

**COOPERATIVE FIRE PROGRAMS
FIRE PROTECTION REIMBURSEMENT AGREEMENT AMENDMENT**

AGREEMENT
NUMBER

AMENDMENT
NUMBER

1CA66687

1

REGISTRATION NUMBER:

CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED

1. This Agreement is entered into between the State Agency and the Local Agency named below:

STATE AGENCY'S NAME

California Department of Forestry and Fire Protection

LOCAL AGENCY'S NAME

San Mateo County

2. The term of this Agreement is: July 1, 2006 through June 30, 2009

3. The total amount of this Amended Agreement, including previous fiscal years is: \$ 14,199,108

Fourteen million, one hundred & ninety nine thousand, one hundred & eight dollars

4. The parties mutually agree to this amendment as follows. All actions noted below are by this reference made a part of the Agreement and incorporated herein:

Exhibit D – Additional Provisions

This is the second year of a three year Agreement that adds \$7,099,554 for Fiscal Year 07-08.

All other terms and conditions shall remain the same.

IN WITNESS WHEREOF, this Agreement Amendment has been executed by the parties hereto.

LOCAL AGENCY

LOCAL AGENCY'S NAME

California
Department of General Services
Use only

BY (Authorized Signature)

DATE SIGNED(Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

ADDRESS

STATE OF CALIFORNIA

AGENCY NAME

California Department of Forestry and Fire Protection

BY (Authorized Signature)

DATE SIGNED(Do not type)

PRINTED NAME AND TITLE OF PERSON SIGNING

Ken McLean, Deputy Director, Chief of Fire Protection

ADDRESS

P.O. Box 944246, Sacramento, CA 94244-2460

Memorandum

To : Jolene DeGroot
Cooperative Fire Programs

Date: January 14, 2008

Website: www.fire.ca.gov

From : **Department of Forestry and Fire Protection**

Subject : 2500 CONTRACTING PROCEDURES
2550 Contracts, Agreements and Leases
Review Certification for Schedule A and Wildland Agreements

I have read and reviewed the attached agreement.

Contract Name: San Mateo County
Contract Number: 1CA66687 FY: 07-08

UNIT CHIEF

Signature

Printed Name

Date

REGION CHIEF

Signature

Printed Name

Date

STAFF CHIEF, COOPERATIVE FIRE PROGRAMS

Signature

Printed Name

Date

ASSISTANT DEPUTY DIRECTOR, Cooperative Fire, Training and Safety

Signature

Printed Name

Date

ROUTING CHECKLIST

Cooperative Fire Programs Fire Protection Reimbursement AGREEMENT/AMENDMENT

1. UNIT

- Prepare 3-signed **Std. 215s** (Contract Transmittal) forms.
- For an ORIGINAL/RENEWAL contract prepare **4 LG1s** -signed by the authorized local agency person.(All original signatures)
- For an AMENDMENT contract use the **LG1A** (instead of an Amendment Letter) Prepare **4** signed by the authorized local agency person (originals)
- Complete Exhibit D, Schedules A, B, C, D and E. and attach copies to each agreement.
- Provide 2 copies of insurance coverage. If self-insured, include signed Exhibit D, Schedule E.
- Provide 2 copies of Bd. Resolution/Bd. Minutes authorizing local agency person to execute the LG1/LG1A.(See Sample Resolution)
- Provide 4 extra photocopies of each Exhibit D, Schedule A (Fiscal Display).
- Review package for completeness. Date and initial the **Routing Checklist**.
- Unit Chief recommends execution of the LG1/LG1A by signing the **CDF Review Certification Memo**. Place this form on top of complete package and forward to Region Office.

2. REGION OFFICE

- Reviews package for completeness. Date and initial the **Routing Checklist**.
- Region chief recommends execution of the LG1/LG1A by signing the **CDF Review Certification Memo**. Place this form on top of complete package and forward to the Coop Fire Program, Sacramento HQ's.

3. COOPERATIVE FIRE PROGRAM

- Coop Fire Program reviews for completeness, accuracy, and compliance with department policy. Date and initial the **Routing Checklist**.
- Recommends execution by having Staff Chief and Assist. Deputy Director FP sign **CDF Review Certification Memo** - forwards package to Deputy Director for FP.
- Deputy Director for Fire Protection executes agreement for the department by signing all copies of the **LG1** or **LG1A**.
- Coop Fire retains one photocopy of contract for files.
- Forwards complete package to Contracts office.

