

| Board Office Use: Legislative File Info. |               |
|--|---------------|
| File ID Number                           | 21-2747       |
| Introduction Date                        | 12/15/2021    |
| Enactment Number                         | 21-2055       |
| Enactment Date                           | 12/15/2021 er |



**OAKLAND UNIFIED  
SCHOOL DISTRICT**

Community Schools, Thriving Students

# Memo

**To** Board of Education

**From** Kyla Johnson-Trammell, Superintendent  
Tadashi Nakadegawa, Deputy Chief, Facilities Planning and Management

**Board Meeting Date** December 15, 2021

**Subject** Amendment No. 5 Independent Consultant Services Agreement – Integral Group, Inc. – Fremont High School New Construction Project - Division of Facilities Planning and Management

**Action Requested** Approval by the Board of Education of Amendment No. 5 of the Independent Consultant Services Agreement by and between the District and Integral Group, Inc., Oakland, CA, for the Fremont High School New Construction Project, extending time only of Agreement by **365 additional calendar days**, authorizing the President and Secretary of the Board to sign the Amendment for same with said Consultant with the time extension to commence on **December 31, 2021**, and last until **December 31, 2022**, pursuant to the Amendment.

**Discussion** This Amendment is for three hundred sixty-five (365) calendar days' time extension. No change to scope of work or price.

**LBP** (Local business participation percentage) 100.00%

**Recommendation** Approval by the Board of Education of Amendment No. 5 of the Independent Consultant Services Agreement by and between the District and Integral Group, Inc., Oakland, CA, for the Fremont High School New Construction Project, extending time only of Agreement by **365 additional calendar days**, authorizing the President and Secretary of the Board to sign the Amendment for same with said Consultant with the time extension to commence on **December 31, 2021**, and last until **December 31, 2022**, pursuant to the Amendment.

**Fiscal Impact** Fund 21, Measure J

**Attachments**

- Amendment No. 5
- Insurance Certificate

## AMENDMENT NO. 5 TO AN INDEPENDENT CONSULTANT AGREEMENT

This Amendment is entered into between the Oakland Unified School District (OUSD) and **The Integral Group, Inc.** OUSD entered into an agreement with CONTRACTOR for services on **August 25, 2016** ("Agreement"), and the parties agree to amend the Agreement for the Services with **Fremont High School New Construction Project** as follows and in the attached Exhibit A:

|   |                          |  |   |
|---|--------------------------|--|---|
| <b>1.</b>   | <b>Services:</b>         | <input checked="" type="checkbox"/> The scope of work is <u>unchanged</u> .  | <input type="checkbox"/> <b>The scope of work has <u>changed</u>.</b>             |
| <p><b>If scope of work changed:</b> Provide brief description of revised scope of work including description of expected final results, such as services, materials, products, and/or reports; attach additional pages as necessary.</p> <p>The CONTRACTOR agrees to provide the following amended services: No change to scope of work. Time extension only.</p>         |                          |  |   |
| <b>2.</b>   | <b>Terms</b> (duration): | <input type="checkbox"/> The term of the contract is <u>unchanged</u> .      | <input checked="" type="checkbox"/> The term of the contract has <u>changed</u> . |
| <p><b>If term is changed:</b> The contract term is extended by an additional <u>Three hundred sixty-five days (365)</u>, and the amended expiration date is <b><u>December 31, 2022</u></b>. <b>The current end date is December 31, 2021.</b></p>  |                          |  |   |
| <b>3.</b>   | <b>Compensation:</b>     | <input checked="" type="checkbox"/> The contract price is <u>unchanged</u> . | <input type="checkbox"/> The contract price has <u>changed</u> .                  |
| <p><b>If the compensation is changed:</b> The not to exceed contract price is</p> <p><input type="checkbox"/> Increased by: _____.</p> <p><input type="checkbox"/> Decreased by _____ dollars and no/100 (\$_____).</p> <p>Prior to this amendment, the not to exceed contract price was _____ after this amendment, the not to exceed contract price will be: _____.</p> |                          |  |   |

**4. Remaining Provisions:** All other provisions of the Agreement, and prior Amendment(s) if any, shall remain unchanged and in full force and effect as originally stated.

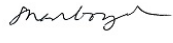
**5. Amendment History:**

**There are no previous amendments to this Agreement.**  This contract has previously been amended as follows:

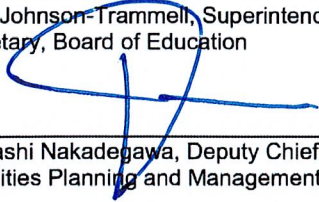
| No. | Date       | General Description of Reason for Amendment | Amount of Increase (Decrease) |
|-----|------------|---|-------------------------------|
| 01  | 4-10-2019  | Compensation                                | \$49,225.00                   |
| 02  | 10-28-2020 | Compensation                                | \$4,400.00                    |
| 03  | 03-10-2021 | Term  |                               |
| 04  | 06-23-2021 | Compensation                                | \$21,481.25                   |

**6. Approval:** This Amendment is not effective, and no payment shall be made to Contractor based on this Amendment, until it is signed by Contractor and approved by the Board of Education.

**OAKLAND UNIFIED SCHOOL DISTRICT**

 12/16/2021  
Shanthi Gonzales, President, Board of Education Date


 12/16/2021  
Kyla Johnson-Trammell, Superintendent Secretary, Board of Education Date

 11/9/21  
Tadashi Nakadegawa, Deputy Chief, Facilities Planning and Management Date

**Approval as to form:**

 11/16/21  
Arne Sandberg [name] Date  
General Counsel, Facilities, Planning and Management

**CONTRACTOR**

 11/9/21  
Contractor Signature Date  
Andrea L. Traber, Managing Principal  
Print Name, Title

**EXHIBIT "A"**  
**Scope of Work for Amendment**

**Contractor Name: The Integral Group, Inc.**

- 1. Detailed Description of Services to be provided: No change to scope of work. Time extension only.
- 2. Specific Outcomes:
- 3. Alignment with District Strategic Plan: Indicate the goals and visions supported by the services of this contract:

|   |  |
|---|--|
| <input type="checkbox"/> Ensure a high quality instructional core               | <input type="checkbox"/> Prepare students for success in college and careers |
| <input type="checkbox"/> Develop social, emotional and physical health          | <input checked="" type="checkbox"/> Safe, healthy and supportive schools     |
| <input checked="" type="checkbox"/> Create equitable opportunities for learning | <input checked="" type="checkbox"/> Accountable for quality                  |
| <input type="checkbox"/> High quality and effective instruction                 | <input type="checkbox"/> Full service community district                     |





