



JOHN A. FANTHAM  
DIRECTOR OF PUBLIC WORKS

# County of Santa Cruz 0457

## DEPARTMENT OF PUBLIC WORKS

701 OCEAN STREET, ROOM 410, SANTA CRUZ, CA 95060  
(831) 464-2160 FAX (831) 4642385 TDD (831) 454-2123

### AGENDA: APRIL 25, 2000

April 13, 2000

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

SUBJECT: VIA PALO ALTO STAIRWAY PROJECT  
APTOS SEASCAPE, COUNTY SERVICE AREA NO. 3, DISTRICT 2

Members of the Board:

The Department of Public Works has received written notification from both the Seascape Improvement Association and the Seascape Beach Association that the stairs located from Palo Alto to Via Campana are in disrepair. In response to these notifications, staff inspected the stairs and found the stairs deteriorated to such a condition that an immediate closure was warranted.

Based on discussions with the County Service Area (CSA) No. 3 representative, Public Works has obtained a proposal from Bowman and Williams to provide a topographic survey, design plans, and an engineer's estimate for replacement of the stairway.

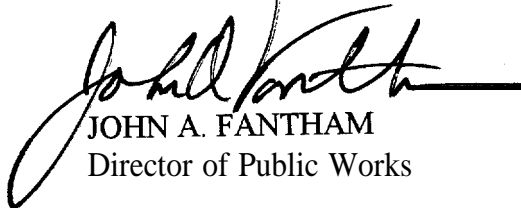
To begin this process, it is now necessary that your Board accept this proposal and authorize payment upon satisfactory completion of the work. Sufficient funds are available in the CSA No. 3 Budget (622100) to cover this expenditure.

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

1. Accept the attached proposal in the amount of \$9,130.00 from Bowman and Williams and approve the contract.

2. Authorize the Director of Public Works to sign the agreement.

Yours truly,

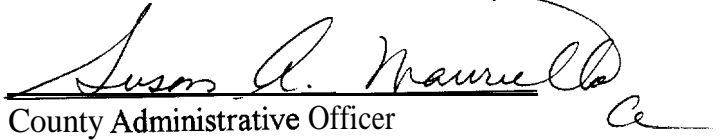


JOHN A. FANTHAM  
Director of Public Works

TAH:mg

Attachments

RECOMMENDED FOR APPROVAL:



Susan A. Maunella  
County Administrative Officer

copy to:     Public Works  
                 Bowman and Williams

# COUNTY OF SANTA CRUZ

0459

## REQUEST FOR APPROVAL OF AGREEMENT

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

FROM:

PUBLIC WORKS (Dept.)

(Signature)

4-10-00 (Date)

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

1. Said agreement is between the COUNTY OF SANTA CRUZ (Agency)  
BOWMAN ANTI WILLIAMS. 1011 CEDAR  
and (P.O. BOX 1621) SANTA CRUZ, CA 95061 (Name & Address)

2. The agreement will provide FOR PLANS, SPECIFICATIONS, AND AN ENGINEER'S ESTIMATE ~~REPORT~~ FOR COMPLETE REPLACEMENT  
OF STAIRWAY LOCATED IN COUNTY SERVICE NO. 3 AT VIA PALO ALTO TO VIA COMPANA

3. The agreement is needed, BECAUSE THE WORK CAN BE HANDLED MOST EXPEDITIOUSLY BY CONTRACT

4. Period of the agreement is from BOARD APPROVAL to JUNE 30, 2000

5. Anticipated cost is \$ 9,130.00 (Fixed amount; Monthly rate; Not to exceed)

6. Remarks: CONTRACT AMOUNT \$9,130.00: 7% OVERHEAD \$639.10: TOTAL \$9,769.10

7. Appropriations are budgeted in 622100! 22107! 3600! (Index#) 3590 (Subobject)

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

Appropriations are available and 4/11/00 Contract No. C092073 Date \_\_\_\_\_

GARY A. KNUTSON, Auditor - Controller

By Ronald J. Silva Deputy.

Proposal reviewed and approved. It is recommended that the Board of Supervisors approve the agreement and authorize the DIRECTOR OF PUBLIC WORKS to execute the same on behalf of the PUBLIC WORKS DEPARTMENT

(Agency). County Administrative Officer

Remarks:

(Analyst)

By D. Silva t e

Agreement approved as to form. Date \_\_\_\_\_

SRL:mg

### Distribution:

Bd. of Supv. - White  
Auditor-Controller - Blue  
County - 4/11/00  
Co. Admin. Officer - Canary  
Auditor-Controller - Pink  
Originating Dept. - Goldenrod

'To Orig. Dept. if rejected.

