

STATE OF CALIFORNIA - DEPARTMENT OF GENERAL SERVICES

**STANDARD AGREEMENT**

STD 213 (Rev. 04/2020)

AGREEMENT NUMBER

20-0161

PURCHASING AUTHORITY NUMBER (If Applicable)

1. This Agreement is entered into between the Contracting Agency and the Contractor named below:

CONTRACTING AGENCY NAME

CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE

CONTRACTOR NAME

COUNTY OF SAN BENITO

2. The term of this Agreement is:

START DATE

July 1, 2020

THROUGH END DATE

June 30, 2022

3. The maximum amount of this Agreement is:

\$186,490.00 - One Hundred Eighty-Six Thousand Four Hundred Ninety Dollars and No Cents

4. The parties agree to comply with the terms and conditions of the following exhibits, which are by this reference made a part of the Agreement.

Exhibits	Title	Pages
Exhibit A	Scope of Work	10
Exhibit A	Attachment 1 - Pest Detection Trapping Guidelines	2
Exhibit A	Attachment 2 - PEIR Management Practices and Mitigation Measures	4
+ - Exhibit A	Attachment 3 - Protocol for Conducting Quality Control Planting of Detection Trapping Programs	4
+ - Exhibit A	Attachment 4 - Tiering Strategy Checklist	9
+ - Exhibit A	Attachment 5 - Commitment Forms	2
+ - Exhibit B	Budget Detail and Payment Provisions	1
+ - Exhibit B	Attachment 1 - Financial Plan	32
+ - Exhibit C	General Terms and Conditions	4
+ - Exhibit D	Special Provisions	2
+ - Exhibit E	Additional Provisions	6
+ - Exhibit F	Federal Terms and Conditions	4

Items shown with an asterisk (\*), are hereby incorporated by reference and made part of this agreement as if attached hereto.

These documents can be viewed at <https://www.dgs.ca.gov/OLS/Resources>

SCO ID: 8570-200161

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IN WITNESS WHEREOF, THIS AGREEMENT HAS BEEN EXECUTED BY THE PARTIES HERETO.

**CONTRACTOR**

CONTRACTOR NAME (if other than an individual, state whether a corporation, partnership, etc.)

COUNTY OF SAN BENITO County Counsel Approved as to legal form by: /s/ Joel Ellinwood, Assistant County Counsel 12-1-20

CONTRACTOR BUSINESS ADDRESS

PO BOX 699

CITY

HOLLISTER

STATE

CA

ZIP

95024

PRINTED NAME OF PERSON SIGNING

KAREN OVERSTREET

TITLE

AGRICULTURAL COMMISSIONER/SEALER

CONTRACTOR AUTHORIZED SIGNATURE

DATE SIGNED

**STATE OF CALIFORNIA**

CONTRACTING AGENCY NAME

CALIFORNIA DEPARTMENT OF FOOD AND AGRICULTURE

CONTRACTING AGENCY ADDRESS

1220 N STREET, ROOM 120

CITY

SACRAMENTO

STATE

CA

ZIP

95814

PRINTED NAME OF PERSON SIGNING

MONICA AGUIRRE

TITLE

STAFF SERVICES MANAGER I

CONTRACTING AGENCY AUTHORIZED SIGNATURE

DATE SIGNED

CALIFORNIA DEPARTMENT OF GENERAL SERVICES APPROVAL

EXEMPTION (If Applicable)