



0367

County of Santa Cruz

REDEVELOPMENT AGENCY

701 OCEAN STREET, ROOM 510, SANTA CRUZ, CA 950604000

(831) 454-2280 FAX: (831) 454-3420 TDD: (831) 454-2123

TOM BURNS, AGENCY ADMINISTRATOR

January 25, 2000

Agenda: February 8, 2000

Board of Directors
Santa Cruz County Redevelopment Agency
701 Ocean Street
Santa Cruz, CA 95060

East Cliff Drive Cliff Stabilization Project - Approval of Contract for Environmental Study

Dear Members of the Board:

The Department of Public Works and the Redevelopment Agency are working to develop a conceptual design for a cliff stabilization project along East Cliff Drive between 32nd and 36th Avenues. As you may recall, your Board recently approved a consultant contract with Sanders and Associates Geostuctural Engineering to prepare a feasibility study for a type of construction called a soil nail wall. The feasibility study was needed to provide the information necessary to include the soil nail wall alternative in the Army Corp of Engineers' Detailed Project Report and to provide staff with the information needed to proceed with the discussion of the design options for the cliff stabilization project with the community. Sanders and Associates has confirmed that the soil nail wall construction method will work in this location, has supplied the Army Corp of Engineers with the needed information, and is finishing their feasibility study.

Redevelopment Agency staff has reviewed the general concept for the cliff stabilization project with the environmental planning staff in order to identify the appropriate level of environmental review. Through those discussions it was suggested that preparation of an expanded initial study could be the most appropriate approach for addressing environmental concerns and involving the community. In order to prepare the expanded initial study, staff recommends that an environmental consultant be hired to review the proposed conceptual design and prepare an analysis of the technical studies required for environmental review of this project. Secondly, preparation of an environmental study at this time will allow discussion of environmental issues and possible project mitigations with the community prior to finalization of the conceptual design.

Staff proposes to hire John Gilchrist and Associates, a local environmental consultant, working with Gerald Weber, a registered geologist with experience in coastal protection structures, to prepare the environmental study. The \$21,170 necessary for the contract is available in the Approved 1999-2000 Redevelopment Agency Budget. Redevelopment

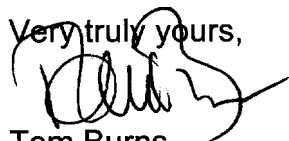
Agency staff has determined that the improvements associated with the East Cliff Drive Cliff Stabilization Project will be of benefit to the Project Area, that no other means of financing the improvements are reasonably available to the community, that the project will assist in the elimination of blight, and that the project is consistent with the Five Year Implementation Plan for the Redevelopment Agency.

Following completion of the Sanders and Associates Feasibility study, staff will have the engineering design information necessary to discuss the project design options with the community. The Gilchrist Environmental Study will also provide analysis of the environmental issues related to the design and construction of this project for community discussion. It is the intent of the Redevelopment Agency to return to the Board with recommendations for the final concept design before budget hearings in June.

It is therefore RECOMMENDED that your Board, as the Board of Directors of the Redevelopment Agency, take the following actions:

1. Approve the attached contract with John Gilchrist and Associates for environmental services for the East Cliff Drive Cliff Stabilization Project in an amount not to exceed \$21,170 and authorize the Redevelopment Agency Administrator to sign the contract on behalf of the Agency; and
2. Concur with and adopt the above-noted findings.

Very truly yours,



Tom Burns
Redevelopment Agency Administrator
TB: bl

RECOMMENDED:



Susan A. Mauriello
County Administrative Officer

Attachments

1. Independent Contractor Agreement
2. ADM 29 Request for Approval of Agreement

cc. RDA
Department of Public Works
Auditor-Controller
John Gilchrist and Associates

S:\BOARDPND\gilchrist.wpd

INDEPENDENT CONTRACTOR AGREEMENT

THIS CONTRACT is entered into this ____ day of _____, 20____, by and between the COUNTY OF SANTA CRUZ REDEVELOPMENT AGENCY, hereinafter called AGENCY, and John Gilchrist & Associates, hereinafter called CONTRACTOR. The parties agree as follows:

1. ~~CONTRACTOR~~ agrees to exercise special skill to accomplish the following result: as described in Exhibit A. "Scope of Work."