4. CONTRACTS OFFICE

- Logs and stamps LG1/LG1A.
- Reviews for general contract requirements.
- Retains suspense copy of complete package in contract file.
- Forwards (2) Std.215, (4) LG1/LG1A to Department of General Services Insurance and/or Legal.
- Receives 2 or 3 fully executed copies of the LG1/LG1A from Department of General Services.
- Transmits suspense copy of the LG1/LG1A to the Accounting office.
- Retains 1 fully executed LG1/LG1A in contract file.
- Transmits notice of completed contract to coordinator in the Cooperative Fire Protection program, Sacramento HQ's.
- Forwards at least (1) original and copies if available of the fully executed LG1/LG1A and this dated Routing Checklist to the Region.

5. REGION OFFICE

- Retains 1 fully executed LG1/LG1A for Region office files.
- Forwards 2 fully executed LG1/LG1A and this dated **Routing Checklist** to the Unit.

6. UNIT

- Forwards 1 fully executed original copy of the LG1/LG1A to the Local Agency.
- Retains one fully executed copy of the LG1/LG1A and this dated Routing Checklist for the Unit files.

Rev. 9/2007

AGREEMENT SUMMARY

STD 215 (Rev 4/2002)

AGREEMENT NUMBER

AMENDMENT NUMBER

1CA66687

1

CHECK HERE IF ADDITIONAL PAGES ARE ATTACHED

1. CONTRACTOR'S NAME
San Mateo County

2. FEDERAL I.D. NUMBER
NA

3. AGENCY TRANSMITTING AGREEMENT
Forestry and Fire Protection

4. DIVISION, BUREAU, OR OTHER UNIT
San Mateo & Santa Cruz

5. AGENCY BILLING CODE
013028

6. NAME AND TELEPHONE NUMBER OF CONTRACT ANALYST FOR QUESTIONS REGARDING THIS AGREEMENT
Jolene DeGroot, 916/654-6833

7. HAS YOUR AGENCY CONTRACTED FOR THESE SERVICES BEFORE?
 NO YES (If YES, enter prior contractor name and Agreement Number) **Forestry and Fire Protection**

8. BRIEF DESCRIPTION OF SERVICES - LIMIT 72 CHARACTERS INCLUDING PUNCTUATION AND SPACES
Fire Protection Services

9. AGREEMENT OUTLINE (Include reason for Agreement: Identify specific problem, administrative requirement, program need or other circumstances making the Agreement necessary; include special or unusual terms and conditions.)

California Department of Forestry and Fire Protection shall provide fire protection services pursuant to Public Resources Code Sections 4142 and/or 4144.

10. PAYMENT TERMS (More than one may apply.)

MONTHLY FLAT RATE QUARTERLY ONE -TIME PAYMENT PROGRESS PAYMENT

ITEMIZED INVOICE WITHHOLD _____ % ADVANCED PAYMENT NOT TO EXCEED

REIMBURSEMENT/REVENUE \$ _____ or _____ %

OTHER (Explain) _____

11. PROJECTED EXPENDITURES FUND TITLE	ITEM	F.Y.	CHAPTER	STATUTE	PROJECTED EXPENDITURES
Reimbursement					\$
					\$
					\$

OBJECT CODE _____ AGREEMENT TOTAL \$ _____

OPTIONAL USE AMOUNT ENCUMBERED BY THIS DOCUMENT
\$ 7,099,554

I CERTIFY upon my own personal knowledge that the budgeted funds for the current budget year are available for the period and purpose of the expenditure stated above. PRIOR AMOUNT ENCUMBERED FOR THIS AGREEMENT
\$

ACCOUNTING OFFICER'S SIGNATURE _____ DATE SIGNED _____ TOTAL AMOUNT ENCUMBERED TO DATE
\$

12. AGREEMENT	TERM		TOTAL COST OF THIS TRANSACTION	BID, SOLE SOURCE, EXEMPT
	From	Through		
Original	07-01-06	06-31-09	\$ 7,099,554	
Amendment No. 1	07-01-07	06-31-08	\$ 7,099,554	
Amendment No. 2			\$	
Amendment No. 3			\$	
TOTAL			\$ 14,199,108	

(Continue)

13. BIDDING METHOD USED:

REQUEST FOR PROPOSAL (RFP) INVITATION FOR BID (IFB) USE OF MASTER SERVICE AGREEMENT
(Attach justification if secondary method is used)

SOLE SOURCE CONTRACT EXEMPT FROM BIDDING OTHER *(Explain)*
(Attach STD. 821) *(Give authority for exempt status)* **Reimbursement**

NOTE: Proof of advertisement in the State Contracts Register or an approved form STD. 821, Contract Advertising Exemption Request, must be attached

14. SUMMARY OF BIDS *(List of bidders, bid amount and small business status) (If an amendment, sole source, or exempt, leave blank)*

15. IF AWARD OF AGREEMENT IS TO OTHER THAN THE LOWER BIDDER, PLEASE EXPLAIN REASON(S) *(If an amendment, sole source, or exempt, leave blank)*

16. WHAT IS THE BASIS FOR DETERMINING THAT THE PRICE OR RATE IS REASONABLE?

Not applicable. This is a reimbursement agreement with a local agency.

