(s) shall be operative if initial effective	ialed by both parties in the space provided,
	OUNTY OF SANTA CRUZ
Ham July CONTRACTOR	BY —

#### Attachment C

Contract	No		
Contract	INO.		

#### **INSURANCE REPRESENTATIONS BY CONTRACTOR**

On the basis of the following representations by CONTRACTOR to COUNTY as initialed and executed below, compliance with Subparagraphs 6B(2), (3) and (4), respectively of the above Agreement, shall be deemed achieved.

Additional Insured [6B(2)]. CONTRACTOR represents that as to the following required insurance coverage(s): Automobile Liability Insurance it is unable to obtain an endorsement adding COUNTY as an additional insured pursuant to Subparagraph 6B(2). In reliance thereon, COUNTY hereby waives said requirement.

Notice of Cancellation [6B(3)]. CONTRACTOR represents that as to the following fequired insurance coverage(s): Automobile Liability Insurance it is unable to obtain an endorsement including a clause requiring prior notice of cancellation of or reduction in coverage pursuant to Subparagraph 6B(3). CONTRACTOR hereby covenants and represents that it will notify COUNTY in writing at least thirty (30) days prior to cancellation of or reduction in coverage pursuant to Subparagraph 6B(3). In reliance thereon, and upon performance of said covenant, COUNTY hereby deems CONTRACTOR to be in compliance with Subparagraph 6B(3).

Certificate of Insurance [6B(4)]. CONTRACTOR represents that as to the following tequired insurance coverage(s): Automobile Liability Insurance it has been unable to obtain certification of insurance coverage pursuant to Subparagraph 6B(4). CONTRACTOR hereby covenants and represents that it has obtained, will maintain (and attaches hereto a copy of the face sheet(s) of), the contractually required insurance set forth on the attached self-certification of insurance form. In reliance thereon, COUNTY hereby deems CONTRACTOR to be in compliance with Subparagraph 6B(4).

The above paragraph(s) shaprovided, effective	all be operative if initialed by both parties in the space
	COUNTY OF SANTA CRUZ
CONTRACTOR	Ву

KARIN GROBE

Contract No.	
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#### SCOPE OF WORK EXHIBIT A

Waste Reduction Grants Program

Project: The Food Waste Project Phase Three

Contractor: Karin Grobe

1. Contractor will assist food waste generators to increase landfill diversion of food waste to beneficial use, including performance of the following tasks:

- A. Compile a list of food waste generators to contact during the project, for approval by the County. The list, which may be updated from time to time with County approval, will include camps, institutions, restaurants, grocery stores, and, at the direction of the County, schools participating in the, Santa Cruz County Public Schools Resource Conservation Program administered by the County Office of Education.
- B. Contact food waste generators and offer assistance in designing diversion systems based on their location, waste stream and capabilities. Diversion systems may include on-site management of food waste such as composting, vermicomposting, and in-vessel composting, and off-site management such as matching with animal feeders or other food waste users.
- C. Offer subsidized purchase of selected on-site compost system equipment to food waste generators, with the approval of the County.
- D. Provide technical assistance to food waste generators which choose to implement an on-site compost system, as needed, for the duration of the contract term. Technical assistance may be in the areas of purchase, set up, operation, and on-going maintenance of the system, and disposition of compost product.
- E. Design and layout a promotional brochure with illustrations and/or photographs to generate interest from food waste generators in diversion options. Printing of the brochure will be the responsibility of the County.
- F. Produce an interim report, if directed by the County, summarizing work accomplished to date, including work accomplished under Phase One and Phase Two of the Food Waste Project grants, for distribution to interested parties.
- G. Produce a final report to facilitate the transferability of project successes. This report will describe work accomplished, issues and problems met and overcome, and an itemization of garbage reduction quantities and cost savings for each generator diversion system developed or attempted. Additionally, the report will evaluate the need for additional food waste diversion work needed in the county based on the contacts made with waste generators, including separate collection of food waste. Acceptance of the

final report by the County will signal the completion of the contract.

- 2. The County will reimburse Contractor within the maximum amount of this Agreement for labor, materials, and travel expenses in carrying out Scope of Work tasks, except that ten percent (10%) of the maximum award will be withheld until submission and acceptance of the final report.
  - A. The County will pay Contractor based on invoices and time logs submitted by Contractor with progress reports. Invoices may be submitted monthly.
  - B. Labor will be reimbursed at a rate of forty dollars (\$40) per hour.
  - C. Materials will be reimbursed at cost, with submission of itemized receipts. Eligible materials costs include telephone, postage, and film processing expenses, and other costs approved in advance by the County.
  - D. Five thousand dollars (\$5,000) in grant funds will be reserved for reimbursement of the subsidized portion of the purchase price of vermicomposting and in-vessel composting system equipment purchased by food waste generators participating in this diversion project.
  - E. Documented automobile travel expenses will be reimbursed at a rate of thirty one and one half cents (\$0.3 15) per mile.



