

**SUBMITTAL TO THE BOARD OF SUPERVISORS
COUNTY OF RIVERSIDE, STATE OF CALIFORNIA**

744
A



FROM: : Community Action Partnership of Riverside County

SUBMITTAL DATE:
July 29, 2010

SUBJECT: Amendment #2 to Agreement #09B-5531 with Department of Community Services and Development for the 2009 Low-Income Home Energy Assistance Program

RECOMMENDED MOTION:

That the Board of Supervisors approve and:

- 1) Authorize the Chairman of the Board to sign the attached Amendment #2 to Agreement #09B-5531 between the Department of Community Services and Development (CSD) and Community Action Partnership of Riverside County (CAP Riverside) extending the end of the term of the agreement from June 30, 2010 to September 30, 2010.

Departmental Concurrence

Lois J. Carson

Continued (3-pages total)

Lois J. Carson, CAP, Executive Director

FORM APPROVED COUNTY COUNSEL
BY: *W. Victor* 7/27/10
DATE
MARSHAL VICTOR

FINANCIAL DATA	Current F.Y. Total Cost:	\$0	In Current Year Budget:	Yes
	Current F.Y. Net County Cost:	\$ 0	Budget Adjustment:	No
	Annual Net County Cost:	\$ 0	For Fiscal Year:	10/11

SOURCE OF FUNDS: 100% Federal	Positions To Be Deleted Per A-30	<input type="checkbox"/>
	Requires 4/5 Vote	<input type="checkbox"/>

C.E.O. RECOMMENDATION:

APPROVE

BY: *Debra Cournoyer*
Debra Cournoyer

County Executive Office Signature

- Consent
- Policy
- Consent
- Policy

Dept Recomm.:
Per Exec. Ofc.:

Prev. Agn. Ref.: 2/24/09 (#3.10) District: All Agenda Number:
9/1/09 (#3.22) ATTACHMENTS FILED WITH THE CLERK OF THE BOARD

3.10

FROM: Community Action Partnership
Of Riverside County

DATE: July 29, 2010

SUBJECT: Amendment #2 to Agreement #09B-5531
with Department of Community Services
and Development for the 2009 Low-Income
Home Energy Assistance Program

PAGE: 2 of 2

BACKGROUND:

On February 24, 2009 (#3.10), the Board approved Agreement #09B-5531 establishing the 2009 LIHEAP program to: 1) assist low-income consumers with high energy bills, 2) repair or replace heating and cooling devices that contribute to high energy consumption, and 3) weatherize homes.

On September 1, 2009 (#3.22), the Board approved Amendment #1 to Agreement 09B-5531 to increase the 2009 LIHEAP allocation by \$11,667 and make minor changes that CSD inadvertently excluded from the original contract.

Amendment #2 extends the end of the term of the agreement from June 30, 2010 to September 30, 2010.

FINANCIAL IMPACT: No County General Funds will be required.

CONCUR/EXECUTE:

LC:MYJ:KA:jb

AGREEMENT NUMBER 09B-5531	AMENDMENT NUMBER 2
REGISTRATION NUMBER 47000109353570.2	

1. This Agreement is entered into between the State Agency and the Contractor named below
 STATE AGENCY'S NAME
Department of Community Services and Development
 CONTRACTOR'S NAME
Community Action Partnership of Riverside County
2. The term of this Agreement is : **January 1, 2009 through September 30, 2010**
3. The maximum amount of this Agreement is: **\$ 4,389,012.00**
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:

1. The maximum amount of this Agreement payable to Contractor by the State remains unchanged at **\$4,389,012.00.**
2. The term of this Agreement is changed from January 1, 2009 through June 30, 2010 to **January 1, 2009 through September 30, 2010.**

All other terms and conditions remain unchanged.

FORM APPROVED COUNTY COUNSEL
 BY: MS Victor 7/27/10
 MARSHA L. VICTOR DATE

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

CONTRACTOR		CALIFORNIA Department of General Services Use Only
CONTRACTOR'S NAME (If other than an individual, state whether a corporation, partnership, etc.) Community Action Partnership of Riverside County		I hereby certify that all conditions for exemption have been complied with, and this document is exempt from the Department of General Services' approval.
BY (Authorized Signature) 	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING		
ADDRESS		
2038 Iowa Ave, Suite B-102, Riverside, CA 92507		
STATE OF CALIFORNIA		
AGENCY NAME Department of Community Services and Development		
BY (Authorized Signature) 	DATE SIGNED (Do not type)	
PRINTED NAME AND TITLE OF PERSON SIGNING Leisa Maestretti, Chief Financial Officer		
ADDRESS 2389 Gateway Oaks Drive, Suite 100, Sacramento, California 95833		
		<input type="checkbox"/> Exempt per _____