2. COMPENSATION. In consideration for CONTRACTOR accomplishing said result, COUNTY agrees to pay CONTRACTOR as follows: on a monthly basis for a total contract amount not to exceed \$21,170.00 as described in Exhibit A. 'Scone of Work - Budget. "

3. TERM. The term of this contract shall be: n t i l 12/31/2000.

4. EARLY TERMINATION. This Agreement may be terminated by either party upon not less than 30 days written notice should the other party fail substantially to perform in accordance with the terms of this Agreement through no fault to the party initiating the termination.

5. INDEMNIFICATION FOR DAMAGES, TAXES AND CONTRIBUTIONS. CONTRACTOR shall exonerate, indemnify, defend, and hold harmless AGENCY and the COUNTY OF SANTA CRUZ (hereinafter called COUNTY) (which for the purpose of paragraphs 5 and 6 shall include, without limitation, their 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 or AGENCY 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 AGENCY or 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 CONTRACTOR'S officers, employees and agents engaged in the performance of this Agreement (including, without limitation, unemployment insurance, social security and payroll tax withholding).

6. INSURANCE. CONTRACTOR, at its sole cost and expense, for the full term of this Agreement (and any extensions thereof), shall obtain and maintain at minimum compliance with all of the following insurance coverage(s) and requirements. Such insurance coverage shall be primary coverage as respects AGENCY and COUNTY, and any insurance or self-insurance maintained by AGENCY or COUNTY shall be excess of CONTRACTOR'S insurance coverage and shall not contribute to it.

If CONTRACTOR utilizes one or more subcontractors in the performance of this Agreement, CONTRACTOR shall obtain and maintain Independent Contractor's Insurance as to each subcontractor or otherwise provide evidence of insurance coverage for each subcontractor equivalent to that required of CONTRACTOR in this Agreement, unless CONTRACTOR and AGENCY both initial here JG / ____.

A. Types of Insurance and Minimum Limits

(1) Worker's Compensation in the minimum statutorily required coverage amounts. This insurance coverage shall not be ~~required~~ if the CONTRACTOR has no employees and certifies to this fact by initialing here JG.

(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 AGENCY 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 combined single limit, if, and only if, this Subparagraph is initialed by CONTRACTOR and AGENCY JG / ____.

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

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

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

County of Santa Cruz Redevelopment Agency
Agency Administrator
701 Ocean Street, Room 510
Santa Cruz, CA 95060. "

(4) CONTRACTOR agrees to provide its insurance broker(s) with a full copy of these insurance provisions and provide AGENCY 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:

County of Santa Cruz Redevelopment Agency
Agency Administrator
701 Ocean Street, Room 510
Santa Cruz, CA 95060.

7. EQUAL EMPLOYMENT OPPORTUNITY. 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, sex, sexual orientation, pregnancy, gender, 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, or 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, sex, sexual orientation, pregnancy, gender, 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 4012) 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 CONTRACTOR's 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. INDEPENDENT CONTRACTOR STATUS. CONTRACTOR and AGENCY have reviewed and considered the principal test and secondary factors below and agree that CONTRACTOR is an independent contractor and not an employee of AGENCY. CONTRACTOR is responsible for all insurance (workers compensation, unemployment, etc.) and all payroll related taxes. CONTRACTOR is not entitled to any employee benefits. AGENCY agrees that CONTRACTOR shall have the right to control the manner and means of accomplishing the result contracted for herein.

PRINCIPAL TEST: The CONTRACTOR rather than AGENCY 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, AGENCY 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 AGENCY 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 AGENCY; (i) CONTRACTOR and AGENCY believe they are creating an independent contractor relationship rather than an employer-employee relationship; and (j) The AGENCY 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. NONASSIGNMENT. CONTRACTOR shall not assign this Agreement without the prior written consent of the AGENCY.

10. RETENTION AND AUDIT OF RECORDS. 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 AGENCY, 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.

11. PRESENTATION OF CLAIMS. 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.

12. ATTACHMENTS. This Agreement includes the following attachments (identify by name or write "NONE"):

Exhibit A. "Scone of Work."