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/1/2022

11/1/2021

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|   |  |                       |               |
|---|--|-----------------------|---------------|
| <b>PRODUCER</b> Lockton Companies<br>444 W. 47th Street, Suite 900<br>Kansas City MO 64112-1906<br>(816) 960-9000 | <b>CONTACT NAME:</b><br><b>PHONE (A/C. No. Ext):</b><br><b>E-MAIL ADDRESS:</b> | <b>FAX (A/C. No):</b> |               |
|   | <b>INSURER(S) AFFORDING COVERAGE</b>   |                       | <b>NAIC #</b> |
| <b>INSURED</b> INTEGRAL GROUP, INC.<br>1353599 427 13TH STREET<br>OAKLAND CA 94612                                | <b>INSURER A:</b> Zurich American Insurance Company                            |                       | 16535         |
|   | <b>INSURER B:</b> Aspen Specialty Insurance Company                            |                       | 10717         |
|   | <b>INSURER C:</b>  |                       |               |
|   | <b>INSURER D:</b>  |                       |               |
|   | <b>INSURER E:</b>  |                       |               |
| <b>INSURER F:</b>   |  |                       |               |

**COVERAGES**

CERTIFICATE NUMBER: 14176506

REVISION NUMBER: XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | ADDL INSD | SUBR WVD | POLICY NUMBER  | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|--|-----------|----------|----------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: | Y         | N        | GLO 3021088    | 11/1/2021               | 11/1/2022               | EACH OCCURRENCE \$ 2,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 25,000<br>PERSONAL & ADV INJURY \$ 2,000,000<br>GENERAL AGGREGATE \$ 4,000,000<br>PRODUCTS - COMP/OP AGG \$ 4,000,000<br>\$ |
| A        | <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY                   | Y         | N        | BAP 3021090.   | 11/1/2021               | 11/1/2022               | COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000<br>BODILY INJURY (Per person) \$ XXXXXXXX<br>BODILY INJURY (Per accident) \$ XXXXXXXX<br>PROPERTY DAMAGE (Per accident) \$ XXXXXXXX<br>\$ XXXXXXXX   |
|          | <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br>DED <input type="checkbox"/> RETENTION \$  |           |          | NOT APPLICABLE |                         |                         | EACH OCCURRENCE \$ XXXXXXXX<br>AGGREGATE \$ XXXXXXXX<br>\$ XXXXXXXX   |
| A        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N       | N/A      | WC 3034295     | 11/1/2021               | 11/1/2022               | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000   |
| B        | <b>PROFESSIONAL LIABILITY</b>  | N         | N        | LR00JUH21      | 11/1/2021               | 11/1/2022               | \$1,000,000 PER CLAIM<br>\$1,000,000 AGGREGATE  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: THE DISTRICT AND THE STATE AND THEIR REPRESENTATIVES, EMPLOYEES, TRUSTEES, OFFICERS, AND VOLUNTEERS ARE ADDITIONAL INSUREDS AS RESPECTS GENERAL LIABILITY AND AUTO LIABILITY, AND THESE COVERAGES ARE PRIMARY, AS REQUIRED BY WRITTEN CONTRACT.

**CERTIFICATE HOLDER**

14176506  
 OAKLAND UNIFIED SCHOOL DISTRICT

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

© 1988-2015 ACORD CORPORATION. All rights reserved.



## DIVISION OF FACILITIES PLANNING AND MANAGEMENT ROUTING FORM

| Project Information   |   |             |     |
|---|---|-------------|-----|
| <b>Project Name</b>   | Fremont High School New Construction Project  | <b>Site</b> | 302 |
| Basic Directions  |   |             |     |
| <b>Services cannot be provided until the contract is awarded by the Board or is entered by the Superintendent pursuant to authority delegated by the Board.</b> |   |             |     |
| <b>Attachment Checklist</b>   | <input checked="" type="checkbox"/> Proof of general liability insurance, including certificates and endorsements, if contract is over \$15,000<br><input checked="" type="checkbox"/> Workers compensation insurance certification, unless vendor is a sole provider |             |     |

| Contractor Information |   |                  |   |       |              |
|------------------------|---|------------------|---|-------|--------------|
| Contractor Name        | The Integral Group, Inc.  | Agency's Contact | Andrea Traber   |       |              |
| OUSD Vendor ID #       | 002203  | Title            | Manager   |       |              |
| Street Address         | 427 13th Street   | City             | Oakland   | State | CA Zip 94612 |
| Telephone              | 510-663-2070  | Policy Expires   |   |       |              |
| Contractor History     | Previously been an OUSD contractor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                  | Worked as an OUSD employee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |       |              |
| OUSD Project #         | 13158   |                  |   |       |              |

| Term of Original/Amended Contract                       |           |  |            |
|---|-----------|--|------------|
| Date Work Will Begin (i.e., effective date of contract) | 8-25-2016 | Date Work Will End By (not more than 5 years from start date; for construction contracts, enter planned completion date) |            |
|   |           | New Date of Contract End (If Any)  | 12-31-2022 |

| Compensation/Revised Compensation                |    |   |      |
|--|----|---|------|
| If New Contract, Total Contract Price (Lump Sum) | \$ | If New Contract, Total Contract Price (Not To Exceed) | \$   |
| Pay Rate Per Hour (if Hourly)                    | \$ | If Amendment, Change in Price                         | \$ 0 |
| Other Expenses                                   |    | Requisition Number                                    |      |

| Budget Information   |                    |  |             |        |
|--|--------------------|--|-------------|--------|
| If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition. |                    |  |             |        |
| Resource #   | Funding Source     | Org Key  | Object Code | Amount |
| 9650/9594  | Fund 21, Measure J | 210-9650-0-9594-8500-6215-302-9180-9905-9999-99999 | 6215        | \$0    |

| Approval and Routing (in order of approval steps)   |  |                  |               |              |
|---|--|------------------|---------------|--------------|
| Services cannot be provided before the contract is fully approved and a Purchase Order is issued. Signing this document affirms that to your knowledge services were not provided before a PO was issued. |  |                  |               |              |
| <b>1.</b>   | <b>Division Head</b>   | <b>Phone</b>     | 510-535-7038  | <b>Fax</b>   |
|   | <b>Executive Director, Facilities Planning and Management</b>            | <b>Signature</b> | Date Approved | 510-535-7082 |
|   | <i>K Chatman</i>   |                  |               | 11/17/21     |
| <b>2.</b>   | <b>General Counsel, Department of Facilities Planning and Management</b> | <b>Signature</b> | Date Approved |              |
|   | <b>Deputy Chief, Facilities Planning and Management</b>                  | <b>Signature</b> | Date Approved |              |
|   | <i>Lezano Smith, as to form only</i>                                     |                  |               | 11/16/21     |
| <b>3.</b>   | <b>Chief Financial Officer</b>   | <b>Signature</b> | Date Approved |              |
|   | <b>President, Board of Education</b>                                     | <b>Signature</b> | Date Approved |              |
|   | <i>[Signature]</i>   |                  |               | 11/17/21     |
| <b>4.</b>   | <b>Signature</b>   | <b>Signature</b> | Date Approved |              |
|   | <b>Signature</b>   | <b>Signature</b> | Date Approved |              |
|   | <i>[Signature]</i>   |                  |               | 11/17/21     |
| <b>5.</b>   | <b>Signature</b>   | <b>Signature</b> | Date Approved |              |
|   | <b>Signature</b>   | <b>Signature</b> | Date Approved |              |





