



Contract Number

15-225 A-3

SAP Number

4400007471

Sheriff/Coroner/Public Administrator

Department Contract Representative
Telephone Number

John Ades, Captain
(909) 387-0640

Contractor
Contractor Representative
Telephone Number
Contract Term
Original Contract Amount
Amendment Amount
Total Contract Amount
Cost Center

10-8 Retrofit, Inc.
Daniel Keenan, President
05/08/2015 – 06/30/2021
Fee Per Service Contract
4430131000

IT IS HEREBY AGREED AS FOLLOWS:

AMENDMENT NO. 3

Contract No. 15-224 to provide vehicle safety equipment installation and removal services by 10-8 Retrofit, Inc., is hereby amended, effective June 24, 2020 as follows:

Replacing Section D. TERM OF CONTRACT with the following:

D. TERM OF CONTRACT

This Contract is effective as of May 8, 2015 and expires June 30, 2021 but may be terminated earlier in accordance with provision of this Contract.

The County and the Contractor each reserve the right to terminate the Contract, for any reason, with a thirty (30) day written notice of termination. Such termination may include all or part of the services described herein. Upon such termination, payment will be made to the Contractor for services rendered and expenses reasonably incurred prior to the effective date of termination. Upon receipt of termination notice Contractor shall promptly discontinue services unless the notice directs otherwise. Contractor shall deliver promptly to County and transfer title (if necessary) all completed work, and work in progress, including drafts, documents, plans, forms, data, products, graphics, computer programs and reports.

Except as amended all other terms and conditions of this contract remain as stated therein.

COUNTY OF SAN BERNARDINO




Curt Hagman, Chairman, Board of Supervisors

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

Lynna Monell
Clerk of the Board of Supervisors
of the County of San Bernardino

By _____
Deputy

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

By  _____
(Authorized signature - sign in blue ink)

Name _____
(Print or type name of person signing contract)


Title _____
(Print or Type)

Dated: _____

Address _____


FOR COUNTY USE ONLY

Approved as to Legal Form

 _____
Richard D. Luczak, Deputy County Counsel


Date _____

Reviewed for Contract Compliance

 _____

Date _____

Reviewed/Approved by Department

 _____
John Ades, Captain

Date _____