

Council/Agency Meeting Held: _____	_____ City Clerk's Signature
Deferred/Continued to: _____	
<input type="checkbox"/> Approved <input type="checkbox"/> Conditionally Approved <input type="checkbox"/> Denied	
Council Meeting Date: July 5, 2005	Department ID Number: BD 2005-2

**CITY OF HUNTINGTON BEACH
REQUEST FOR ACTION**

SUBMITTED TO: HONORABLE MAYOR AND CITY COUNCIL MEMBERS

SUBMITTED BY: *Penelope Culbreth Graft*
PENELOPE CULBRETH-GRAFT, CITY ADMINISTRATOR

PREPARED BY: ROSS CRANMER, DIRECTOR OF BUILDING & SAFETY

*Bill Lane for
Ross Cranmer*

SUBJECT: APPROVE AN AMENDMENT TO THE PROFESSIONAL SERVICES CONTRACT WITH SCOTT FAZEKAS ASSOCIATES, INC.

RECEIVED
CITY CLERK
CITY OF
HUNTINGTON BEACH, CA
JUN 21 2005

Statement of Issue, Funding Source, Recommended Action, Alternative Action(s), Analysis, Environmental Status, Attachment(s)

Statement of Issue:

This is a request to amend an existing Professional Services Contract for plan review services in the amount of \$50,000 with Scott Fazekas Associates, Inc. The amended contract is for a total amount of not-to-exceed \$167,475.

Funding Source:

Existing approved appropriation in the Professional Services budget (business unit number 10055201.69365).

Recommended Action:

Motion to:

1. "Approve the Contract Amendment and Authorize the Mayor and City Clerk to execute the Professional Services Contract between the City of Huntington Beach and Scott Fazekas Associates, Inc."
2. "Authorize the Director of Building & Safety to expend \$50,000 for Professional Services for plan review services out of 10055201.69365."

E-6

REQUEST FOR ACTION

MEETING DATE: July 5, 2005

DEPARTMENT ID NUMBER: BD 2005-2

Alternative Action:

The City Council may make the following alternative motions(s):

1. "Deny the Professional Services Contract between the City and Scott Fazekas Associates, Inc."
2. "Continue the item and direct staff accordingly."

Analysis:

The Building and Safety Department staffs the building counter, performs health and safety plan reviews and provides over the counter plan review services for minor projects. The applicants who submit projects to the City pay fees for these services and service levels have been established. We are currently not meeting our 3-week service standard for plan review services since the first plan review is now taking 4 to 5 weeks.

The existing purchase order for contract plan review services is nearly depleted due to the high volume of construction activity. Therefore, the ability of the Building and Safety Department to provide plan review services in a timely manner continues to be hampered.

Staff Recommendation:

Staff recommends the City Council approve the amendment to the contract with Scott Fazekas Associates, Inc. for a not-to-exceed amount of \$167,475 and authorize the Mayor and City Clerk to execute the documents.

Attachment(s):

City Clerk's Page Number	No.	Description
368	1.	Amendment to Contract with Scott Fazekas Associates, Inc.
	2.	Insurance Waiver
	3.	Insurance Certificates

E-6.2

E-6.3

ATTACHMENT NO. 1

AMENDMENT NO. 1 TO AGREEMENT BETWEEN
THE CITY OF HUNTINGTON BEACH AND
SCOTT FAZEKAS & ASSOCIATES FOR
PLAN REVIEW SERVICES

THIS AMENDMENT is made and entered into by and between the CITY OF HUNTINGTON BEACH, a California municipal corporation, hereinafter referred to as "CITY", and SCOTT FAZEKAS & ASSOCIATES, INC., a California corporation, hereinafter referred to as CONSULTANT.