| Board Office Use: Legislative File Info. |              |
|--|--------------|
| File ID Number                           | 21-1456      |
| Introduction Date                        | 6-23-2021    |
| Enactment Number                         | 21-1163      |
| Enactment Date                           | 6/23/2021 er |



**OAKLAND UNIFIED  
SCHOOL DISTRICT**

*Community Schools, Thriving Students*

## Memo

**To** Board of Education

**From** Kyla Johnson-Trammell, Superintendent  
Tadashi Nakadegawa, Deputy Chief, Facilities Planning and Management

**Board Meeting Date** June 23, 2021

**Subject** Amendment No. 4, Independent Consultant Agreement – Integral Group, Inc. – Fremont High School New Construction Project – Division of Facilities Planning & Management

**Action Requested** Approval by the Board of Education of Amendment No. 4 to the Independent Consultant Agreement between the District and Integral Group, Inc., Oakland CA, for the latter to provide an additional round of TAB testing & support documents, resubmittals and reviews, due to the inadequacy of TAB #2 resubmittals that were submitted by the General Contractor, for the Fremont High School New Construction Project, in an additional amount of \$21,481.25, increasing Agreement not to exceed amount from \$318,325.00 to \$339,806.25, and authorizing the President and Secretary of the Board to sign the Amendment for same with said consultant, pursuant to the Agreement.

**Discussion** This Amendment is for additional TAB & testing support documentation services.

**LBP** (Local business participation percentage) 100.00%

**Recommendation** Approval by the Board of Education of Amendment No. to the Independent Consultant Agreement between the District and Integral Group, Inc., Oakland CA, for the latter to provide an additional round of TAB testing & support documents, resubmittals and reviews, due to the inadequacy of TAB #2 resubmittals that were submitted by the General Contractor, for the Fremont High School New Construction Project, in an additional amount of \$21,481.25, increasing Agreement not to exceed amount from \$318,325.00 to \$339,806.25, and authorizing the President and Secretary of the Board to sign the Amendment for same with said consultant, pursuant to the Agreement.

**Fiscal Impact** Fund 21, Measure J

**Attachments**

- Amendment No. 4
- Scope of Work
- Insurance Certificate

## AMENDMENT NO. 4 TO AN INDEPENDENT CONSULTANT AGREEMENT

This Amendment is entered into between the Oakland Unified School District (OUSD) and The Integral Group, Inc. OUSD entered into an agreement with CONTRACTOR for services on **August 25, 2016** ("Agreement"), and the parties agree to amend the Agreement for the Services with **Fremont High School New Construction Project** as follows and in the attached Exhibit A:

|   |                          |  |  |
|---|--------------------------|--|--|
| <b>1.</b>   | <b>Services:</b>         | <input type="checkbox"/> The scope of work is <u>unchanged</u> .                   | <input checked="" type="checkbox"/> <b>The scope of work has <u>changed</u>.</b> |
| <p><b>If scope of work changed:</b> Provide brief description of revised scope of work including description of expected final results, such as services, materials, products, and/or reports; attach additional pages as necessary.</p> <p>The CONTRACTOR agrees to provide the following amended services: An additional round of TAB &amp; testing support documentation, resubmittals and reviews needed to be addressed for accuracy, due to the inadequacy of TAB #2 resubmittals by the General Contractor, as described in the proposal dated April 22, 2021, attached to this amendment as part of Exhibit A."</p>   |                          |  |  |
| <b>2.</b>   | <b>Terms (duration):</b> | <input checked="" type="checkbox"/> The term of the contract is <u>unchanged</u> . | <input type="checkbox"/> The term of the contract has <u>changed</u> .           |
| <p><b>If term is changed:</b> The contract term is extended by an additional _____, and the amended expiration date is _____.</p>   |                          |  |  |
| <b>3.</b>   | <b>Compensation:</b>     | <input type="checkbox"/> The contract price is <u>unchanged</u> .                  | <input checked="" type="checkbox"/> The contract price has <u>changed</u> .      |
| <p><b>If the compensation is changed:</b> The not to exceed contract price is</p> <p style="padding-left: 40px;"><input checked="" type="checkbox"/> Increased by: <u>Twenty-One Thousand Four Hundred Eighty-One Dollars and Twenty-five cents(\$21,481.25).</u></p> <p style="padding-left: 40px;"><input type="checkbox"/> Decreased by _____ dollars and no/100 (\$ _____).</p> <p>Prior to this amendment, the not to exceed contract price was <b><u>Three hundred Eighteen Thousand, Three Hundred Twenty-five Dollars No/100 (\$318,325.00)</u></b>, and after this amendment, the not to exceed contract price will be: <b><u>Three Hundred Thirty-nine Thousand, Eight Hundred Six Dollars and Twenty-five cents No/100 (\$339,806.25).</u></b></p> |                          |  |  |

**4. Remaining Provisions:** All other provisions of the Agreement, and prior Amendment(s) if any, shall remain unchanged and in full force and effect as originally stated.

**5. Amendment History:**

There are no previous amendments to this Agreement.  This contract has previously been amended as follows:

| No. | Date       | General Description of Reason for Amendment | Amount of Increase (Decrease) |
|-----|------------|---|-------------------------------|
| 01  | 4-10-2019  | Compensation                                | \$49,225.00                   |
| 02  | 10-28-2020 | Compensation                                | \$4,400.00                    |
| 03  | 03-10-2021 | Term  |                               |


**6. Approval:** This Amendment is not effective, and no payment shall be made to Contractor based on this Amendment, until it is signed by Contractor and approved by the Board of Education.