Exhibit B. "Amendment of Automobile Liability Insurance Requirement"

Exhibit C. "Insurance Representations by Contractor"

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

COUNTY OF SANTA CRUZ

By: _____
Redevelopment Agency Administrator

Date _____

CONTRACTOR: Gilchrist and Associates

By: Don Gilchrist

Date 1/26/00

Address: 226 Spring Street
Santa Cruz, CA 95060
Telephone: (83 1) 429-4355
FAX: (83 1) 425-2305

APPROVED FOR INSURANCE:

By: Janet McKinley 1-27-2000
Risk Management

APPROVED AS TO FORM:

By: Joe M. Scott
County Counsel

DISTRIBUTION: County Administrative Office
Auditor-Controller
County Counsel
Redevelopment
Risk Management
Contractor

EXHIBIT A
“Scope of Work”



0370

John Gilchrist & Associates

ENVIRONMENTAL CONSULTANTS

January 24, 2000

Ms. Sheila McDaniel
Redevelopment Agency
County of Santa Cruz
701 Ocean Street, Room 510
Santa Cruz, CA 95060

RE: Expanded Initial Study for East Cliff Drive Shoreline Stabilization Project

Dear Sheila:

In accordance with our recent conversations, I am submitting the following proposal to assist the Redevelopment Agency with preparation of environmental review documents for the proposed East Cliff Drive Cliff Stabilization Project. It is my understanding that the Agency wants to prepare an expanded Initial Study using the County's Environmental Review/Initial Study format. From information in the Initial Study, we would also prepare an executive summary understandable by the lay public. The Initial Study would address the 11 issues contained in the Agency's Scope of Work (attached), as well as other issues identified during a late January or early February community meeting. Due to difficulties in scoping and budgeting for unknown issues, it is assumed that up to 3 additional issues would be addressed, and that they are related in scope and content to the eleven issues identified by the Agency.

Gerald Weber, registered geologist, will be assisting with review and evaluation of the existing technical studies, and preparation of the Initial Study. It is our understanding that additional field work or technical studies will not be necessary to complete the Initial Study, and that our work would be limited to review, analysis and reporting of existing site specific studies and coastal erosion literature.

The following scope of work is based on our meeting and conversations, a cursory review of available studies, and a preliminary site visit.

SCOPE OF WORK

Task 1. Site Visit, Literature Review and Meeting with Design Engineer

John Gilchrist and Gerald Weber will conduct a site visit to re-familiarize themselves with the characteristics of the site and near shore environment. John Gilchrist will gather all technical studies and environmental documents relating to the project and project site. Both he and G. Weber will review all pertinent data and information. A meeting will then be scheduled with the Design Engineer, Sanders and Associates and Agency staff, to review the project design+ proposed construction methods, and the visual analysis.

Task 2. Prepare Project Description and Environmental Setting

A description of the proposed project will be prepared based on the SAGE Soil Nail Feasibility Study, verbal information from the design engineer, and any additional input from Agency staff.

It is assumed that if required the Design Engineer or Agency can provide additional project

831.429.4355

FAX 831.425.2305

22b Spring Street

Santa Cruz CA 95060

jga@cruzio.com

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description information, as well as a preliminary concept plan graphic. The existing environmental setting will be summarized from project technical studies and a field review of the site and surroundings. Appropriate graphics for the environmental setting will be prepared as necessary.

Task 3. Prepare Draft Initial Study • and Executive Summary

Using the County Initial Study format and checklist, an environmental impact evaluation and narrative description will be prepared. Brief explanations will be provided for topics for which no impacts are expected, while somewhat lengthier discussions will be prepared for impacts with some potential significance. Mitigation measures will be recommended where appropriate. The focus of the narrative evaluation will be on cliff erosion, sand movement, drainage, aesthetics, public access (beach and E. Cliff Dr.), and temporary construction impacts. Other issues such as noise and traffic may be important depending on construction timing, location and methods. The project team will review reasonable seawall project alternatives including the no project alternative and reinforcement of the "natural groin". It is assumed that wall simulation graphics, which will form the basis of the visual analysis, can be provided by SAGE.

An executive summary will also be prepared that describes the recommended project and significant Initial Study issues. A review draft Initial Study and executive summary will be delivered to Agency staff for review. Any comments received will be incorporated, and final draft documents prepared.

Task 4. Final Initial Study and Executive Summary

Following Agency review of the draft Initial Study and executive summary, 10 copies and one reproducible copy of the Initial Study and executive summary will be prepared and delivered to the Redevelopment Agency for Agency use and public distribution. John Gilchrist and Gerald Weber will attend a public meeting to present Initial Study findings. After the public meeting, comments received will be reviewed with Agency staff and responses will be prepared by JGA, as necessary. Up to 5 hours have been allocated to preparation of responses. Brief written responses will be prepared for each comment, and where appropriate, the Initial Study will be revised to reflect comments received. Ten copies of the Final IS and executive summary, and one reproducible copy will be delivered to the Agency.