17. JUSTIFICATION FOR CONTRACTING OUT *(Check one)*

Contracting out is based on cost savings per Government Code 19130(a). The State Personnel Board has been so notified. Contracting out is justified based on Government Code 19130(b). Justification for the Agreement is described below.

Justification:

Not applicable. This is a reimbursement agreement with a local agency.

18. FOR AGREEMENTS IN EXCESS OF \$5,000, HAS THE LETTING OF THE AGREEMENT BEEN REPORTED TO THE DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING? <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> N/A	19. HAVE CONFLICT OF INTEREST ISSUES BEEN IDENTIFIED AND RESOLVED AS REQUIRED BY THE STATE CONTRACT MANUAL SECTION 7.10? <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> N/A	20. FOR CONSULTING AGREEMENTS, DID YOU REVIEW ANY CONTRACTOR EVALUATIONS ON FILE WITH THE DGS LEGAL OFFICE? <input type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NONE ON FILE <input checked="" type="checkbox"/> N/A
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21. IS A SIGNED COPY OF THE FOLLOWING ON FILE AT YOUR AGENCY FOR THIS CONTRACTOR? A. CONTRACTOR CERTIFICATION CLAUSES B. STD. 204, VENDOR DATA RECORD <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> N/A <input type="checkbox"/> NO <input type="checkbox"/> YES <input checked="" type="checkbox"/> N/A	22. REQUIRED RESOLUTIONS ARE ATTACHED <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> N/A
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23. ARE DISABLED VETERANS BUSINESS ENTERPRISE GOALS REQUIRED? *(If an amendment, explain changes, if any)*

NO *(Explain below)* YES *(If YES complete the following)*

DISABLED VETERAN BUSINESS ENTERPRISES: _____ % OF AGREEMENT

Good faith effort documentation attached if 3% goal is not reached.

We have determined that the contractor has made a sincere good faith effort to meet the goal.

Explain:

Schedule A and Wildland agreements are exempt from DVBE requirements per SCM Section 8.12

24. IS THIS A SMALL BUSINESS CERTIFIED BY OSBCR? <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <i>(Indicate Industry Group)</i>	SMALL BUSINESS REFERENCE NUMBER
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25. IS THIS AGREEMENT (WITH AMENDMENTS) FOR A PERIOD OF TIME LONGER THAN ONE YEAR? *(If YES, provide justification)*

NO YES

The Local Agency, San Mateo County, requests a multiple year contract to facilitate fiscal and administrative issues.

I certify that all copies of the referenced Agreement will conform to the original Agreement sent to the Department of General Services.

SIGNATURE/TITLE	DATE SIGNED
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EXHIBIT D, SCHEDULE A

FISCAL DISPLAY

PRC 4142 & 4144

NAME OF LOCAL AGENCY **San Mateo County**

Index 1700 PCA 17710, 17711, & 17730 Fiscal Year 07-08

This is Schedule A of Cooperative Agreement originally dated July 1, 2006, by and between CAL FIRE of the State of California and LOCAL AGENCY.

See Attached Fiscal Sheets

SAN MATEO COUNTY
Fiscal Year 2007-2008
INDEX

1700

PCA

17710

THIS IS SCHEDULE A - 4142 OF THE COOPERATIVE AGREEMENT, DATED JULY 1, 2007
 BETWEEN STATE OF CALIFORNIA DEPARTMENT OF FORESTRY AND FIRE PROTECTION
 AND SAN MATEO COUNTY, A LOCAL AGENCY (4th step)