**OAKLAND UNIFIED SCHOOL DISTRICT**

**CONTRACTOR**

  
\_\_\_\_\_  
Shanthi Gonzales, President,  
Board of Education  
6/24/2021  
Date

  
\_\_\_\_\_  
Contractor Signature  
Andrea L. Traber, Managing Principal 05/24/2021  
Date  
\_\_\_\_\_  
Print Name, Title

  
\_\_\_\_\_  
Kyla Johnson-Trammell, Superintendent  
Secretary, Board of Education  
6/24/2021  
Date

  
\_\_\_\_\_  
Tadashi Nakadegawa, Deputy Chief,  
Facilities Planning and Management  
5/27/21  
Date

**Approval as to form:**  
  
\_\_\_\_\_  
Arne Sandberg [name]  
5/26/21  
Date  
General Counsel, Facilities, Planning and Management

**EXHIBIT "A"**  
**Scope of Work for Amendment**

**Contractor Name: The Integral Group, Inc.**

1. Detailed Description of Services to be provided: An additional round of TAB & testing support documentation, resubmittals and reviews needed to be addressed for accuracy, due to the inadequacy of TAB #2 resubmittals by the General Contractor, as described in the proposal dated April 22, 2021, attached to this amendment as part of Exhibit A."
2. Specific Outcomes:
3. Alignment with District Strategic Plan: Indicate the goals and visions supported by the services of this contract:

|   |  |
|---|--|
| <input type="checkbox"/> Ensure a high quality instructional core               | <input type="checkbox"/> Prepare students for success in college and careers |
| <input type="checkbox"/> Develop social, emotional and physical health          | <input checked="" type="checkbox"/> Safe, healthy and supportive schools     |
| <input checked="" type="checkbox"/> Create equitable opportunities for learning | <input checked="" type="checkbox"/> Accountable for quality                  |
| <input type="checkbox"/> High quality and effective instruction                 | <input type="checkbox"/> Full service community district                     |



# Proposal for Additional Services

**EXHIBIT A**

**Fremont High School Cx**

April 22, 2021

ASR # 01

INTEGRAL OPP: 202104-001989

INTEGRAL PROJECT: 321010.000

|   |   |
|---|---|
| Paul Orr, Project Manager<br>OUSD<br>Division of Facilities, Planning and Management<br>955 High Street<br>Oakland, CA 94601<br>Paul.orr@ousd.org | Andrea Traber, Managing Principal<br>Integral Group<br>510-693-2468<br><a href="mailto:atraber@integralgroup.com">atraber@integralgroup.com</a> |
|---|---|

## 1 Scope of Services | ASR 01

Our proposal and scope of work is based on the discussion with Paul Orr and Robert Palmer relevant to lack of progress made by the General Contractor (GC) in fulfilling commissioning requirements for the project. This Additional Services Request (ASR) represents the additional effort required by Integral Group to that is above and beyond the contracted scope of work.

The list below represents the activities and time spent by Robert Palmer to communicate with the GC regarding requirements for providing documentation, TAB and testing support. Our scope includes one documentation and TAB review, with a second review to back check the GC's resubmittal to ensure comments were addressed. In this case, the TAB #2 GC resubmittal did not adequately address comments and is effectively "lost time." Due to the inadequacy of TAB #2, submitted documentation and failed testing, an additional round of submittals and reviews is required. This ASR includes the hours for lost time for TAB #2 and Documentation Review, as well as the hours required to review required for TAB #3 Review as described below.

### TAB #1 and Documentation Review (included in Base Services Scope)

- 2020/11/11 – Started requesting documentation, reviewed current status - 1hr
- 2020/12/02 - Documentation Review and Meeting - 2.5hrs
- 2020/12/11 – Advised that documentation had been updated – review status 2.5hrs
- 2021/01/05 - Progress Review and Documentation Meeting - 1.5hrs
- 2021/01/19 – TAB Review #1 complete

### TAB #2 and Documentation Review, 63.75 hours

- 2021/02/01 - Advised that documentation had been updated, review status 2.5hrs
- 2021/02/12 - Cx Issues Log Update - 1hr
- 2021/02/16 - Cx Issues Log Review Meeting - 1hr
- 2021/02/17 - Documentation Progress Review and Cx Issues Log Meeting - 3.5hrs
- 2021/02/18 - TAB Review, Documentation Status Review and CX Issues Log Update - 6.25hrs
- 2021/03/03 - Cx Issues Log Review 1hr
- 2021/03/05 - TAB Review and Cx Issues Log Update - 5hrs
- 2021/03/11 - Advised that documentation had been updated, review status - 1.5hrs



- 2021/03/17 - Preparation for the TAB Review Meeting - 1hr
- 2021/03/18 - Cx Issues Log and TAB Review Meeting 3.5 hrs
- 2021/03/29 - Provide Documentation for EOR 0.5hrs
- 2021/04/02 - Advised that documentation had been updated, review status - 1.5hrs
- 2021/04/03 - Cx Issues Log Update - 2hrs
- 2021/04/08 - Failed DHW testing Increment #3 - 1hr
- 2021/04/13 - TAB Review #2 - 4hrs
- 2021/04/14 - TAB Review Meeting, HHW and DHW Heating equipment operational issues and review with the Mechanical Contractor - 3hrs
- 2021/04/17 - Cx Issues Log Update and TAB Review - 5hrs
- 2021/04/19 - Re-scheduling Meetings, Failed Testing and Project Lost Time Review - 8.25hrs
- 2021/04/21 - Re-direction of contractors to facilitate a Site TAB Review, Failed Testing, Site Meeting with Client, CX Issues Log Update 12.25hrs

TAB #3 Review, Documentation, Additional Testing, 59 hrs

- TAB Review #3 - 6hrs
- Irrigation Re-testing - 2hrs
- Cx Issues Log updates - 12hrs
- Documentation Review - 6hrs
- Commissioning Meetings - (4 x meetings) 8hrs
- Failed testing and re-testing - 20hrs
- 10% contingency on above



**2 Fees**

Our fee to provide the above-described consulting engineering services will be charged on a not to exceed basis consistent with base contract. All work will be provided by Robert Palmer at the hourly rate of \$175.00, the current rate (2016) as approved in the base contract with OUSD.

| Scope                                     | Hours | Extension   |
|---|-------|-------------|
| TAB #2 and Documentation Review           | 63.75 | \$11,156.25 |
| TAB #3, Documentation, Additional Testing | 53    | \$10,325.00 |
| Total                                     |       | \$21,481.25 |