Task 5. Meetings

John Gilchrist will attend up to two meetings with Redevelopment Agency staff to review the project and Initial Study. Gerald Weber will be available for one of these meetings. John Gilchrist and Gerald Weber will also be available to attend 2 evening community meetings organized by RDA staff.

BUDGET

John Gilchrist and Associates will provide the services described above on a time and material basis as detailed in the following cost estimate. The Redevelopment Agency will be billed only for those tasks completed. The cost estimate will not be exceeded without a written work scope change and prior approval from the client. Hourly billing rates for John Gilchrist and Gerald Weber are \$80 and \$100 respectively. This cost estimate is valid for 60 days.

0372

Task 1.		
	J. Gilchrist	s 960
	G. Weber	\$ 1600
Task 2.		
	J. Gilchrist	\$ 1600
	G. Weber	800
Task 3.		
	J. Gilchrist	\$ 4160
	G. Weber	4000
	Graphics	400
Task 4.		
	J. Gilchrist	\$ 2440
	G. Weber	800
Task 5.		
	J. Gilchrist	\$ 1760
	G. Weber	1600
Expenses		\$ <u>1050</u>
Total Estimated Cost		\$21,170

We appreciate the opportunity to assist the Agency and look forward to working with you on this project. Please don't hesitate to contact me if you have any questions.

Sincerely,


John Gilchrist

AMENDMENT OF AUTOMOBILE LIABILITY INSURANCE REOUIREMENT

Subparagraph 6A(2) of Contract No. _____ dated _____ by and between COUNTY OF SANTA CRUZ REDEVELOPMENT AGENCY (hereinafter called AGENCY) and John Gilchrist & Associates (hereinafter called CONTRACTOR) is amended to read as follows:

14/ Reduction in Reaquirements

CONTRACTOR represents to AGENCY that it owns, operates or utilizes one or more personal vehicles and that the result which is to be accomplished under this Agreement does not require use of any such vehicle for other than CONTRACTOR'S personal transportation only (with no passengers, hazardous materials, or valuable (greater than \$5,000.00) property). In reliance on said representation AGENCY amends Section 6A(2) of said Agreement to require that said personal vehicles each have insurance coverage in the minimum amount of \$100,000.00 combined single limit per accident. AGENCY further reduces insurance requirements by permitting CONTRACTOR to comply with subparagraphs 6B(2), (3) and (4) by utilizing the attached "INSURANCE REPRESENTATIONS BY CONTRACTOR" form without request to or refusal by insurance providers as to those requirements. In all other respects, the Automobile Liability Insurance requirements of this Agreement remain in full force and effect.

The above paragraph(s) shall be operative if initialed by both parties in the space provided, effective February 8, 2000.

COUNTY OF SANTA CRUZ
REDEVELOPMENT AGENCY

John Gilchrist
CONTRACTOR

By _____
Agency Administrator

Contract No. _____

INSURANCE REPRESENTATIONS BY CONTRACTOR

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

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

5/ Notice of Cancellation [6B(3)]. CONTRACTOR represents that as to the following required insurance coverage(s): Automobile, 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 AGENCY in writing at least thirty (30) days prior to cancellation of or reduction in coverage pursuant to Sub- paragraph **6B(3)**. In reliance thereon, and upon performance of said covenant, AGENCY hereby deems CONTRACTOR to be in compliance with Subparagraph **6B(3)**.

5/ Certificate of Insurance [6B(4)]. CONTRACTOR represents that as to the following required insurance coverage(s): Automobile, 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, AGENCY hereby deems CONTRACTOR to be in compliance with Subparagraph **6B(4)**.

The above paragraph(s) shall be operative if initialed by both parties in the space provided, effective February 8, 2000.