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 entered  
in the minutes of said Board on \_\_\_\_\_ County Administrative Officer

\_\_\_\_\_ 19 \_\_\_\_\_ By \_\_\_\_\_ Deputy Clerk

52

Contract No. \_\_\_\_\_

COUNTY SERVICE AREA

INDEPENDENT CONTRACTOR AGREEMENT

THIS CONTRACT is entered into this 25 day of April, 2000, by and between the COUNTY OF SANTA CRUZ, hereinafter called COUNTY, and Bowman & Williams hereinafter called CONTRACTOR. The parties agree as follows:

1. DUTIES. CONTRACTOR agrees to exercise special skill to accomplish the following result: See Attachment "E"
2. COMPENSATION. In consideration for CONTRACTOR accomplishing said result, COUNTY agrees to pay CONTRACTOR as follows: Upon satisfactory completion of work in accordance with Attachment "E"
3. TERM. The term of this contract shall be: from Board Approval through 6 30 01
4. EARLY TERMINATION. Either party hereto may terminate this contract at any time by giving 30 days written notice to the other party.
5. INDEMNIFICATION FOR DAMAGES, TAXES AND CONTRIBUTIONS.  
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 CONTRACTOR'S officers, employees and agents engaged in the performance of this Agreement (including, without limitation, unemployment insurance, social security and payroll tax withholding).

Bowman & Williams Job No. 21774

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 COUNTY and any insurance or self-insurance maintained by 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 COUNTY both initial here       /        
\_\_\_\_\_.

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 \_\_\_\_\_.

(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 combined single limit, if, and only if, this Subparagraph is initialed by CONTRACTOR and COUNTY       /      

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:

"This insurance shall not be canceled until after thirty (30) days prior written notice has been given to:  
Public Works Department  
Attention: Tracy Herfindahl  
701 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:  
Public Works Department, 701 Ocean Street, Room 410, Santa Cruz, CA 95060, Attn: Tracy Herfindahl

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, 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 Public Works Affirmative Action Officer 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 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.

PRINCIPAL TEST: 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 County planning, environmental and other laws or regulations.

10. CONTRACTOR is responsible to pay prevailing wages and maintain records as required by Labor Code Section 1770 and following.

11. NONASSIGNMENT. CONTRACTOR shall not assign this Agreement without the prior written consent of the COUNTY.

12. 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 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. 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.

14. ATTACHMENTS. This Agreement includes the following attachments : Attachment "E" and Insurance Certificates

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

COUNTY OF SANTA CRUZ

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

APPROVED AS TO FORM:

Samuel Tan 4/12/00  
Assistant County Counsel

DISTRIBUTION:

County Administrative Office  
Auditor-Controller  
County Counsel  
Risk Management  
Contractor

CONTRACTOR

By: [Signature]

Address: 1011 Cedar Street

Santa Cruz, CA 95060

Telephone: (408)426-3560

Tax ID No. 94-2321814

Contractor: Bowman & Williams  
Street: 1011 Cedar Street  
City, State, Zip Code: Santa Cruz, CA. 95060  
Phone Number: (831) 426-3560

Contract No.  
State Contractors License No.  
Type of License  
TAX ID NUMBER: 94-2321814

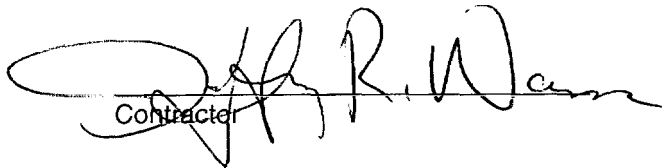
CONTRACTOR agrees to furnish all labor, equipment and materials to complete the following work:

See attached Proposal letter to the County of Santa Cruz Public Works Department, dated 27 March 2000.

CSA 3 , STAIRWAY

\$ 9,130<sup>00</sup>

( Attach additional sheets as necessary)

  
Contractor

COUNTY OF SANTA CRUZ  
DIRECTOR OF PUBLIC WORKS OR  
PURCHASING AGENT

Attachment E



**BOWMAN & WILLIAMS**  
**CONSULTING CIVIL ENGINEERS**  
A CALIFORNIA CORPORATION

1011 CEDAR • PO BOX 1621 • SANTA CRUZ, CA 95061-1621  
PHONE (831) 426-3560 FAX (831) 426-9182 www.bowmanandwilliams.com

0467

27 March, 2000

Ms. Tracy Herfindahl  
County of Santa Cruz Dept. of Public Works  
701 Ocean Street  
Santa Cruz, CA 95060

Re: Topographic Survey and Structural Plan Preparation for Access Stairway, CSA #3, Our File No.  
**21774**

Dear Tracy,

Bowman & Williams is pleased to provide you with this proposal for providing professional engineering services for a Topographic Survey and Structural Plan Preparation for replacing an existing stairway between Via Palo Alto and Via Capana.