**HOULRY RATE SCHEDULE**

|                                       |           |                                   |           |
|---------------------------------------|-----------|-----------------------------------|-----------|
| Managing Principal                    | \$ 340.00 | Engineer/Designer - L2            | \$ 145.00 |
| Principal                             | \$ 300.00 | Sustainability Consultant - L3    |           |
| Associate Principal                   | \$ 200.00 | Building Performance Analyst - L2 |           |
| Senior Sustainability Consultant - L5 | \$ 195.00 | Senior BIM Designer - L2          | \$ 135.00 |
| Associate                             | \$ 185.00 | Commissioning Agent - L2          |           |
| Engineer/Designer - L4                |           | BIM Designer - L2                 |           |
| Project Manager                       |           | Engineer/Designer - L1            |           |
| Sr. Building Performance Analyst - L4 | \$ 170.00 | Sustainability Coordinator - L2   | \$ 130.00 |
| Engineer/Designer - L3                |           | Building Performance Analyst - L1 |           |
| Building Performance Analyst - L3     |           | BIM Designer - L1                 |           |
| BIM Lead - L3                         | \$ 160.00 | Commissioning Agent - L1          | \$ 125.00 |
| Senior Commisssioning Agent - L3      |           | Sustainability Coordinator - L1   |           |
| Sustainability Consultant - L4        |           | Project Administrator             | \$ 95.00  |

**EXCLUDED SERVICES**

The following services are not included in the fee amount indicated above and will be charged on an hourly basis at our pre-set hourly charges or on a not to exceed basis:

- Any services not listed in Scope of Services description above.
- Work on buildings and site other than those described under "Project Understanding" above
- Review of Change Order Requests resulting from Owner changes







## DIVISION OF FACILITIES PLANNING & MANAGEMENT ROUTING FORM

### Project Information

|                     |  |             |     |
|---------------------|--|-------------|-----|
| <b>Project Name</b> | Fremont High School New Construction Project | <b>Site</b> | 302 |
|---------------------|--|-------------|-----|

### Basic Directions

**Services cannot be provided until the contract is awarded by the Board or is entered by the Superintendent pursuant to authority delegated by the Board.**

|                             |   |
|-----------------------------|---|
| <b>Attachment Checklist</b> | <input checked="" type="checkbox"/> Proof of general liability insurance, including certificates and endorsements, if contract is over \$15,000<br><input checked="" type="checkbox"/> Workers compensation insurance certification, unless vendor is a sole provider |
|-----------------------------|---|

### Contractor Information

|                    |   |                  |   |       |    |     |       |
|--------------------|---|------------------|---|-------|----|-----|-------|
| Contractor Name    | The Integral Group, Inc.  | Agency's Contact | Andrea Traber   |       |    |     |       |
| OUSD Vendor ID #   | 002203  | Title            | Manager   |       |    |     |       |
| Street Address     | 427 13th Street   | City             | Oakland   | State | CA | Zip | 94612 |
| Telephone          | 510-663-2070  | Policy Expires   |   |       |    |     |       |
| Contractor History | Previously been an OUSD contractor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                  | Worked as an OUSD employee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |       |    |     |       |
| OUSD Project #     | 13158   |                  |   |       |    |     |       |

### Term of Original/Amended Contract

|   |           |  |            |
|---|-----------|--|------------|
| Date Work Will Begin (i.e., effective date of contract) | 8-25-2016 | Date Work Will End By (not more than 5 years from start date; for construction contracts, enter planned completion date) | 12-31-2021 |
|   |           | New Date of Contract End (If Any)  |            |

### Compensation/Revised Compensation

|  |    |   |              |
|--|----|---|--------------|
| If New Contract, Total Contract Price (Lump Sum) | \$ | If New Contract, Total Contract Price (Not To Exceed) | \$           |
| Pay Rate Per Hour (if Hourly)                    | \$ | If Amendment, Change in Price                         | \$ 21,481.25 |
| Other Expenses                                   |    | Requisition Number                                    |              |

### Budget Information

*If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition.*

| Resource # | Funding Source     | Org Key  | Object Code | Amount      |
|------------|--------------------|--|-------------|-------------|
| 9650/9594  | Fund 21, Measure J | 210-9650-0-9594-8500-6215-302-9180-9905-9999-99999 | 6215        | \$21,481.25 |

### Approval and Routing (in order of approval steps)

Services cannot be provided before the contract is fully approved and a Purchase Order is issued. Signing this document affirms that to your knowledge services were not provided before a PO was issued.

|    |  |                      |              |            |              |
|----|--|----------------------|--------------|------------|--------------|
|    | <b>Division Head</b>   | <b>Phone</b>         | 510-535-7038 | <b>Fax</b> | 510-535-7082 |
| 1. | <b>Acting Director, Facilities Planning and Management</b>               |                      |              |            |              |
|    | <b>Signature</b>   | <b>Date Approved</b> | 5/27/21      |            |              |
| 2. | <b>General Counsel, Department of Facilities Planning and Management</b> |                      |              |            |              |
|    | <b>Signature</b> Lozano Smith, as to form only                           | <b>Date Approved</b> | 5/26/21      |            |              |
| 3. | <b>Deputy Chief, Facilities Planning and Management</b>                  |                      |              |            |              |
|    | <b>Signature</b>   | <b>Date Approved</b> | 5/27/21      |            |              |
| 4. | <b>Chief Financial Officer</b>   |                      |              |            |              |
|    | <b>Signature</b>   | <b>Date Approved</b> |              |            |              |
| 5. | <b>President, Board of Education</b>                                     |                      |              |            |              |
|    | <b>Signature</b>   | <b>Date Approved</b> |              |            |              |





| Board Office Use: <b>Legislative File Info.</b> |              |
|---|--------------|
| File ID Number                                  | 21-0432      |
| Introduction Date                               | 3-10-2021    |
| Enactment Number                                | 21-0420      |
| Enactment Date                                  | 3/10/2021 er |



**OAKLAND UNIFIED  
SCHOOL DISTRICT**  
Community Schools, Thriving Students

# Memo

**To** Board of Education

**From** Kyla Johnson-Trammell, Superintendent  
Tadashi Nakadegawa, Deputy Chief, Facilities Planning and Management

**Board Meeting Date** March 10, 2021

**Subject** Amendment No. 3, Independent Consultant Agreement – The Integral Group, Inc. – Fremont High School New Construction Project – Division of Facilities Planning and Management

**Action Requested** Approval by the Board of Education of Amendment No. 3 to the Independent Consultant Agreement between the District and The Integral Group, Inc., Oakland, CA, for the latter to provide continued commissioning services and extending time of the Agreement by 365 additional calendar days, authorizing the President and Secretary of the Board to sign the Amendment for same with said Consultant with a time extension to commence on December 31, 2020, and last until December 31, 2021.

**Discussion** The scope of work is for continued commissioning services and three hundred sixty-five (365) calendar days' time extension.