#### STATE FARMINSURANCE COMPANIES

AUTO RENEWAL 473

State Farm Mutual Automobile Insurance Company 6400 State Farm Drive Rohnert Park CA 94926

#### **1990** TOYOTA CAMRY

Covet-ages and Limits Premit  HEINTZ, DAVID M AND GROBE KARIN  236 SHELDON AVE SANTA CRUZ CA 95060-2024    Initial limitial limit	nomen raik (	SA 94920			
Covet-ages and Limits Premit  ##INTZ, DAVID M AND GROBE, KARIN 236 SHELDON AVE SANTA CRUZ CA 95060-2024    Medical100@edfpychaess@e 18.03   H 1000 Deductible Collision 25   Emergency Road Service 33   Uninsured Motor Vehicle Bodily Injury 100,000/300,000 24   Uninsured Motor Vehicle Bodily Injury 100,000/300,000 24   Uninsured Motor Vehicle Bodily Injury 100,000/300,000 24   Vour premium is based on the following If not correct, contact your agent 1590 TOYOTA CAMRY VIN JT2SV24E5L3410607   Class 1B300X1	POLICY NUMBER			DATE DUE PLEASE PA	THIS AMOUNT
338Y - 2262 A  HEINTZ, DAVID M AND GROBE KARIN 236 SHELDON AVE SANTA CRUZ CA 95060-2024  CG Medical 1000 Deductible Collision Emergency Road Service 3 U Uninsured Motor Vehicle Bodily Injury 100,000/300,000 U1 Uninsured Motor Vehicle Bodily Injury 100,000/300,000 24 U1 Uninsured Motor Vehicle Property Damage 7 1590 TOYOTA CAMRY VIN JT2SV24E5L3410607 Class 1B300X1  No' accidents, no convictions - Rate Level A++.  Driven over 7,500 miles annually. (National average is 10,000 miles annually.)  There are no male or unmarried female drivers with less than 9 years driving experience unless rated on another vehicle insured with us.  A Liability Bodily Injury 100,000/300,000 Property Damage 50,000 119 CG G Medical 1000 Deductible Collision Emergency Road Service 3 U Uninsured Motor Vehicle Bodily Injury 100,000/300,000 24 U1 Uninsured Motor Vehicle Property Damage 7 Amount Due \$206  **Property Damage 50,000 ** **Uninsured Motor Vehicle ** **Property Damage 50,000 ** ** **Uninsured Motor Vehicle ** ** **Property Damage 50,000 ** ** ** **Uninsured Motor Vehicle ** ** **Property Damage 50,000 ** ** ** **Uninsured Motor Vehicle ** ** **Property Damage 50,000 ** ** ** ** ** ** ** ** ** ** ** **	208 1029-F19-05L	DEC 19 1998 to JUN 19 1999		OEC 19 1998	\$20F <u>89</u>
Bodily Injury 100,000/300,000 Property Damage 50,000 119  236 SHELDON AVE SANTA CRUZ CA 95060-2024  SANTA CRUZ CA 95060-2024  Your premium is based on the following if not correct, contact your agent 1590 TOYOTA CAMRY VIN JT2SV24E5L3410607 Class 1B300X1  No' accidents, no convictions - Rate Level A++.  Driven over 7,500 miles annually. (National average is 10,000 miles annually.)  There are no male or unmarried female drivers with less than 9 years driving experience unless rated on another vehicle insured with us.  Bodily Injury 100,000/300,000 Property Damage 50,000 119  CG Medical1000000000000000 25  Emergency Road Service 3  U Uninsured Motor Vehicle Bodily Injury 100,000/300,000 24  U1 Uninsured Motor Vehicle Property Damage 7  Amount Due \$206  Your premium has already teen adjusted by the following:  Premium Reductions  Multicar Automatic Safety Belts Driving Safety Record 211	1 1100,000,100,000,000,000,000,000,000,0		Cove	et-ages and Limits	Premiums
SANTA CRUZ CA 95060-2024    Interpretation of the following   If not correct, contact your agent 1590 TOYOTA CAMRY   VIN JT2SV24E5L3410607   Class 1B300X1   No' accidents, no convictions - Rate Level A++.    Driven over 7,500 miles annually. (National average is 10,000 miles annually.)   There are no male or unmarried female drivers with less than 9 years driving experience unless rated on another vehicle insured with us.   Salety Record   18.00   H	HEINTZ, DA Grobe, kari	338Y - 2262 A VID M AND N <sub>AVE</sub>		Bodily Injury 100,000/300,000	119.40
Your premium is based on the following if not correct, contact your agent 1590 TOYOTA CAMRY VIN JT2SV24E5L3410607 Class 1B300X1  No' accidents, no convictions - Rate Level A++.  Driven over 7,500 miles annually. (National average is 10,000 miles annually.)  There are no male or unmarried female drivers with less than 9 years driving experience unless rated on another vehicle insured with us.  U Uninsured Motor Vehicle Bodily Injury 100,000/300,000 24  U1 Uninsured Motor Vehicle Property Damage 7  Amount Due \$206  Your premium has already teen adjusted by the following:  Premium Reductions Multicar 38  Automatic Safety Belts Driving Safety Record 211	SANTA CRUZ	CA 95060-2024	G	1000 Deductible Collision	18.03 8.39 25.09 3.68
tlass 18300X1  No' accidents, no convictions - Rate Level A++.  Driven over 7,500 miles annually. (National average is 10,000 miles annually.)  There are no male or unmarried female drivers with less than 9 years driving experience unless rated on another vehicle insured with us.  Your premium has already teen adjusted by the following:  Premium Reductions  Multicar  Automatic Safety Belts  Driving Safety Record  211			U1	Uninsured Motor Vehicle Bodily Injury 100,000/300,000	24.93
Driven over 7,500 miles annually. (National average is 10,000 miles annually.)  There are no male or unmarried female drivers with less than 9 years driving experience unless rated on another vehicle insured with us.  Your premium has already teen adjusted by the following:  Premium Reductions  Multicar  Automatic Safety Belts  Driving Safety Record  211	1590 TOYOTA CAMRY Class 1 B300X1	VIN JT2SV24E5L3410607			7.37
There are no male or unmarried female drivers with less than 9 years driving experience unless rated on another vehicle insured with us.  Multicar Automatic Safety Belts Driving Safety Record  211	Driven over 7,500 miles				d
Pleasure use or commuting to and from work or school.  Caiifornia Good Driver  51	driving experience unles	s rated on another vehicle insured with us.	N A □	Multicar Automatic Safety Belts	38.37 .95 211.51 51.72