We would propose to design the new stairway to be concrete, constructed very near to the existing grade with two landings. The new stairway would have handrailing and nosing that would be ADA compliant.

Our specific scope of work would be as follows:

**1. Topographic Map & Boundary**

Prepare a topographic survey of the proposed building site, if possible, locate enough monumentation to determine the boundary, locate existing surface improvements at both ends of the proposed stairway.

Fee \$2,140

**2. Structural Plan Preparation**

Prepare a structural plan detailing out the new stairway, handrailing, nosings and pathway.

Fee \$5,220

**3. Technical Specifications and Engineer's Estimate**

Prepare Sections 9 and 10 of the specification package and prepare an engineer's estimate of the construction costs.

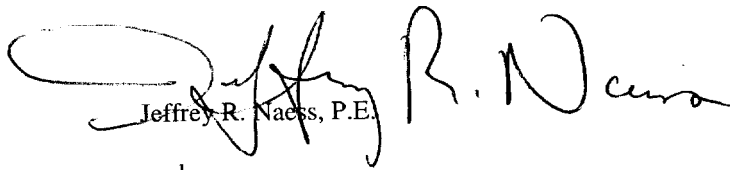
Fee \$1,770

**Total Estimated Fee \$9,130**

We have included our project estimating sheet with a more detailed breakdown of the hours involved to complete the above described task. This estimate is based on our experience from similar jobs completed by this office. If we find that due to unforeseen circumstances, we might exceed this estimate, we will notify you as to the status of the work and obtain your approval prior to proceeding.

We appreciate this opportunity to participate in this project and hope you find this proposal satisfactory.

Sincerely,  
Bowman & Williams

Handwritten signature of Jeffrey R. Naess in cursive script.

Jeffrey R. Naess, P.E.

encl.

# Project Estimating Sheet

Via Palo Alto to Via Compana Stairs  
**PROPOSAL FOR ENGINEERING SERVICES**  
 BOWMAN & WILLIAMS JOB NO. 21774  
 Date: 3/27/00

Bowman & Williams  
 Civil Engineers  
 1011 Cedar Street  
 Santa Cruz, CA 95060

Description of Work:	Personnel	Principal Engineer	Associate Engineer	Assistant Engineer	Junior Engineer	Technical Draftsperson	Licensed Surveyor	2 Man Field Crew	Clerical	Total
	Hourly Rate	125	115	95	75	65	115	150	55	
Perform survey of site for the use as a base drawing.	hours:	0	0	2	0	0	2	a	0	14
	cost:	0	0	190	0	0	230	1200	0	\$ 1,620
Draw topographic map of stair site.	hours:	0	0	0	0	a	0	0	0	8
	cost:	0	0	0	0	520	0	0	0	\$ 520
Design and detail new concrete stairs on grade with 2 landings, ADA nosing and handrailings.	hours:	0	0	36	24	0	0	0	0	60
	cost:	0	0	3420	1800	0	0	0	0	\$ 5,220
Prepare technical specifications, section 10, for use as part of a bid package.	hours:	1	0	12	0	0	0	0	0	13
	cost:	125	0	1140	0	0	0	0	0	\$ 1,265
Prepare engineers cost estimate.	hours:	1	0	4	0	0	0	0	0	5
	cost:	125	0	380	0	0	0	0	0	\$ 505
	hours:	0	0	0	0	0	0	0	0	0
	cost:	0	0	0	0	0	0	0	0	\$ -

**\$ 9,130**

0469



**BOWMAN & WILLIAMS**  
**CONSULTING CIVIL ENGINEERS**  
A CALIFORNIA CORPORATION

0470

1011 CEDAR. P.O. BOX 1621 • SANTA CRUZ, CA 95061-1621  
(831) 426-3560 • Fax (831) 426-9182  
www.bowmanandwilliams.com

**HOURLY CHARGE RATES**

Effective September 26, 1999 – July 26, 2000\*

OFFICE AND PROFESSIONAL

Court Appearances and Preparation Therefor \$175.00  
(Registered Engineer or Licensed Land Surveyor)

Principal Engineer 125.00

Associate Engineer 115.00

Assistant Engineer 95 .00

Junior Engineer 75.00

Licensed Surveyor 115.00

Technical Draftsman 65.00

Draftsman 60.00

Clerical 55.00

FIELD SURVEY CREW: Construction Surveys, 2 hour minimum

One-Man Robotic Instrument \$145.00

Two-Man Survey Crew \$150.00

One-Man GPS \$250.00

Two-Man (Prevailing wage rates) \$165.00

Three-Man \$165.00

Certified Haz Mat \$240.00

EXPENSES

Consultant Charges x 1.15

Reproduction, Fees and Miscellaneous Expenses x 1.25

Survey Equipment, Vehicle, Stakes and Mileage (within 25 mi.) are included in Hourly Rates

E-Mail Electronic Data Transfer \$100.00

Electronic and Media Disk Mailer \$100.00

COUNTER CHARGES:

Record Maps and Deed Research \$5.00 each document

Research Assessors Parcel Number \$5.00 each

Assessors Map Pages \$2.00 each

\* After July 26, 2000 rates shown will increase by consumer price index for the prior 12 months unless adjusted otherwise.