WHEREAS, CITY and CONSULTANT are parties to that certain agreement, dated October 1, 2004, entitled "Professional Services Contract Between the City of Huntington Beach and Scott Fazekas & Associates, Inc. for Plan Review Services" which agreement shall hereinafter be referred to as the "Original Agreement," and

CITY and CONSULTANT wish to amend the Original Agreement to reflect additional compensation to be paid to CONSULTANT,

NOW, THEREFORE, it is agreed by CITY and CONSULTANT as follows:

1. ADDITIONAL COMPENSATION

Section 4 of the Original Agreement, entitled "Compensation," is hereby amended to read as follows:

In consideration of the performance of the services described herein, CITY agrees to pay CONSULTANT on a time and materials basis at the rates specified in Exhibit "B," which is attached hereto and incorporated by reference into this Agreement, a fee, including all costs and expenses, not to exceed One Hundred Sixty-Seven Thousand, Four Hundred Seventy Five Dollars (\$167,475).

2. REAFFIRMATION

Except as specifically modified herein, all other terms and conditions of the Original Agreement shall remain in full force and effect.

REST OF PAGE NOT USED

E-6.4

IN WITNESS WHEREOF, the parties hereto have caused this Agreement to be executed by and through their authorized officer on _____, 200__.

SCOTT FAZEKAS & ASSOCIATES, INC.

CITY OF HUNTINGTON BEACH,
a municipal corporation of the State of California

By: *Scott R. Fazekas*
Scott R. Fazekas,
President/Chief Financial Officer

Mayor

REVIEWED AND APPROVED:

City Clerk

Penelope Culliver
City Administrator

APPROVED AS TO FORM:

Jennifer M. Rath
JM *6/13/05* City Attorney *Kedalos*

INITIATED AND APPROVED:

Tom D
Director of Building & Safety

E-6.5

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ATTACHMENT NO. 2



INSURANCE AND INDEMNIFICATION WAIVER MODIFICATION REQUEST

RECEIVED

JUN 20 2005

City of Huntington Beach
City Attorney's Office

- Requested by: Jan Richards
- Date: June 14, 2005
- Name of contractor/permittee: Scott Fazekas & Associates, Inc.
- Description of work to be performed: Professional Plan Review Services
- Value and length of contract: \$50,000 for three months
- Waiver/modification request: Test revisions on hold harmless and waive \$10,000 deduct.
- Reason for request and why it should be granted: Pan Review services is administering a government process and is not producing a product for the City. Consultant is working with the City and Guided by the City
- Identify the risks to the City in approving this waiver/modification: No more than hiring a City Employee

Department Head Signature

6/14/05

Date:

APPROVALS

Approvals must be obtained in the order listed on this form. Two approvals are required for a request to be granted. Approval from the City Administrator's Office is only required if Risk Management and the City Attorney's Office disagree.

1. Risk Management

Approved

Denied

Signature

6-20-05

Date

2. City Attorney's Office

Approved

Denied

Signature

6-21-05

Date

3. City Administrator's Office

Approved

Denied

Signature

6-21-05

Date

If approved, the completed waiver/modification request is to be submitted to the City Attorney's Office along with the contract for approval. Once the contract has been approved, this form is to be filed with the Risk Management Division of Administrative Services

E-6.7

E-6.8

ATTACHMENT NO. 3

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID AH
FAZEK-1

DATE (MM/DD/YYYY)
06/09/05

PRODUCER
G. S. Levine Insurance
Services, Inc.
3377 Carmel Mountain Road
San Diego CA 92121
Phone: 858-481-8692 Fax: 858-481-7953

INSURED

Scott Fazekas & Associates
9 Corporate Park S-200
Irvine CA 92714

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.

