OFFICE OF THE CITY ATTORNEY CHARLES PARKIN, City Attorney 411 West Ocean Boulevard, 9th Floor Long Beach, CA 90802-4664

FIRST AMENDMENT TO AGREEMENT NO. 35889

THIS FIRST AMENDMENT TO AGREEMENT NO. 35889 is made and entered, in duplicate, as of July 12, 2021, for reference purposes only, pursuant to a minute order adopted by the City Council of the City of Long Beach at its meeting on June 23, 2020, by and between JACOBS PROJECT MANAGEMENT CO., a Delaware corporation ("Consultant"), with a place of business at 2600 Michelson Drive, Suite 500, Irvine, California 92612, and the CITY OF LONG BEACH, a municipal corporation ("City").

WHEREAS, City and Consultant (the "Parties") entered into Agreement No. 35889 (the "Agreement") whereby Consultant agreed to provide as-needed engineering construction management services for various development projects at the Long Beach Airport; and

WHEREAS, the Parties desire to add \$200,000 to the Agreement and include an updated rate sheet for subconsultant Lenax;

NOW, THEREFORE, in consideration of the mutual terms, covenants, and conditions contained herein, the Parties agree as follows:

- 1. Section 1.A. of the Agreement is hereby amended to read as follows:
- "A. Consultant shall furnish specialized services more particularly described in Exhibit "A-2", attached to this Agreement and incorporated by this reference, in accordance with the standards of the profession, and City shall pay for these services in the manner described below, in an amount not to exceed Two Million Two Hundred Thousand Dollars (\$2,200,000), at the rates or charges shown in Exhibit "B"."
- The Rates/Charges attached as Exhibit "B" to the Agreement is hereby amended to include updated rates for subconsultant Lenax more particularly described in Exhibit "B-1", attached hereto and incorporated by this reference.
- 3. Except as expressly amended herein, all terms and conditions in Agreement No. 35889 are ratified and confirmed and shall remain in full force and effect.

IN WITNESS WHEREOF, the Parties have caused this document to be duly 1 2 executed with all formalities required by law as of the date first stated above. 3 JACOBS PROJECT MANAGEMENT CO., a Delaware corporation 4 Bv 5 Name 6 Title MIL Prisidu 7 2021 By Name 8 Title 9 "Consultant" 10 CITY OF LONG BEACH, a municipal 11 corporation 12 , 2021 By__ 13 City Manager 14 "City" 15 This First Amendment to Agreement No. 35889 is approved as to form on 16 , 2021. 17 CHARLES PARKIN, City Attorney 18 By 19 Deputy 20 21 22 23 24 25 26 See Attached CA Certificate Acknowledgment 27 Jurat 28

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	1	IN WITNESS WHEREOF, the Parties have caused this document to be duly
	2	executed with all formalities required by law as of the date first stated above.
	3	JACOBS PROJECT MANAGEMENT CO.,
	4	a Delaware corporation
	5	July 19, 2021 By (SAA () Name Usa Alliatr
	6	Title VICE Prisident
	7	JULY 20, 2021 By Musell Alaho
	8	Name RONGLD C SVELVE Title PUNCUPAL IN CHANGE
	9	"Consultant"
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¥ ۔ و	11	CITY OF LONG BEACH, a municipal corporation
/ ATTORNE City Attorney vard, 9th Flo 0802-4664	12	August 10 , 2021 By Sinda F. Jahren
THE CITY ATTORNEY PARKIN, City Attomey sen Boulevard, 9th Floc ich, CA 90802-4864	13	EXECUTIVE TO SECTION 301 OF "City" TO SECTION 301 OF THE CITY CHARTER THE CITY CHARTER THE CITY CHARTER THE CITY CHARTER
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OFFICE OF CHARLES 11 West Oc Long Bes	16	<u>8.6</u> , 2021.
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Our goal is simple... to help you reach yours.

Jacobs City of Long Beach

Construction Management Contract at Long Beach Airport Cost Estimating, Scheduling, and Document Control Services

Date:

FIRM NAME:

Services Provided:

May 5, 2021

Lenax Construction Services, Inc.