**LBP (Local Business Participation Percentage)** 100.00%

**Recommendation** Approval by the Board of Education of Amendment No. 3 to the Independent Consultant Agreement between the District and The Integral Group, Inc., Oakland, CA, for the latter to provide continued commissioning services and extending time of the Agreement by 365 additional calendar days, authorizing the President and Secretary of the Board to sign the Amendment for same with said Consultant with a time extension to commence on December 31, 2020, and last until December 31, 2021.

**Fiscal Impact** Fund 21, Measure J

**Attachments**

- Amendment No. 3
- Consultant Proposal
- Insurance Certificate

## AMENDMENT NO. 3 TO AN INDEPENDENT CONSULTANT AGREEMENT

This Amendment is entered into between the Oakland Unified School District (OUSD) and **The Integral Group, Inc.** OUSD entered into an agreement with CONTRACTOR for services on **August 25, 2016** ("Agreement"), and the parties agree to amend the Agreement for the Services with **Fremont High School New Construction Project** as follows and in the attached Exhibit A:

|   |                          |  |   |
|---|--------------------------|--|---|
| <b>1.</b>   | <b>Services:</b>         | <input type="checkbox"/> The scope of work is <u>unchanged</u> .             | <input checked="" type="checkbox"/> <b>The scope of work has <u>changed</u>.</b>  |
| <p><b>If scope of work changed:</b> Provide brief description of revised scope of work including description of expected final results, such as services, materials, products, and/or reports; attach additional pages as necessary.</p> <p>The CONTRACTOR agrees to provide the following amended services: Additional Commissioning Services, as described in the proposal dated January 22, 2021 attached to this amendment as part of Exhibit A."</p> |                          |  |   |
| <b>2.</b>   | <b>Terms</b> (duration): | <input type="checkbox"/> The term of the contract is <u>unchanged</u> .      | <input checked="" type="checkbox"/> The term of the contract has <u>changed</u> . |
| <p><b>If term is changed:</b> The contract term is extended by an additional <u>Three hundred Sixty-five days (365)</u>, and the amended expiration date is <u>December 31, 2021</u>. <b>The current end date is December 31, 2020.</b></p>   |                          |  |   |
| <b>3.</b>   | <b>Compensation:</b>     | <input checked="" type="checkbox"/> The contract price is <u>unchanged</u> . | <input type="checkbox"/> The contract price has <u>changed</u> .                  |
| <p><b>If the compensation is changed:</b> The not to exceed contract price is</p> <p><input type="checkbox"/> Increased by: _____.</p> <p><input type="checkbox"/> Decreased by _____ dollars and no/100 (\$ _____).</p> <p>Prior to this amendment, the not to exceed contract price was _____, and after this amendment, the not to exceed contract price will be: _____.</p>   |                          |  |   |

**4. Remaining Provisions:** All other provisions of the Agreement, and prior Amendment(s) if any, shall remain unchanged and in full force and effect as originally stated.

**5. Amendment History:**

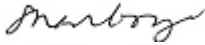
There are no previous amendments to this Agreement.  This contract has previously been amended as follows:

| No. | Date       | General Description of Reason for Amendment | Amount of Increase (Decrease) |
|-----|------------|---|-------------------------------|
| 01  | 4-10-2019  | Compensation                                | \$49,225.00                   |
| 02  | 10-28-2020 | Compensation                                | \$4,000.00                    |

**6. Approval:** This Amendment is not effective, and no payment shall be made to Contractor based on this Amendment, until it is signed by Contractor and approved by the Board of Education.



**OAKLAND UNIFIED SCHOOL DISTRICT**



Shanthi Gonzales, President,  
Board of Education

3/11/2021

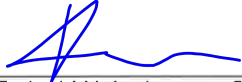
Date



Kyla Johnson-Trammell, Superintendent  
Board of Education

3/11/2021

Date




Tadashi Nakadegawa, Deputy Chief,  
Facilities Planning and Management

2/11/2021

Date

Approval as to form:



2/10/21

Date

Arne Sandberg [name]

General Counsel, Facilities, Planning and Management

**CONTRACTOR**



Contractor Signature

Date

Andrea L. Traber, Managing Principal  
Print Name, Title

**EXHIBIT "A"**  
**Scope of Work for Amendment**

**Contractor Name: The Integral Group, Inc.**

1. Detailed Description of Services to be provided: Additional Commissioning Services, as described in the proposal dated January 22, 2021 attached to this amendment as part of Exhibit A.

2. Specific Outcomes:

3. Alignment with District Strategic Plan: Indicate the goals and visions supported by the services of this contract:

|   |  |
|---|--|
| <input type="checkbox"/> Ensure a high quality instructional core               | <input type="checkbox"/> Prepare students for success in college and careers |
| <input type="checkbox"/> Develop social, emotional and physical health          | <input checked="" type="checkbox"/> Safe, healthy and supportive schools     |
| <input checked="" type="checkbox"/> Create equitable opportunities for learning | <input checked="" type="checkbox"/> Accountable for quality                  |
| <input type="checkbox"/> High quality and effective instruction                 | <input type="checkbox"/> Full service community district                     |

## EXHIBIT A



January 22, 2021

Mr. Paul Orr, Project Manager  
Oakland Unified School District  
Division of Facilities, Planning and Management  
955 High Street  
Oakland, CA 94601

RE: Fremont New Construction Agreement, Project No. 13158

Dear Mr. Orr,

This letter serves to request that the agreement and remaining budget for this project, which expired on December 31, 2020, be extended. This request is made due to the extended construction schedule.

The remaining fee to be carried over is \$26,085.05. The remaining scope of work that will be delivered under this agreement for Fremont High School Commissioning includes:

- Commissioning Meetings
- Submission Reviews
- Project Management
- Remote FPT
- Site FPT
- Final Report
- Systems Manual
- Training Verification
- 10-month warranty review activities.
- CHPS forms submission

All terms and conditions of the original agreement between OUSD and Integral Group, Inc. are unchanged and remain intact. Please let me know if you have any additional needs.

Sincerely,

A handwritten signature in black ink, appearing to read "Andrea Traber".

Andrea Traber, Managing Principal  
Integral Group, Inc.