X Original

PERSONAL SERVICES

**Fire Control &
 Emergency Services
 (Safety Personnel)**

	No.	Class.	Period	Mos.	Rate	Total Salary	Benefits @	Total
							56.11%	
Belmont FFS	1	Captain	7/1-6/30	12	\$4,223	\$50,676	\$28,434	\$79,110
	3	FC Pmedic	7/1-6/30	12	\$4,502	\$162,072	\$90,939	\$253,011
	1	FAE Pmedic	7/1-6/30	12	\$4,118	\$49,416	\$27,727	\$77,143
	3	Engineer	7/1-6/30	12	\$3,849	\$138,564	\$77,748	\$216,312
	1	FF II (P)	7/1-6/30	12	\$3,473	\$41,676	\$23,384	\$65,060
	0	FF II (P) 904	7/1-6/30	12	\$3,473	\$0	\$0	\$0
Skylonda FFS	2	Captain	7/1-6/30	12	\$4,223	\$101,352	\$56,869	\$158,221
	3	FAE Pmedic	7/1-6/30	12	\$4,118	\$148,248	\$83,182	\$231,430
	2	Engineer	7/1-6/30	12	\$3,849	\$92,376	\$51,832	\$144,208
	1	FF II Pmedic	7/1-6/30	12	\$3,473	\$41,676	\$23,384	\$65,060
Cordilleras FFS	2	Captain	7/1-6/30	12	\$4,223	\$101,352	\$56,869	\$158,221
	4	FAE Pmedic	7/1-6/30	12	\$4,118	\$197,664	\$110,909	\$308,573
	1	Engineer	7/1-6/30	12	\$3,849	\$46,188	\$25,916	\$72,104
	0	Eng. LT(904)	7/1-6/30	12	\$3,849	\$0	\$0	\$0
	1	FF II	7/1-6/30	12	\$3,215	\$38,580	\$21,647	\$60,227
Pescadero FFS	1	FC Pmedic	7/1-6/30	12	\$4,502	\$54,024	\$30,313	\$84,337
	1	Captain	7/1-6/30	12	\$4,223	\$50,676	\$28,434	\$79,110
	3	FAE Pmedic	7/1-6/30	12	\$4,118	\$148,248	\$83,182	\$231,430
	1	Engineer	7/1-6/30	12	\$3,849	\$46,188	\$25,916	\$72,104
	1	FF II	7/1-6/30	12	\$3,215	\$38,580	\$21,647	\$60,227
sum	32							

Command/Support

Division Chief	0.8	Asst. Chief	7/1-6/30	6	\$7,659	\$36,763	\$20,628	\$57,391
Battalion Chief	2.4	Bat. Chief	7/1-6/30	12	\$5,373	\$154,742	\$86,826	\$241,568
Paramedic Coord.	0.8	Captain	7/1-6/30	12	\$4,502	\$43,219	\$24,250	\$67,469
Training Officer	0.8	Captain	7/1-6/30	12	\$4,223	\$40,541	\$22,747	\$63,288
Fire Protection Planning	0.8	Captain	7/1-6/30	12	\$4,223	\$40,541	\$22,747	\$63,288
Fire Protection Planning	0.8	Engineer	7/1-6/30	12	\$3,849	\$36,950	\$20,733	\$57,683
Pmedic Retention pay	17.8			12	\$300	\$64,080	\$35,955	\$100,035
sum	6.4							
Totals for Safety Personnel						\$1,964,393	\$1,102,221	\$3,066,614

**Support Services
 (Non-Safety Personnel)**

	No.	Class.	Period	Mos.	Rate	Total Salary	Benefits @	Total
							47.94%	
Vehicle Ops	0.8	HEM	7/1-6/30	12	\$4,220	\$40,512	\$19,421	\$59,933
Clerical, Training	0.4	Office Tech	7/1-6/30	12	\$2,906	\$13,949	\$6,687	\$20,636
Clerical, reception	0.8	OA, Typing	7/1-6/30	12	\$2,319	\$22,262	\$10,673	\$32,935
Clerical, Personnel	0.4	Office Tech	7/1-6/30	12	\$2,906	\$13,949	\$6,687	\$20,636
ECC Operator	0.8	Disp Clerk	7/1-6/30	12	\$3,420	\$32,832	\$15,740	\$48,572
sum	3.2							
Totals for Misc. Personnel						\$123,504	\$59,208	\$182,712

FLSA Compensation

						Benefits @ 28.88%		
Sch. A Personnel	0	Bat.Chief(84)	11/1-6/30	14	\$3,566	\$0	\$0	\$0
	2.4	Bat.Chief(72)	11/1-6/30	14	\$2,063	\$69,317	\$20,019	\$89,335
	4.8	FC Pmedic	11/1-6/30	14	\$2,220	\$149,184	\$43,084	\$192,268
	7.6	Captain	11/1-6/30	14	\$2,084	\$221,738	\$64,038	\$285,775
	11	FAE Pmedic	11/1-6/30	14	\$1,937	\$298,298	\$86,148	\$384,446
	7.8	FAE	11/1-6/30	14	\$1,810	\$197,652	\$57,082	\$254,734
	2	FF II Pmedic	11/1-6/30	14	\$1,713	\$47,964	\$13,852	\$61,816
	2	FF II	11/1-6/30	14	\$1,585	\$44,380	\$12,817	\$57,197
Total Planned Overtime						<u>\$1,028,532</u>	<u>\$297,040</u>	<u>\$1,325,573</u>

						Benefits @ 56.11%		
Longevity Pay			7/1-6/30	12	\$2,500	\$30,000	\$16,833	\$46,833
Educational Incentive	18	Perm. Emp.	7/1-6/30	12	\$75	\$16,200	\$9,090	\$25,290
Total Longevity/Ed. Pay						<u>\$46,200</u>	<u>\$25,923</u>	<u>\$72,123</u>