3ur records indicate that you may qualify for a premium reduction during the coming policy term, since you or your spouse will have at least 34 years but less than 49 years of driving experience and there will be no unmarried driver's with less than 3 years driving experience in your household, unless rated as a principal operator of another car insured with State Farm. This change, effective on the day you qualify, will result in a refund check or a premium credit.

CONVENIENT PAYMENT OPTION: You may use one of State Farm's alternate payment plans which divides your present premium into two separate payments.

You may pay one half of the amount due, \$103.44, plus a handling charge of \$2.00. The amount due on DEC 19 1958 vill be \$105.44.

The remaining half will be due on FEB 17 1999. We'll send you a reminder notice.

The following list of drivers is shown for informational purposes only and does not extend or expand coverage beyond that ontained in this automobile policy. Our records indicate the persons listed below are the only licensed drivers reported to is:

DAVID HEINTZ, KARIN GROBE, BEN GROBE-HEINTZ.

the above information is inaccurate or incomplete, please contact your agent immediately to make corrections.

Your policy has the guaranteed renewal endorsement. Thanks for letting us serve you...

**5**0

### COUNTY OF SANTA CRUZ

#### REQUEST FOR APPROVAL OF AGREEMENT

TO:-Board of Supervisors County Administrative Officer County Counsel 'Auditor-Controller	FROM: PUBLIC WORKS (Dept.)  (Signature) 4-7.99 (Date)
The Board of Supervisors is hereby requ	ested to approve the attach
	(Agency)
1. Said agreement is between the 🛶	ONII OF SANIA CROZ
and KARIN GROBE, 236 SI	HELDON AVENUE, SANTA CRUZ, CA 95060 (Name & Address)
2. The agreement will provide FOC	DD WASTE PROJECT - PHASE THREE
-	
3. The agreement is needed. BECAUS	SE-THE-WORK-CAN BE DONE MOST EXPEDITIOUSLY BY CONTRACT-
4. Period of the agreement is from D	to JUNE 30, 1999
5 Anticipated cost is \$ 25,000-	00(Fixed amount; Monthly rate; Not to excel
	00.00; 7% OVERHEAD \$1,750.00; TOTAL \$26,750.00
6. Remarks: CONTRACT \$25,0  Time 22, 1999	
7. Appropriations are budgeted in —	625110 !51058 3665! (Index#) 3590 (Subobj
	OPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74
Appropriations ore not available and	will be encumbered. Contract No. 6081857 Date 6/8/19
	GARY A. KNUTSON, Auditor - Controller  By Konseld A- Silver Der
Proposal revieved and approved. It is DIRECTOR OF PUBLIC	s recommended that the Board of Supervisors approve the DEPARTMENT OF
_PUBLIC_WORKS	(Agency). Country Administrative Officer
Remarks:	
Agreement approved as to form. Date	(Analyst) By Date Office
_JS:rw	· ,
Distribution:	
Ed. of Supv White Auditor-Controller - Blue	State of California
County Counsel • Green * Co. Admin. Officer • Canary	County of Santa Cruz ) SS
Auditor-Controller - Pink Originating Dept Goldenrod	State of California, do hereby certify that the foregoing request for approval of agreement was approved
*70 Orig. Dept. if rejected.	said Board of Supervisors as recommended by the County Administrative Officer by an order duly enter
<b>3</b> ();	in the minutes of said Board on  19 County Administrative Office
ADM - 29 <b>(6/95</b> )	By Deputy Cle