



**Contract Number**  
**20-1024 A2**

**SAP Number**  
**4400015472**

## Public Works

<b>Department Contract Representative</b>	Sameh Basta
<b>Telephone Number</b>	(909) 387-8040
<b>Contractor</b>	Vance Corporation
<b>Contractor Representative</b>	Derek Ritarita
<b>Telephone Number</b>	(909) 355-4333
<b>Contract Term</b>	October 27, 2020 thru December 31, 2025
<b>Original Contract Amount</b>	\$2,500,000
<b>Amendment Amount</b>	
<b>Total Contract Amount</b>	\$2,500,000
<b>Cost Center</b>	6650002000
<b>Grant Number (if applicable)</b>	

### IT IS HEREBY AGREED AS FOLLOWS:

#### Amendment No. 2 to Contract No. 20-1024

San Bernardino County ("County") and Vance Corporation ("Contractor"), hereby seek to enter into this Amendment No. 2 to amend Contract No. 20-1024 as follows:

1. DELETE Section C. "TERM OF CONTRACT", and REPLACE it with a revised Section C., which shall now read as follows:

#### C. TERM OF CONTRACT

This contract is effective October 27, 2020 and expires December 31, 2025, but may be terminated earlier in accordance with provisions of this Contract.

2. All other terms and conditions of Contract No. 20-1024 shall remain unchanged.
3. This Amendment No. 2 shall take effect on the date it is last signed by both parties.
4. This Amendment may be executed in any number of counterparts, each of which so executed shall be deemed to be an original, and such counterparts shall together constitute one and the same Amendment.

The parties shall be entitled to sign and transmit an electronic signature of this Amendment (whether by facsimile, PDF or other email transmission), which signature shall be binding on the party whose name is contained therein. Each party providing an electronic signature agrees to promptly execute and deliver to the other party an original signed Amendment upon request.

IN WITNESS WHEREOF, the Board of Supervisors of San Bernardino County and Contractor have each caused this amendment to be subscribed by their respective duly authorized officers, on their behalves.

SAN BERNARDINO COUNTY

► *Dawn Rowe*  
Dawn Rowe, Chair, Board of Supervisors

Dated: JUN 10 2025  
SIGNED AND CERTIFIED THAT A COPY OF THIS  
DOCUMENT HAS BEEN DELIVERED TO THE  
CHAIRMAN OF THE BOARD

By *Lynna Mohr*  
Lynna Mohr  
Clerk of the Board of Supervisors  
San Bernardino County  
Deputy



Vance Corporation

(Print or type name of corporation, company, contractor, etc.)

By ► *Derek Ritarita*  
(Authorized signature - sign in blue ink)

Name Derek Ritarita  
(Print or type name of person signing contract)

Title President  
(Print or Type)

Dated: 05/09/2025

Address 459 Egan Avenue P.O. Box 575  
Beaumont, CA 92223

**FOR COUNTY USE ONLY**

Approved as to Legal Form

► *Aaron Gest*  
Aaron Gest, Deputy County Counsel  
Date 5/28/25

Reviewed for Contract Compliance

► *Andy Silao*  
Andy Silao, P.E.  
Date 6/2/2025

Reviewed/Approved by Department

► *Noel Castillo*  
Noel Castillo, Director  
Date 5/30/25

**CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT****CIVIL CODE § 1189**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California )

County of Riverside )On 05/09/2025 before me, Izabella Rose Daniello, Notary Public,

Date

*Here Insert Name and Title of the Officer*personally appeared Derek Ritarita*Name(s) of Signer(s)*

who proved to me on the basis of satisfactory evidence to be the person~~(s)~~ whose name~~(s)~~ is/~~are~~ subscribed to the within instrument and acknowledged to me that he/~~she/they~~ executed the same in his/~~her/their~~ authorized capacity~~(ies)~~, and that by his/~~her/their~~ signature~~(s)~~ on the instrument the person~~(s)~~, or the entity upon behalf of which the person~~(s)~~ acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature Izabella Rose Daniello  
*Signature of Notary Public**Place Notary Seal Above***OPTIONAL**

*Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_

Document Date: \_\_\_\_\_ Number of Pages: \_\_\_\_\_

Signer(s) Other Than Named Above: \_\_\_\_\_

**Capacity(ies) Claimed by Signer(s)**

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_☐ Partner — ☐ Limited ☐ General☐ Individual ☐ Attorney in Fact☐ Trustee ☐ Guardian or Conservator☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_

Signer's Name: \_\_\_\_\_

☐ Corporate Officer — Title(s): \_\_\_\_\_☐ Partner — ☐ Limited ☐ General☐ Individual ☐ Attorney in Fact☐ Trustee ☐ Guardian or Conservator☐ Other: \_\_\_\_\_

Signer Is Representing: \_\_\_\_\_