Extended Duty Pay								
Division Chief (Sch A)	0.8	Asst. Chief	7/1-6/30	0	\$766	\$0	\$0	\$0
Division Chief (Sch A)	0.8	Asst. Chief	7/1-6/31	0	\$1,149	\$0	\$0	\$0
Total Extended Duty Pay						<u>\$0</u>	<u>\$0</u>	<u>\$0</u>

						Benefits @ 47.94%			
Dispatch Clerk Night Differential Rate	0.50 per hour	1	Comm. Opr.	7/1-6/30	12	\$87	\$1,044	\$500	\$1,544
ECC							<u>\$1,044</u>	<u>\$500</u>	<u>\$1,544</u>
Total Dispatch Differential									

						Benefits @ 1.45%			
Unplanned Overtime							<u>\$374,267</u>	<u>\$5,427</u>	<u>\$379,694</u>
Asst. Chief Recruitment and Retention Differential	0.8	0			\$1,851	\$0	\$0	\$0	
Totals						<u>\$3,537,940</u>	<u>\$1,490,319</u>	<u>\$5,028,259</u>	
Subtotal Pers. Services								\$5,028,259	

OPERATING EXPENSES

<u>Communications</u>	<u>No.</u>	<u>Type</u>	<u>Mos.</u>	<u>Rate</u>		<u>Total</u>
Felton HQ	1	Telephone	12	\$333	Contractual	\$3,996
Felton HQ	1	Telephone	12	\$150	Contractual	\$1,800
Felton HQ CALNET	1	Telephone	12	\$123	Contractual	\$1,476
Pescadero FFS	1	Telephone	12	\$100	Contractual	\$1,200
Skylonda FFS	1	Telephone	12	\$154	Contractual	\$1,848
Training	1	Telephone	12	\$31	Contractual	\$372
Chiefs	4	Cellular	12	\$260	Contractual	\$3,120
Fire Marshal	2	Cellular	12	\$145	Contractual	\$1,740
Training	2	Cellular	12	\$90	Contractual	\$1,080
State Radio Maint.	3	Base Station	7	\$0.00	Contractual	\$0
County Radio Maint	37	mobile	12	\$0.00	Contractual	\$0
	33	handie talkie	12	\$0.00	Contractual	\$0

Subtotal Communications \$16,632

<u>Travel</u>						
		County Business				\$8,000
		Out-of-State Travel (USAR Contingency)				\$0
		Out-of-State Travel (National Fire Academy)				\$0

Subtotal Travel \$8,000

<u>Facilities</u>						
	Belmont	Supplies/maintenance				\$1,000
	Skylonda	Supplies/maintenance				\$1,000
	Cordilleras	Supplies/maintenance				\$1,000
	Pescadero	Supplies/maintenance				\$1,000

Subtotal Facilities \$4,000

<u>Utilities</u>						
	Belmont	Electricity (pro rata)		\$550/month contractual		\$6,600
	Pescadero	Electricity (pro rata)		\$250/month contractual		\$3,000
	Skylonda	Electricity (pro rata)		\$300/month contractual		\$3,600
	Felton Headquarters	Electricity (pro rata)		\$300/month contractual		\$3,600
	Belmont	LPG (pro rata)		\$200/month contractual		\$2,400

Subtotal Utilities \$19,200

Consultant & Professional Services - Interdepartmental

Comm. Driver's Lic. Holder Drug and Alcohol Testing	1	HEM	\$368	Subtotal C & P Services	\$368
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Personal Care

			<u>Months</u>			<u>Benefits @</u>	
Uniform Allowance	38.4	Full-time wearers*		\$830	\$31,872	28.88%	\$41,077
Uniform Allowance	0	Seasonal (2/12 mon)	12	\$70	\$0	\$0	\$0

*Includes 2 non-sup. BC

Benefits @
0.00%

Uniform Allowance	1	HEM		\$450	\$450	\$0	\$450
Uniform Allowance	1	Disp Clrk		\$450	\$450	\$0	\$450
Prot. Clothing Allowance	1	HEM Prot. Clothing	12	\$9	\$108	\$0	\$108
Tool Allowance	1	HEM Tool Allowance		\$575	\$575	\$0	\$575

Foodstuffs		All Stations					\$6,028
Foodstuffs		Training					\$500
Quartermg & Housekeeping		All Stations					\$1,100
Laundry		All Stations					\$1,470
Safety Gear		All Stations (Service Centers)					\$2,000

Subtotal Personal Care \$53,758

Vehicles

County Owned	43	Engines and Support Vehicles	Actual Expense				\$0
State owned	1	Engines	0	\$350			\$0
State owned	3	Pickups	0	\$0.31			\$0
Fuel		In Sch. "C"					\$0