Cost Estimating, Scheduling, and Document

Control Services

Office Overhead Rate Field Overhead Rate

Home OH		116.15%
Field OH		112.35%
Profit		10.00%
Escalation	Year 2022	3.00%

Labor Classification	Direct Labor Rate	Office Profit	Field Profit	2021 Home Office Rate	2021 Field Office Rate	2022 Home Office Rate	2022 Field Office Rate
Lead Estimator	\$104.00	\$22.48	\$22.08	\$247.28	\$242.93	\$254.69	\$250.22
Sr. Estimator	\$79.50	\$17.18	\$16.88	\$189.02	\$185.70	\$194.69	\$191.27
Sr. Estimator (MEP)	\$86.50	\$18.70	\$18.37	\$205.67	\$202.05	\$211.84	\$208.11
Estimator	\$60.00	\$12.97	\$12.74	\$142.66	\$140.15	\$146.94	\$144.36
Sr. Scheduler	\$81.50	\$17.62	\$17.31	\$193.78	\$190.37	\$199.59	\$196.08
Scheduler	\$64.00	\$13.83	\$13.59	\$ 152.17	\$149.49	\$156.73	\$153.98
Doc Control Manager	\$49.50	\$10.70	\$10.51	\$117.69	\$115.62	\$121.22	\$119.09
Sr. Doc Control	\$42.00	\$9.08	\$8.92	\$99.86	\$98.11	\$102.86	\$101.05
Doc Control Technician	\$34.00	\$7.35	\$7.22	\$80.84	\$79.42	\$83.27	\$81.80
Sr. Office Engineer	\$68.00	\$14.70	\$14.44	\$161.68	\$158.84	\$166.53	\$163.60
Office Engineer	\$55.00	\$11.89	\$11.68	\$130.77	\$128.47	\$134.69	\$132.33

The above rates include Overhead and profit. Other direct costs will be billed at the invoice amount. Mileage will be billed at approved Government rate.

The above rates are in effect through December 31, 2022.

Very truly yours,

Yelena Zeetser President

Meler Zeeter

CALIFORNIA ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

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 SHASTA	}
On <u>NUY19, 2021</u> before me, 2	D. PURIS - NOTARY PURUC, (Here insert name and title of the officer)
personally appeared USA AU	·
who proved to me on the basis of satisfiname(s) is/are subscribed to the within he/she/they executed the same in his/he	actory evidence to be the person(s) whose instrument and acknowledged to me that er/their authorized capacity(ies), and that by ent the person(s), or the entity upon behalf of
I certify under PENALTY OF PERJURY the foregoing paragraph is true and cor	
WITNESS my hand and official seal.	D. BURNS Notary Public - California Shasta County Commission # 2296483 My Comm. Expires Aug 5, 2023
DRUM	
Notary Public Signature (No	otary Public Seal)
ADDITIONAL OPTIONAL INFORMATI	INSTRUCTIONS FOR COMPLETING THIS FORM
DESCRIPTION OF THE ATTACHED DOCUMENT	This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long
FORTHURITEDIF	as the wording does not require the California notary to violate California notary law.
(Title or description of attached document)	 State and County information must be the State and County where the documen signer(s) personally appeared before the notary public for acknowledgment.
(Title or description of attached document continued)	 Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
Number of Pages Document Date	 The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public). Print the name(s) of document signer(s) who personally appear at the time or
CAPACITY CLAIMED BY THE SIGNER	notarization. • Indicate the correct singular or plural forms by crossing off incorrect forms (i.e.
☐ Individual (s)	he/she/they, is /are) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
☐ Corporate Officer	The notary seal impression must be clear and photographically reproducible Impression must not cover text or lines. If seal impression smudges, re-seal if a
(Title)	sufficient area permits, otherwise complete a different acknowledgment form.
☐ Partner(s)	 Signature of the notary public must match the signature on file with the office of the county clerk.
☐ Attorney-in-Fact	Additional information is not required but could help to ensure this
☐ Trustee(s)	acknowledgment is not misused or attached to a different document.
Other	 Indicate title or type of attached document, number of pages and date. Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).

2015 Version www.NotaryClasses.com 800-873-9865

• Securely attach this document to the signed document with a staple.

CALIFORNIA CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity the individual who signed the document to which this certificate is attached, and the truthfulness, accuracy, or validity of that document.	Cofinat
State of California)	
County of Orange	
on July 20th, 2021 before me, Tush personally appeared Ronald Charles Sie	ar J. Patel ,
personally appeared Ronald Charles Sie	ecke
	,
who proved to me on the basis of satisfactory evidence to be the pe the within instrument and acknowledged to me that he/she/t authorized capacity(ies), and that by his/her/their signature(s) on t upon behalf of which the person(s) acted, executed the instrument.	hey executed the same in his/her/their
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.	TUSHAR J. PATEL Commission # 2363820 Notary Public - California Orange County My Comm. Exp. JULY 2, 2025
Signature Signat	(Seal) เพษากระยบสอบสายเพลงสายเพลงสายเพลงสายสายสายสายสายสายสายสายสายสายสายสายสายส

Optional Information

Although the information in this section is not required by law, it could prevent fraudulent removal and reattachment of this acknowledgment to an unauthorized document and may prove useful to persons relying on the attached document.

The preceding ee	ertificate of Acknowledgment is attached to a document
titled/for the purp	pose of Ammendment to a
agreemen	
containing 3	pages, and dated <u>July 12 2021.</u>
The signer(s) capa	acity or authority is/are as:
Individual(s)	,
Attorney-in-Fact	
☐ Corporate Office	Title(s)
☐ Guardian/Conser☐ Partner - Limited	
	y deficial
Trustee(s)	

roved t		tification sis of satisfactory evidence ation () credible witness(es
Notaria	l event is detail Page #_ 5	led in notary journal on: Entry #
	contact: 714	t-925-12h
ther] Addi	cional Signer(s)	Signer(s) Thumbprint(s
<u> </u>		