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A:	Greenwich Insurance	22322
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 ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$
						MED EXP (Any one person)	\$
						PERSONAL & ADV INJURY	\$
						GENERAL AGGREGATE	\$
						PRODUCTS - COMP/OP AGG	\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS.				COMBINED SINGLE LIMIT (Ea accident)	\$
						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	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS	OTH-ER
						E.L. EACH ACCIDENT	\$
						E.L. DISEASE - EA EMPLOYEE	\$
						E.L. DISEASE - POLICY LIMIT	\$
A		Professional Liability	DPR9411612	06/05/05	06/05/06	Claim/Agg	1,000,000
						Ded	10,000

APPROVED AS TO FORM
 JENNIFER McGRATH
 CITY ATTORNEY

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Re: Building Safety Plan Check Services
 Proof of Insurance
 *10 day notice of cancellation applies for non-payment of premium. XX

CERTIFICATE HOLDER

CITYHUN

City of Huntington Beach
 Attn: Mr. Ross Cranmer
 2000 Main Street
 Huntington Beach CA 92648

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL MAIL 30* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, [REDACTED]

AUTHORIZED REPRESENTATIVE
 Gary Levine

Policy Number: BK01777291
Owners, Lessees Or Contractors (Form B)
ADDITIONAL INSURED

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

LIABILITY COVERAGE PART,

SCHEDULE

Name of Person or Organization:

City of Huntington Beach, its agents, officers and employees

Re: Building Safety Plan Check Services

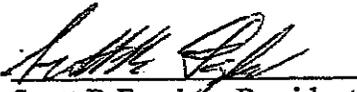
SECTION II-WHO IS AN INSURED is amended to include
as an insured the person or organization shown in

Schedule, but only with respect to liability arising
out of "your work" for that Insured by or for you.

E-6.11

RESOLUTION

A board meeting was held on December 8, 1997 to confirm that SCOTT R. FAZEKAS, President, has signature authority to bind the Corporation of SCOTT FAZEKAS & ASSOCIATES, INC. The status remains the same to date.


Scott R Fazekas, President 7/13/04
Dated

Corporate Seal:

E-6.12

1785049

UNDOUBTED
FILED

In the Office of the Secretary of State
the State of California

JUN 4 1996

Bell Jones
JONES, Secretary of State

ARTICLES OF INCORPORATION
OF
SCOTT FAZEKAS & ASSOCIATES, INC.

I

The name of this corporation is SCOTT FAZEKAS & ASSOCIATES, INC.

II

The purpose of this corporation is to engage in any lawful act or activity for which a corporation may be organized under the General Corporation Law of California other than the banking business, the trust company business or the practice of a profession permitted to be incorporated by the California Corporations Code.

III

The name and address in the State of California of the initial agent for service of process for the corporation is: William A. Woodyard, 1948 Port Cardigan, Newport Beach, California 92660.

IV

This corporation is authorized to issue only one class of shares of stock; and the total number of shares which this corporation is authorized to issue is One Hundred Thousand (100,000).

IN WITNESS WHEREOF, the undersigned, who is the incorporator of this corporation, has executed these Articles of Incorporation on June 3, 1996.

Scott Fazekas
SCOTT FAZEKAS, Incorporator

E-6.13

State of California



SECRETARY OF STATE

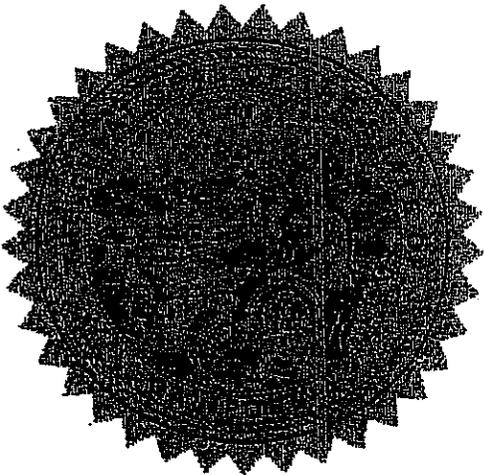
CORPORATION DIVISION

I, *BILL JONES*, Secretary of State of the State of California, hereby certify:

That the annexed transcript has been compared with the corporate record on file in this office, of which it purports to be a copy, and that same is full, true and correct.

IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this

JUN 5 196



Bill Jones

Secretary of State

E-6.14

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