## 31108

RE: Renewal of PA-00809, Contract No. 31108 for Furnishing and Delivering Custodial Services to the City of Long Beach (BPLB09000041)

This Amendment to Contract No. 31108 is made and entered as of September 10, 2009, by and between the CITY OF LONG BEACH, a municipal corporation, and ABM Janitorial Services-Southwest Inc. (Contractor)

Contract No. 31108 is amended by mutual agreement of the parties and as indicated below by a check or other mark preceding the appropriate amendment: 1. The term is extended to 2. \$0 has been added to the 1st renewal term for a total ("not to exceed") amount of \$841,715.00 Prices during this period shall remain firm. 4. The price for certain items shall be increased as shown on Exhibit "A", which is attached hereto and incorporated herein by this reference. 5. The price for certain items shall be decreased as shown on Exhibit "A", which is attached hereto and incorporated herein by this reference. 6. The discount offered to the City is increased by \_\_\_\_ % 7. The items or locations identified on Exhibit "B", which is attached hereto and incorporated herein by this reference, are hereby deleted from the Contract. X 8. The locations identified on Exhibit "B", which is attached hereto and incorporated herein by this reference, are hereby added to the Contract. 9. Current permits, licenses, insurance and other required information are attached as Addendum No. 1. Except as expressly amended above, all terms and conditions in this Contract are ratified and confirmed and remain in full force and effect. Executed with all formalities required by law as of the date first stated above. Attach Notary if Out-of-State Contractor **CONTRACTOR:** President / Vice President / Secretary / Treasurer President / Vice President / Secretary / Treasurer (circle one) (circle one) Regional Controller THE CITY OF LONG BEACH: Assistant City Manager By: Approved as to form: ROBERT E. SHANNON, City Attorney City Manager EXECUTED PURSUANT TO SECTION 301 OF THE CITY CHARTER.





#### City of Long Beach Working Together to Serve

Date:

September 1, 2009

To:

Érik Sund, Purchasing Agent

From:

Art Cox, Superintendent, Street Maintenance

Subject:

BPLB09000041 - ABM Janitorial Services - Additional Location

Custodial services are needed at the Public Service Bureau Graffiti Office. Please add the following location to the subject contract.

Address: 100 E. Spring St., 90806 (east side of Pacific Ave, Veteran's Park)

Specifications	Days/Week	<u>Sq. Ft.</u>	<u>Surface</u>
Office / Workstation (trash/vacuum)	1	approx. 207	Carpet
Bathroom (stalls/sink/mop/supplies)		approx. 75	Vinyl/tiles

Per a phone conversation between Ms. Gayle Rutten, one of Public Services' Analysts, and Mr. Ron Dallas, ABM's Regional Sales Manager, it's a minimum of one hour per day and, according to the schedule, there will be there a maximum of 2 days per week.

One hour per day for a maximum of two days per week =  $$14.45 \times 2$  hours = \$28.90 per week.

There are 52 weeks in a year =  $$28.90 \times 52$  weeks = \$1,502.80 for the year. There are 12 months in a year = \$1,502.80 / 12 months = \$125.23 per month.

Mr. Dallas has given a monthly quote of \$125.00.

If you have any questions, Ms. Gayle Rutten can be reached at extension 2718 or I can be reached at extension 2780.

AC:GR:gr

Tess Alfonso, Administrative Analyst
Gayle Rutten, Administrative Analyst



# CITY OF LONG BEACH CLERK

DEPARTMENT OF FINANCIAL MANAGEMENTING BEACH, CALIF

333 W. OCEAN BLVD., 7th FLOOR LONG BEACH, CA 90802 TEL: (562) 570 3871 V FAX ( 584) 573 5039

BUSINESS RELATIONS BUREAU PURCHASING DIVISION

July 17, 2008

### **ADDENDUM NO. 1**

TO:

Larry Herrera, City Clerk

ATTN:

Allison Bunma, City Clerk Analyst

RE:

CONTRACT NO. 31108 (BID NO. PA-00809) - PROVIDING CUSTODIAL

**SERVICES (BPLB09000041)** 

Please note the following changes:

Company name: ABM Janitorial Services – Southwest, Inc.

DBA ABM Janitorial Services

Please find a copy of the W-9 as proof of the company's federal tax identification number. For any questions, please call Erik Sund, Business Relations Manager, at (562) 570-6663.

BY ORDER OF:

Erik Sund

**Business Relations Manager** 

ES/act

(Rev. October 2007) Department of the Treasury rnal Revenue Service

## **Request for Taxpayer Identification Number and Certification**

Give form to the requester. Do not send to the IRS.

		Name (as shown on your income tax return)						
Print or type ee Specific Instructions on page 2.		ABM JANITORIAL SERVICES - SOUTHWEST, INC.						
	ag	Business name, if different from above						
	=	ABM Janitorial Services						
	actions	Check appropriate box: ☐ Individual/Sole proprietor ☑ Corporation ☐ Partnership ☐ Limited liability company. Enter the tax classification (D=disregarded entity, C=corporation, P=partnership) ► ☐ Exempt payee						
		Address (number, street, and apt. or suite no.)	Requester's name and address (optional)					
	5	FILE# 53673						
	5	City, state, and ZIP code						
	1	LOS ANGELES, CA 90074-36732						
	3	List account number(s) here (optional)						
ď.	1	NOTE: This W-9 is applicable for customers with billing addresses in Southern CA & Southern NV.						
Pa	irt	Taxpayer Identification Number (TIN)						
Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> on page 3		ident es, it is	Social security number					
Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.			Employer identification number					
Pa	rt	II Certification						
Und	er	penalties of perjury, I certify that:						
1.	. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and							
	I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and							
3. I am a U.S. citizen or other U.S. person (defined below).								
with For	hol mo	cation instructions. You must cross out item 2 above if you have been notified by the IRS ilding because you have failed to report all interest and dividends on your tax return. For reportgage interest paid, acquisition or abandonment of secured property, cancellation of debt ement (IRA), and generally, payments other than interest and dividends, you are not require	al estate t , contribut	ransactions, ions to an in	item 2 does not apply. dividual retirement			

JAMES S. LUSK, EVP & CFO

#### U.S. person ▶ General Instructions

Signature of

Section references are to the Internal Revenue Code unless otherwise noted.

provide your correct TIN. See the instructions on page 4.

#### **Purpose of Form**

Sign

Here

A person who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
  - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

**JUNE 19, 2008** 

- · An individual who is a U.S. citizen or U.S. resident alien,
- · A partnership, corporation, company, or association created or organized in the United States or under the laws of the United
- An estate (other than a foreign estate), or

Date >

· A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases: 3:

. The U.S. owner of a disregarded entity and not the entity,