COUNTY OF SANTA CRUZ
REDEVELOPMENT AGENCY

John G. [Signature]
CONTRACTOR

By _____
Agency Administrator

Exhibit C

Heather Davidson

ACORD CERTIFICATE OF LIABILITY INSURANCEDATE(MM/DD/YY)
1/25/2000

PRODUCER S.N. Potter Insurance Agency, Inc. Rod Fuller License #0562307 P.O. Box 7187 Stockton CA 95267-		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED John Gilchtist & Associates 226 Spring Street , Santa Cruz CA 95060		INSURERS AFFORDING COVERAGE 0375 INSURER A: Apex Insurance Agency, Inc. INSURER B: INSURER C: INSURER D: INSURER E:	

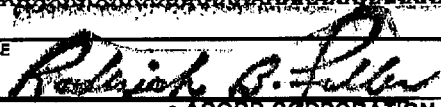
COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	IYG350981	9/1/1999	9/1/2000	EACH OCCURRENCE \$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$50,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MEDEXP (Any one person) \$
					PERSONAL & ADV INJURY \$1,000,000
					GENERAL AGGREGATE \$1,000,000
					PRODUCTS - COMP/OP AGG \$1,000,000
					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) \$
	ANY AUTO				BODILY INJURY (Per person) \$
	ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	HIRED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	ANY AUTO				OTHER THAN AUTO ONLY: EA ACC \$
					AGG \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
					\$
	DEDUCTIBLE				\$
	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTHER
					E.L. EACH ACCIDENT \$
					E.L. DISEASE - EA EMPLOYEE \$
					E.L. DISEASE - POLICY LIMIT \$
A	OTHER Prof. Liability - Soll Program	IYG350981	9/1/1999	9/1/2000	*

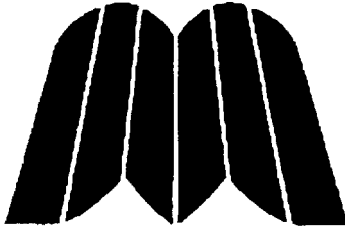
DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

*Professional Liability Claims Made /\$1,000,000 per aggregate/ \$1,000,000 per occurrence. Ded. \$1,000. The County of Santa Cruz, & The County of Santa Cruz Redevelopment Agency, their officials, employees, agents & volunteers are added as additional insureds

CERTIFICATE HOLDER County of Santa Cruz Redevelopment Agency Agency Administrator 701 Ocean Street, Room 510 Santa Cruz CA 95060-	ADDITIONAL INSURED; INSURER LETTER: CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL endeavor to mail 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT. BY FAILURE TO DO SO SHALL THE INSURER BE DEEMED TO HAVE ACCEPTED THE CANCELLATION OF THE POLICY. REPRESENTATIVE AUTHORIZED REPRESENTATIVE 
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POLICY NUMBER: AP 39003 169
 UNIT CODE: 39
 NAMED INSURED: JOHN A GILCHRIST

0376



MERCURY INSURANCE GROUP AUTOMOBILE INSURANCE IDENTIFICATION CARDS

YOUR NEW AUTOMOBILE IDENTIFICATION CARDS ARE ATTACHED BELOW.
 KEEP ONE CARD IN YOUR MOTOR VEHICLE WHILE IN OPERATION.

TO DETACH, PLEASE FOLD AND TEAR AT THE PERFORATION
 OR CUT WITH SCISSORS.

**CALIFORNIA AUTOMOBILE LIABILITY INSURANCE
 IDENTIFICATION CARD**
 Mercury Insurance Company

POLICY NUMBER
AP 39003169

EFFECTIVE / EXPIRATION DATES
09/30/1999 03/30/2000

This insurance complies with CVC §16066, §16500.5

NAMED INSURED
JOHN A GILCHRIST

ADDITIONAL DRIVER
SUSAN V GILCHRIST

YEAR MAKE VEHICLE IDENTIFICATION NUMBER
1998 HONDA 1HGCG3553WA188933

AGENT CAMPUS INS. SERV., S.C. 2354

AGENT'S PHONE NUMBER **(831) 427-3272**

24 HOUR CLAIMS: TO REPORT A CLAIM CALL YOUR AGENT.
 Outside business hours, weekends, and holidays, call toll free 1-888-313-6372.

**CALIFORNIA AUTOMOBILE LIABILITY INSURANCE
 IDENTIFICATION CARD**
 Mercury Insurance Company

POLICY NUMBER
AP 39003169

EFFECTIVE / EXPIRATION DATES
09/30/1999 03/30/2000

This insurance complies with CVC §16066, §16500.5

NAMED INSURED
JOHN A GILCHRIST

ADDITIONAL DRIVER
SUSAN V GILCHRIST

YEAR MAKE VEHICLE IDENTIFICATION NUMBER
1998 HONDA 1HGCG3553WA188933

AGENT CAMPUS INS. SERV., S.C. 2354

AGENT'S PHONE NUMBER **(831) 427-3272**

24 HOUR CLAIMS: TO REPORT A CLAIM CALL YOUR AGENT.
 Outside business hours, weekends, and holidays, call toll free 1-888-313-6372.