Subtotal Vehicles \$0

Miscellaneous

Postage		Felton HQ					\$2,250
Postage		All Stations					\$1,000
Equipment Rental		All Stations					\$500
Printing		Service Center					\$2,000
General Expense		Saratoga Summit		\$500			
General Expense		Service Center		\$4,000			
General Expense		Shop		\$2,000			
General Expense		ECC		\$500			

Subtotal General Expense \$7,000

Subtotal Miscellaneous \$12,750

Subtotal Operating Expenses \$114,708

Total Personal Service and Operating Expense \$5,142,967

Administrative Charge 10.65% \$547,726

Subtotal Schedule A \$5,690,693

Facility Operations - Contractual
Rent - Buildings & Grounds Non-State Owned **Credit** (\$18,000)

Grand Total Schedule A \$5,672,693

Total PM= 366
PY= 30.5

27-Dec-07 :Date Run

INDEX 1700 PCA 17711

THIS IS SCHEDULE A - 4144 OF THE COOPERATIVE AGREEMENT, DATED JULY 1, 2007
 BETWEEN STATE OF CALIFORNIA DEPARTMENT OF FORESTRY AND FIRE PROTECTION
 AND SAN MATEO COUNTY, A LOCAL AGENCY

PERSONAL SERVICES

Fire Control & Emergency Service	No.	Class.	Period	Mos.	Rate	Total Salary	Benefits @ 28.88%	Total
Sch. B Personnel								
Battalion Chief	0	Bat. Chief	11/1-5/30	7	\$3,565	\$0	\$0	\$0
FC Ops.	0	Captain	11/1-5/31	7	\$2,084	\$0	\$0	\$0
FEM ERB	1		11/1-2/15	3.5	\$277	\$970	\$280	\$1,249

	No.	Class.	Period	Mos.	Rate	Total Salary	Benefits @ 56.11%	Total
FEM EDP	1		11/1-2/15	3.5	\$554	\$1,939	\$1,087.97	\$3,026.97

Subtotal-Personal Services \$4,276

Administrative Charge 10.65% \$455

Grand Total Amador Plan \$4,732

27-Dec-07 RUN DATE

EXHIBIT D, SCHEDULE C

LOCAL FUNDED RESOURCES

NAME OF LOCAL AGENCY San Mateo County

This is Schedule C of Cooperative Agreement originally dated July 1, 2006, by and between CAL FIRE of the State of California and LOCAL AGENCY.

Fiscal Year 07-08

San Mateo County Fire Department
 Fiscal Year 2007 - 2008
 County Service Area # 1
 Org. Number 35600

Services and Supplies

5121	Clothing Supplies	\$5,000
5165	Other Medical/Dental/Lab Supplies	\$2,000
5196	Photo Copier Lease	\$8,000
5232	Other Special Tools/Equip.	\$1,200
5428	Misc. Repairs & Maint.	\$32,000
5641	Telephone Belmont Telephone	\$12,000

5733	Training Supplies	\$4,725
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5815	Contract/Fire Prot.**(See Schedule A Detail)	\$1,422,129
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5872	In House Admin Charges	\$32,481
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5969	Other Special Dept. Expense	\$1,575
	Station 17 Furniture	\$1,000
	Vegetation Management Project	\$5,000
	Fire Hose	\$5,000
	Explorer Post #955	\$500
	Highlands Emergency Action Team	\$10,000
	ESA Admin Costs	\$3,500

6712	Telephone Service Charges	\$100
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6713	ISD	\$53
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	Subtotal Operating	\$1,546,263
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FIXED ASSETS

7311	Fixed Assets - Subtotal Equipment Rescue Tool	\$20,000
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	Total Operating and Personnel	\$1,566,263
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SCHEDULE C

SAN MATEO COUNTY FIRE DEPARTMENT
Fiscal Year 2007- 2008

Organization Number 35800
 Account Number & Description

SERVICES AND SUPPLIES

4512 Workers Compensation		\$1,552.00
5121 Safety Clothing		\$20,000
Turnouts (Replacement/New Personnel-All)	\$13,000	
Fire Helmets (Replacement/New Personnel-All)	\$3,000	
Turnout Boots (Replacement/New Personnel-All)	\$2,000	
Boot Allowance (Volunteer Companies)	\$2,000	
5162 Photo Supplies - Fire Marshal		\$0
5165 Medical/Dental Supplies		\$8,000
Supplies A.L.S. Companies	\$4,000	
Supplies B.L.S. (Volunteer Companies)	\$4,000	
5169 Immunizations (All Personnel)		\$500
5171 Clinical Expenses (Volunteer Physicals)		\$1,000
5191 Outside Printing & Copy Srv.		\$500
5193 General Office Supplies		\$4,500
5195 Subscriptions		\$1,600
Fire Marshal's Office	\$500	
Administration	\$500	
Paid Companies	\$300	
Volunteer Companies	\$300	
5196 Photo Copier Leases		\$10,500
Station 21	\$1,000	
Station 18	\$1,000	
Station 57	\$1,500	
Station 58	\$1,000	
Station 59	\$1,000	
Training	\$5,000	
5212 Computer Equipment <\$3,000		\$5,000
5232 Professional Tools/Equipment (All Companies)		\$4,000
5234 Office Furniture/Equipment		\$2,000
5332 Professional Organizations		\$2,000
Fire Marshal	\$500	
Training	\$750	
Chief's Associations	\$750	
5413 Motor Vehicle Equipment Maintenance		\$90,000
5416 Fuel & Lubrication		\$45,500