# CERTIFICATE OF LIABILITY INSURANCE

11/1/2020

DATE (MM/DD/YYYY)

6/30/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an **ADDITIONAL INSURED**, the policy(ies) must have **ADDITIONAL INSURED** provisions or be endorsed. If **SUBROGATION IS WAIVED**, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


|   |  |  |
|---|--|--|
| <b>PRODUCER</b> Lockton Companies<br>444 W. 47th Street, Suite 900<br>Kansas City MO 64112-1906<br>(816) 960-9000 | <b>CONTACT NAME:</b><br><b>PHONE (A/C, No, Ext):</b> _____ <b>FAX (A/C, No):</b> _____<br><b>E-MAIL ADDRESS:</b> _____ |  |
|   | <b>INSURER(S) AFFORDING COVERAGE</b>   |  |
| <b>INSURED</b> INTEGRAL GROUP, INC.<br>1353599 427 13TH STREET<br>OAKLAND, CA 94612                               | <b>INSURER A:</b> Travelers Property Casualty Co of America <b>NAIC #</b> 25674  |  |
|   | <b>INSURER B:</b> Travelers Indemnity Company of America <b>25666</b>  |  |
|   | <b>INSURER C:</b> Continental Casualty Company <b>20443</b>  |  |
|   | <b>INSURER D:</b> _____  |  |
|   | <b>INSURER E:</b> _____  |  |
|   | <b>INSURER F:</b> _____  |  |

**COVERAGES** INTGR05 **CERTIFICATE NUMBER:** 14176506 **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE   | ADDL INSD | SUBR WVD | POLICY NUMBER                      | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|---|-----------|----------|------------------------------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER: _____  | Y         | N        | 680002J670190(CA)<br>680006J243785 | 7/1/2020<br>7/1/2020    | 7/1/2021<br>7/1/2021    | EACH OCCURRENCE \$ 1,000,000<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>\$ |
| B        | <input checked="" type="checkbox"/> AUTOMOBILE LIABILITY<br><input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY | Y         | N        | BA-8B772869                        | 7/1/2020                | 7/1/2021                | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$ XXXXXXXX<br>BODILY INJURY (Per accident) \$ XXXXXXXX<br>PROPERTY DAMAGE (Per accident) \$ XXXXXXXX<br>\$ XXXXXXXX   |
|          | <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR<br><input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$  |           |          | NOT APPLICABLE                     |                         |                         | EACH OCCURRENCE \$ XXXXXXXX<br>AGGREGATE \$ XXXXXXXX<br>\$ XXXXXXXX   |
| A        | <input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br><input checked="" type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below   | Y/N       | N/A      | UB007K011223                       | 7/1/2020                | 7/1/2021                | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000   |
| C        | <input type="checkbox"/> PROFESSIONAL LIABILITY   | N         | N        | AEH288326476                       | 7/1/2019                | 11/1/2020               | \$1,000,000 PER CLAIM<br>\$1,000,000 AGGREGATE  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 RE: THE DISTRICT AND THE STATE AND THEIR REPRESENTATIVES, EMPLOYEES, TRUSTEES, OFFICERS, AND VOLUNTEERS ARE ADDITIONAL INSURED AS RESPECTS GENERAL LIABILITY AND AUTO LIABILITY, AND THESE COVERAGES ARE PRIMARY, AS REQUIRED BY WRITTEN CONTRACT.

|  |   |
|--|---|
| <b>CERTIFICATE HOLDER</b><br>14176506<br>OAKLAND UNIFIED SCHOOL DISTRICT | <b>CANCELLATION</b><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|--|---|

© 1988-2015 ACORD CORPORATION. All rights reserved.



## DIVISION OF FACILITIES PLANNING & MANAGEMENT ROUTING FORM

### Project Information

|                     |  |             |     |
|---------------------|--|-------------|-----|
| <b>Project Name</b> | Fremont High School New Construction Project | <b>Site</b> | 302 |
|---------------------|--|-------------|-----|

### Basic Directions

**Services cannot be provided until the contract is awarded by the Board or is entered by the Superintendent pursuant to authority delegated by the Board.**

|                             |   |
|-----------------------------|---|
| <b>Attachment Checklist</b> | <input checked="" type="checkbox"/> Proof of general liability insurance, including certificates and endorsements, if contract is over \$15,000<br><input checked="" type="checkbox"/> Workers compensation insurance certification, unless vendor is a sole provider |
|-----------------------------|---|

### Contractor Information

|                           |   |                         |   |              |    |            |       |
|---------------------------|---|-------------------------|---|--------------|----|------------|-------|
| <b>Contractor Name</b>    | The Integral Group, Inc.  | <b>Agency's Contact</b> | Andrea Traber   |              |    |            |       |
| <b>OUSD Vendor ID #</b>   | 002203  | <b>Title</b>            | Manager   |              |    |            |       |
| <b>Street Address</b>     | 427 13th Street   | <b>City</b>             | Oakland   | <b>State</b> | CA | <b>Zip</b> | 94612 |
| <b>Telephone</b>          | 510-663-2070  | <b>Policy Expires</b>   |   |              |    |            |       |
| <b>Contractor History</b> | Previously been an OUSD contractor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                         | Worked as an OUSD employee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |              |    |            |       |
| <b>OUSD Project #</b>     | 13158   |                         |   |              |    |            |       |

### Term of Original/Amended Contract

|  |           |   |            |
|--|-----------|---|------------|
| <b>Date Work Will Begin (i.e., effective date of contract)</b> | 8-25-2016 | <b>Date Work Will End By (not more than 5 years from start date; for construction contracts, enter planned completion date)</b> |            |
|  |           | <b>New Date of Contract End (If Any)</b>  | 12-31-2021 |

### Compensation/Revised Compensation

|   |    |  |      |
|---|----|--|------|
| <b>If New Contract, Total Contract Price (Lump Sum)</b> | \$ | <b>If New Contract, Total Contract Price (Not To Exceed)</b> | \$   |
| <b>Pay Rate Per Hour (If Hourly)</b>                    | \$ | <b>If Amendment, Change in Price</b>                         | \$ 0 |
| <b>Other Expenses</b>                                   |    | <b>Requisition Number</b>                                    |      |

### Budget Information

*If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition.*

| Resource # | Funding Source     | Org Key  | Object Code | Amount |
|------------|--------------------|--|-------------|--------|
| 9650/9594  | Fund 21, Measure J | 210-9650-0-9594-8500-6215-302-9180-9905-9999-99999 | 6215        | \$0    |

### Approval and Routing (in order of approval steps)

Services cannot be provided before the contract is fully approved and a Purchase Order is issued. Signing this document affirms that to your knowledge services were not provided before a PO was issued.