**CALIFORNIA AUTOMOBILE LIABILITY INSURANCE
 IDENTIFICATION CARD**

POLICY NUMBER EFFECTIVE / EXPIRATION DATES

This insurance complies with CVC §16066, §16500.5

NAMED INSURED

V O I D

YEAR MAKE VEHICLE IDENTIFICATION NUMBER

AGENT

AGENT'S WNE NUMBER

24 HOUR CLAIMS: TO REPORT A CLAIM CALL YOUR AGENT.
 Outside business hours, weekends, and holidays, call toll free 1-888-313-6372.

**CALIFORNIA AUTOMOBILE LIABILITY INSURANCE
 IDENTIFICATION CARD**

POLICY NUMBER EFFECTIVE / EXPIRATION DATES

This insurance complies with CVC §16066, §16500.5

NAMED INSURED

V O I D

YEAR MAKE VEHICLE IDENTIFICATION NUMBER

AGENT

AGENT'S PHONE NUMBER

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 Outside business hours, weekends, and holidays, call toll free 1-888-313-6372.

PLEASE FOLD ON PERFORATION FOR EASY REMOVAL

CAMPUS INS. SERV. - S C. 2354 MA 39
P O. BOX 843
SANTA CRUZ CA 95062

TELEPHONE: (408) 427-3272

POLICY NUMBER: AP 39003169
POLICY PERIOD: FROM 09/30/1998 12:01 AM TO 03/30/1999 12:01 AM

NAMED INSURED
JOHN A GILCHRIST

DRIVERS
JOHN A GILCHRIST
SUSAN V GILCHRIST

MERCURY INSURANCE COMPANY

AUTOMOBILE POLICY DECLARATIONS
IMPORTANT COVERAGE EXCLUSION

0377

APPLICABLE TO ALL COVERAGES, INCLUDING BUT NOT LIMITED TO, LIABILITY AND UNINSURED MOTORISTS, PROVIDED NOW OR LATER.
It is agreed that the insurance afforded by this policy shall not apply nor accrue to the benefit of any insured or any third party claimant when any motor vehicle is being used or operated by a person listed below regardless of where the person resides or whether the person is licensed to drive.

ANDREW WILLIAMSON

MAILING ADDRESS: 226 SPRING ST
SANTA CRUZ CA 95060

CAR	YEAR	VEHICLE DESCRIPTION	SERIAL NUMBER	COST OR VALUE	RENEWAL	PURCH. DATE	H.F. #10
1	1988	SUBARU GL 4 DR WAGON	JF2AN53D0JE464055	6000	U	01/1992	
2	1984	TOYOTA PICKUP 4X2	JT4RN58DXE5011047	4300	U	02/1995	
3	1988	HONDA ACCORD EX 4DR	1HGCG5553WA188933	22223	N	06/1998	

AR: LOSS PAYEE'S, ADDITIONAL INTERESTS OR LOSS PAYERS AND ADDITIONAL INTERESTS (A), CHANGING ADDRESSES (CA), AND RESTRICTED DRIVERS (RD) OTHER THAN THOSE LISTED ABOVE

THE INSURANCE AFFORDED IS ONLY WITH RESPECT TO SUCH OF THE FOLLOWING COVERAGES AS ARE INDICATED BY A SPECIFIC PREMIUM CHARGE OR CHARGES. THE LIMIT OF THE COMPANY'S LIABILITY FOR EACH SUCH COVERAGE IS STATED BELOW SUBJECT TO ALL THE TERMS OF THE POLICY. THE LIMIT OF LIABILITY FOR COMPREHENSIVE AND COLLISION COVERAGE SHALL NOT EXCEED THE "COST" SHOWN ABOVE.