5424 Radio Maintenance		\$20,600
Pager Repairs (Volunteers)	\$1,500	
Base Station Repairs (T.E.A. Contract)	\$12,000	
Mobile Installations, Repairs	\$3,600	
Control 1-D Repairs	\$1,000	
Z-Tron Repairs	\$1,000	
Replacement Supplies	\$1,000	
Microwave - Recurring	\$500	
5428 Misc. Repairs, Equipment		\$29,000
Breathing Apparatus Maintenance	\$6,500	
Fire Equipment (Miscellaneous)	\$6,000	
Mobile Equipment	\$6,000	
Shop Laundry	\$4,500	
Amkus Tool Maintenance	\$3,000	
Turnout Maintenance	\$3,000	
5455 General Maintenance, Structures		\$30,000
Point of Service	\$30,000	
5517 Miscellaneous Rents and Leases		\$12,304
NEO Post Postage Meter	\$2,500	
Address Program - Fire Marshal	\$2,000	
Planning Dept. Area	\$4,804	
CSG Consultants	\$3,000	
5631 PG&E		\$15,000
Cordilleras	\$12,000	
Loma Mar	\$3,000	
5632 Liquid Propane Gas		\$6,900
Skylonda	\$3,500	
Pescadero	\$3,400	
5634 Disposal		\$10,800
Cordilleras	\$1,200	
Skylonda	\$3,200	
Belmont	\$3,200	
Pescadero	\$1,200	
Medical Waste (All Stations)	\$2,000	
5635 Water		\$5,650
Belmont	\$1,150	
Pescadero	\$1,500	
Skylonda	\$2,000	
Cordilleras	\$1,000	
5641 Telephone		\$37,560
Belmont Station	\$1,000	
Cordilleras	\$4,800	
Loma Mar (Volunteer)	\$360	
Creative Interconnect	\$7,800	
Comm Lines	\$6,600	
Z-Trons (234.271.8837)	\$ 2,200	
Control 1 (234.271.9274)	\$ 2,200	
Felton ECC (236.271.5654)	\$ 2,200	Printer
Miscellaneous Repairs	\$1,000	
Paramedic Cell Phones (7 ea.)	\$4,000	
Phone Pagers (18 ea.)	\$2,000	
Comcast	\$10,000	

5724 Travel-Business \$2,000

5733 Training & Education \$34,470

Tuitions - All Personnel \$3,000
Paramedic C.E. \$6,000
Ben Lomond Training Center \$5,000
Instructors' Pay \$2,000
Career/VFF Classes \$3,000
Auto Extrication \$2,500
Swiftwater Team \$3,000
EMT Class Upgrade \$4,000
Materials and Supplies \$3,000
Training Conferences \$1,000
Hunter - Liggett Wildland Drill \$970
 Volunteer \$1,500
Live Fire C.D.F. / Modesto \$1,000
 Volunteer \$1,000

5815 Contract-Fire Protection \$5,734,785

Personnel - Regular Pay - Extra Help \$30,000
 (Volunteer Training Stipend)
Professional Services (Sched. A) \$5,672,693
Contract-Critical Incident Stress \$3,000
Volunteer Length of Service Benefit \$21,560
Amador contract \$4,732
Volunteer Insurance \$2,800

5969 Other Special Departmental Expense \$28,484

Fire Hose, Replacement (All Companies) \$17,000
Breathing Apparatus Upgrade
Protection & Planning \$2,600
Special Operations \$2,200
ESA Admin Costs \$6,684

Services & Supplies Subtotal \$6,164,205

OTHER CHARGES

6265 Redwood City \$0
Belmont \$4,050
Cordilleras \$1,700
Skylonda \$2,500
Pescadero \$2,500
La Honda \$2,500
Loma Mar \$500
Kings Mtn. \$2,500
Burlingame \$0
South San Francisco \$26,870
Fire Net 6 \$37,469
Paramedic Applications \$1,000

6711 Radio Charges	\$1,848
6712 ISD Telephone Charges (pagers)	\$8,850
6713 ISD Charges	\$285
6714 Facility Service Charges	\$21,392
6717 Motor Vehicle Services	\$15,950
6724 Auto Liability	\$24,302
Volunteer Owned Vehicles	
County Owned Vehicles	
6725 General Liability (Volunteers)	\$38,975
6728 Property Insurance	\$14,276