**ACORD****CERTIFICATE OF LIABILITY INSURANCE**OP ID NB  
BOWMWILDATE (MM/DD/YY)  
03/27/00

## PRODUCER

**BATTISTINI & CANFIELD, LLC**  
INSURANCE SINCE 1906  
901 CENTER STREET  
SANTA CRUZ CA 95060

Albert W. Rice

Phone No. 831-423-1822 Fax No. 831-423-2462

## INSURED

**BOWMAN & WILLIAMS INC**  
PO BOX 1621  
SANTA CRUZ CA 95061

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.

## COMPANIES AFFORDING COVERAGE

## COMPANY

A

**FIREMANSFUND**

## COMPANY

B

**AMERICAN STATES INSURANCE CO.**

## COMPANY

C

**ZURICH INSURANCE - ASSA**

## COMPANY

D

**TUDOR INSURANCE COMPANY**

## COVERAGES

THIS IS TO CERTIFY THAT 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. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	AZC80500754	08/01/99	08/01/00	GENERAL AGGREGATE \$ 2,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG \$ 2,000,000
	<input type="checkbox"/> CLAIMSMADE <input checked="" type="checkbox"/> OCCUR				PERSONAL & ADV INJURY \$ 1,000,000
	<input checked="" type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> Products/Comp Ops				FIRE DAMAGE (Any one fire) \$ 100,000
					MED EXP (Any one person) \$ 10,000
B	AUTOMOBILE LIABILITY	01CD47447860-7	08/01/99	08/01/00	COMBINED SINGLE LIMIT \$ 1000000
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE \$
	<input checked="" type="checkbox"/> HIRED AUTOS				AUTO ONLY - EA ACCIDENT \$
	<input checked="" type="checkbox"/> NON-OWNED AUTOS				OTHER THAN AUTO ONLY: \$
	GARAGE LIABILITY				EACH ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				AGGREGATE \$
					EACH OCCURRENCE \$ 1,000,000
					AGGREGATE \$ 1,000,000
A	EXCESS LIABILITY	XEK9615-9868	08/01/99	08/01/00	
	<input checked="" type="checkbox"/> UMBRELLA FORM				
	OTHER THAN UMBRELLA FORM				
C	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	2043465-02	09/01/99	09/01/00	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$ 1,000,000
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:				EL EACH ACCIDENT \$ 1,000,000
	<input type="checkbox"/> INCL <input type="checkbox"/> EXCL				EL DISEASE - POLICY LIMIT \$ 1,000,000
					EL DISEASE EA EMPLOYEE \$ 1,000,000
D	OTHER	AEL0005143	07/01/99	07/01/00	
	PROFESSIONAL E & O				E&O LIAB \$1,000,000 W/DED \$10,000

## DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER IS NAMED AS ADDITIONAL INSURED AS RESPECTS OPERATIONS OF THE INSURED INCLUDING JOB: CSA#3, ACCESS STAIRWAY, PER FORM CG20261185 ATTACHED.

## CERTIFICATE HOLDER

COUNT-1

COUNTY OF SANTA CRUZ  
DEPT OF PUBLIC WORKS  
701 OCEAN STREET  
SANTA CRUZ CA 95060

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE

EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL MAIL

30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT,

~~AND NOTICE SHALL ALSO BE GIVEN TO THE CERTIFICATE HOLDER BY FIRST CLASS MAIL.~~~~AND NOTICE SHALL ALSO BE GIVEN TO THE CERTIFICATE HOLDER BY FIRST CLASS MAIL.~~

AUTHORIZED REPRESENTATIVE

Albert W. Rice

POLICY NUMBER: AZC80500754

COMMERCIAL GENERAL LIABILITY

**THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.****ADDITIONAL INSURED-DESIGNATED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART.

## SCHEDULE

Name of Person or Organization:

COUNTY OF SANTA CRUZ, ITS AGENTS, OFFICERS AND  
EMPLOYEES

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS AN INSURED (Section II) is amended to include as an insured the person or organization shown in the Schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.