COVERAGES	LIMITS OF LIABILITY	PREMIUMS			SPECIAL EQUIPMENT
BODILY INJURY LIABILITY	\$ 250,000 EACH PERSON \$ 500,000 EACH ACCIDENT	CAR 1	CAR 2	CAR 3	ITEMS INSURED AND AMOUNTS OF INSURANCE FOR EACH ITEM ARE STATED HEREON. ITEMS INSURED ARE SUBJECT TO THE DEDUCTIBLE.
PROPERTY DAMAGE LIABILITY	\$ 100,000 EACH ACCIDENT	125	76	118	
UNINSURED MOTORISTS					
BODILY INJURY LIABILITY	\$ 100,000 EACH PERSON \$ 300,000 EACH ACCIDENT	11	4	12	
UNINSURED MOTORISTS	\$ MAXIMUM				
PROPERTY DAMAGE LIABILITY					
COLLISION DEDUCTIBLE WAIVER					
MEDICAL EXPENSE	\$ 2000 <input checked="" type="checkbox"/> EXCESS WITH REIMBURSEMENT TO COMPANY <input type="checkbox"/> NO EXCESS NO REIMBURSEMENT	3	3	3	
MEDICAL DEATH AND DISABILITY	\$ EACH PERSON \$ EACH ACCIDENT	6	3	6	
COMPREHENSIVE	DEDUCTIBLE CAR 1 \$ 100 CAR 2 \$ 100 CAR 3 \$ 100	10	11	36	
COLLISION	DEDUCTIBLE CAR 1 \$ 500 CAR 2 \$ 500 CAR 3 \$ 500	38	12	127	
TOWING AND LABOR	\$ EACH DISABLEMENT				
RENTAL CAR BENEFIT	\$ PER DAY DAYS				
RENTED CAR PHYSICAL DAMAGE	\$ DEDUCTIBLE PER CLAIM (SEE RCPD PREMIUM BELOW)				
ENDORSEMENTS ATTACHED TO THE POLICY		194	109	302	
U-10 10/1997 U-45A U-179 U-137		RCPD PREMIUM	POLICY FEE		
					TOTAL PREMIUM 605

IMPORTANT INFORMATION

EFFECTIVE 09/30/1998 -

Your automobile insurance expires and coverage ceases at 12:01 AM on 09/30/1998
Coverage under this policy will become effective provided the premium is paid as indicated on the enclosed NOTICE OF PREMIUM DUE

MAILED TO:

JOHN A GILCHRIST
226 SPRING ST
SANTA CRUZ CA 95060

POLICY NUMBER: AP 39003169

MAILING DATE: 09/03/1998

COUNTY OF SANTA CRUZ
REQUEST FOR APPROVAL OF AGREEMENT

Attachment 2 0378

TO: Board of Supervisors
County Administrative Officer
County Counsel
Auditor-Controller

FROM: REDEVELOPMENT (Dept.)
[Signature] (Signature) _____ (Date)

The Board of Supervisors is hereby requested to approve the attached agreement and authorize the execution of the same.

- Said agreement is between the COUNTY OF SANTA CRUZ REDEVELOPMENT AGENCY (Agency)
and GILCHRIST AND ASSOCIATES, 226 Spring Street, Santa Cruz, CA 95060 (Name & Address)
- The agreement will provide services for preparation of an environmental feasibility study
- The agreement is needed as this work cannot be provided by in-house staff
- Period of the agreement is from 2/8/2000 to 12/31/2000
- Anticipated cost is \$ ~~20,000.00~~ 21,170.00 XXXXXXXXXXXXXXXXXXXX (Not to exceed)
- Remarks: _____
- Appropriations are budgeted in 611143 (Index#) 9842 (Subject)

NOTE: IF APPROPRIATIONS ARE INSUFFICIENT, ATTACH COMPLETED FORM AUD-74

Appropriations are available and have been encumbered to No. C092018 Date 1/26/00
are not will be

GARY A. KNUTSON, Auditor - Controller
BY [Signature] Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the
Agency Administrator to execute the same on behalf of the County of Santa Cruz
Redevelopment Agency (Agency). County Administrative Officer

Remarks: [Signature] (Analyst)
BY _____ Date _____
Agreement approved as to form. Date 1/25/2000

Distribution:
Bd. of Supv. - White
Auditor-Controller - Blue
County Counsel - Green *
Co. Admin. Officer - Canary
Auditor-Controller - Pink
Originating Dept. - Goldenrod

* To Orig. Dept. if rejected.

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ADM - 29 (6/95)

State of California)
County of Santa Cruz) ss
I _____ ex-officio Clerk of the Board of Supervisors of the County of Santa Cruz,
State of California, do hereby certify that the foregoing request for approval of agreement was approved by
said Board of Supervisors as recommended by the County Administrative Officer by an order duly entered
in the minutes of said Board on _____ County Administrative Officer
_____ 19 _____ BY _____ Deputy Clerk