Other Charges Subtotal	\$207,467
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FIXED ASSETS

7211 Fixed Assets-Structural improvements

7311 Fixed Assets-Equipment

 2 Amkus Rescue Tools

\$40,000

Fixed Assets Subtotal	\$40,000
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GRAND TOTAL	\$6,411,672
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Schedule "C" Total Only	\$734,247
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EXHIBIT D, SCHEDULE E

This is Schedule E of Cooperative Agreement originally dated July 1, 2006, by and between the CAL FIRE of the State of California and LOCAL AGENCY

Fiscal Year 07-08

The CAL FIRE, State of California and its officers, agents, employees, and servants are included as additional insured's for the purposes of this contract. The State shall receive thirty (30) days prior written notice of any cancellation or change to the policy at the addresses listed in Exhibit A, Page 2.

NAME OF LOCAL AGENCY San Mateo County

**SELF-INSURANCE CERTIFICATION BY LOCAL AGENCY FOR
TORT LIABILITY**

This is to certify that LOCAL AGENCY has elected to be self-insured under the self-insurance provision provided in Exhibit C, Section 13.

By: Janine Keller
Signature
Risk Manager
Title

Janine Keller
Printed Name

**SELF-INSURANCE CERTIFICATION BY LOCAL AGENCY
FOR**

WORKER'S COMPENSATION BENEFITS

This is to certify that LOCAL AGENCY has elected to be self-insured for Workers' Compensation benefits which comply with Labor Code Section 3700 as provided in Exhibit C, Section 14.

By: Janine Keller
Signature
Risk Manager
Title

Janine Keller
Printed Name

**SELF-INSURANCE CERTIFICATION BY LOCAL AGENCY
FOR**

LOCAL AGENCY-OWNED VEHICLES

This is to certify that LOCAL AGENCY has elected to be self-insured for local agency-owned vehicles under the self-insurance provision provided in Exhibit C, Section 15.

By: Janine Keller
Signature
Risk Manager
Title

Janine Keller
Printed Name



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/07/2007

PRODUCER BROOKE AGENCY SERVICES CO., LLC 2151 PROFESSIONAL DRIVE #105 ROSEVILLE CA 95661 Ph (916)783-0000 Ext. 3002	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 SAN MATEO COUNTY 455 COUNTY CENTER, 5TH FL. REDWOOD CITY, CA 94063-1664	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">INSURERS AFFORDING COVERAGE</td> <td style="width: 30%;">NAIC #</td> </tr> <tr> <td>INSURER A: INS CO OF THE STATE OF PENNSYLVANIA</td> <td></td> </tr> <tr> <td>INSURER B: LEXINGTON INSURANCE COMPANY</td> <td></td> </tr> <tr> <td>INSURER C: ACE AMERICAN INSURANCE COMPANY</td> <td></td> </tr> <tr> <td>INSURER D: CHUBB GROUP</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: INS CO OF THE STATE OF PENNSYLVANIA		INSURER B: LEXINGTON INSURANCE COMPANY		INSURER C: ACE AMERICAN INSURANCE COMPANY		INSURER D: CHUBB GROUP		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC #												
INSURER A: INS CO OF THE STATE OF PENNSYLVANIA													
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INSURER C: ACE AMERICAN INSURANCE COMPANY													
INSURER D: CHUBB GROUP													
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	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> PUBLIC ENTITY <input checked="" type="checkbox"/> ERRORS/OMISSIONS GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	4890814	5/22/07	5/22/08	EACH OCCURRENCE \$ 4,750,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ N/A MED EXP (Any one person) \$ N/A PERSONAL & ADV INJURY \$ 4,750,000 GENERAL AGGREGATE \$ N/A PRODUCTS - COMP/OP AGG \$ 4,750,000
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	4890814	5/22/07	5/22/08	COMBINED SINGLE LIMIT (Ea accident) \$ 4,750,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
B		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$ -0-	6501989	5/22/07	5/22/08	EACH OCCURRENCE \$ 25,000,000 AGGREGATE \$ 25,000,000 \$ \$
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WCU C44639920	5/22/07	5/22/08	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000
D		OTHER Crime Coverage	8209-1808	10/24/07	10/24/08	\$10,000,000.00 Employee theft/\$500,000.00 premises-\$250,000 retained limit

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

Evidence of Insurance Coverage

CERTIFICATE HOLDER

CANCELLATION

State of California Cal Fire 320 Paul Scannell Rd. San Mateo, CA 94402	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Felicia Chandler
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IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

DISCLAIMER

The Certificate of Insurance on the reverse side of this form does not constitute a contract between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.