|    |  |                      |              |            |              |
|----|--|----------------------|--------------|------------|--------------|
|    | <b>Division Head</b>   | <b>Phone</b>         | 510-535-7038 | <b>Fax</b> | 510-535-7082 |
| 1. | <b>Acting Director, Facilities Planning and Management</b>               | <b>Signature</b>     |              |            |              |
|    |  | <b>Date Approved</b> | 2/11/2021    |            |              |
| 2. | <b>General Counsel, Department of Facilities Planning and Management</b> | <b>Signature</b>     |              |            |              |
|    |  | <b>Date Approved</b> | 2/10/21      |            |              |
| 3. | <b>Deputy Chief, Facilities Planning and Management</b>                  | <b>Signature</b>     |              |            |              |
|    |  | <b>Date Approved</b> | 2/11/2021    |            |              |
| 4. | <b>Chief Financial Officer</b>   | <b>Signature</b>     |              |            |              |
|    |  | <b>Date Approved</b> |              |            |              |
| 5. | <b>President, Board of Education</b>                                     | <b>Signature</b>     |              |            |              |
|    |  | <b>Date Approved</b> |              |            |              |





| Board Office Use: Legislative File Info. |               |
|--|---------------|
| File ID Number                           | 20-1956       |
| Introduction Date                        | 10-28-2020    |
| Enactment Number                         | 20-1612       |
| Enactment Date                           | 10/28/2020 er |



**OAKLAND UNIFIED  
SCHOOL DISTRICT**

*Community Schools, Thriving Students*

## Memo

**To** Board of Education

**From** Kyla Johnson-Trammell, Superintendent  
Tadashi Nakadegawa, Interim Deputy Chief, Facilities Planning and Management

**Board Meeting Date** October 28, 2020

**Subject** Amendment No. 2, Independent Consultant Agreement for Professional Services – Integral Group, Inc. – Fremont High School New Construction Project

**Action Requested** Approval by the Board of Education of Amendment No. 2, Independent Consultant Agreement for Professional Services between the District and Integral Group, Inc., Oakland CA, for the latter to provide additional building envelope commissioning (BES) services, which includes reviewing RFI's, as-built drawings for the existing adjacent library building and support reviewing. Review architect supplemental instructions (ASI) related to the breezeway expansion joint, for the Fremont High School New Construction Project, in an additional amount of \$4,400.00, increasing Agreement not to exceed amount from \$313,925.00 to \$318,325.00, and authorizing the President and Secretary of the Board to sign the Amendment for same with said consultant. All other terms and conditions of the Agreement remain in full force and effect.

**Discussion** This Amendment is for additional Building Envelope Commissioning services.

**LBP** (Local business participation percentage) 100.00%

**Recommendation** Approval by the Board of Education of Amendment No. 2, Independent Consultant Agreement for Professional Services between the District and Integral Group, Inc., Oakland CA, for the latter to provide additional building envelope commissioning (BES) services, which includes reviewing RFI's, as-built drawings for the existing adjacent library building and support reviewing. Review architect supplemental instructions (ASI) related to the breezeway expansion joint, for the Fremont High School New Construction Project, in an additional amount of \$4,400.00, increasing Agreement not to exceed amount from \$313,925.00 to \$318,325.00, and authorizing the President and Secretary of the Board to sign the Amendment for same with said consultant. All other terms and conditions of the Agreement remain in full force and effect.

**Fiscal Impact** Fund 21, Measure B

**Attachments**

- Amendment No. 2, Scope of Work
- Insurance Certificate



## AMENDMENT NO. 2 TO AN INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL SERVICES

This Amendment is entered into between the Oakland Unified School District (OUSD) and **The Integral Group, Inc.** OUSD entered into an agreement with CONTRACTOR for services on **August 25, 2016** ("Agreement"), and the parties agree to amend the Agreement for the Services for the **Fremont High School New Construction Project** as follows and in the attached Exhibit A:

|   |                          |  |  |
|---|--------------------------|--|--|
| <b>1.</b>   | <b>Services:</b>         | <input type="checkbox"/> The scope of work is <u>unchanged</u> .                   | <input checked="" type="checkbox"/> <b>The scope of work has <u>changed</u>.</b> |
| <p><b>If scope of work changed:</b> Provide brief description of revised scope of work including description of expected final results, such as services, materials, products, and/or reports; attach additional pages as necessary.</p> <p>The CONTRACTOR agrees to provide the following amended services: Additional building envelope commissioning (BES) services, which includes reviewing RFI's, as-built drawings for the existing adjacent library building and support reviewing. Review architect supplemental instructions (ASI) related to the breezeway expansion joint, as described in the two proposals dated September 16, 2020 attached to this amendment as part of Exhibit A."</p> |                          |  |  |
| <b>2.</b>   | <b>Terms (duration):</b> | <input checked="" type="checkbox"/> The term of the contract is <u>unchanged</u> . | <input type="checkbox"/> The term of the contract has <u>changed</u> .           |
| <p><b>If term is changed:</b> The contract term is extended by an additional _____, and the amended expiration date is _____.</p>   |                          |  |  |
| <b>3.</b>   | <b>Compensation:</b>     | <input type="checkbox"/> The contract price is <u>unchanged</u> .                  | <input checked="" type="checkbox"/> The contract price has <u>changed</u> .      |
| <p><b>If the compensation is changed:</b> The not to exceed contract price is</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> Increased by: <u>Four Thousand Four Hundred dollars No/100 (\$4,400.00).</u></p> <p style="margin-left: 40px;"><input type="checkbox"/> Decreased by _____ dollars and no/100 (\$_____).</p> <p>Prior to this amendment, the not to exceed contract price was <b><u>Three hundred thirteen Thousand, Nine Hundred Twenty-five dollars No/100(\$313,925.00)</u></b>, and after this amendment, the not to exceed contract price will be: <b><u>Three hundred Eighteen Thousand, Three Hundred Twenty-five dollars No/100 (\$318,325.00).</u></b></p> |                          |  |  |

**4. Remaining Provisions:** All other provisions of the Agreement, and prior Amendment(s) if any, shall remain unchanged and in full force and effect as originally stated.

**5. Amendment History:**

There are no previous amendments to this Agreement.  This contract has previously been amended as follows:

| No. | Date      | General Description of Reason for Amendment | Amount of Increase (Decrease) |
|-----|-----------|---|-------------------------------|
| 01  | 4-10-2019 | Compensation                                | \$49,225.00                   |

**6. Approval:** This Amendment is not effective, and no payment shall be made to Contractor based on this Amendment, until it is signed by Contractor and approved by the Board of Education.

Amendment No. 2 The Integral Group, Inc. – Fremont High School New Construction Project - \$4,400.00

**OAKLAND UNIFIED SCHOOL DISTRICT**



\_\_\_\_\_  
Jody London, President,  
Board of Education

10/29/2020

\_\_\_\_\_  
Date



\_\_\_\_\_  
Kyla Johnson-Trammell, Superintendent  
Board of Education

10/29/2020

\_\_\_\_\_  
Date



\_\_\_\_\_  
Tadashi Nakadegawa, Interim Deputy Chief,  
Facilities Planning and Management

10/2/2020

\_\_\_\_\_  
Date

**Approval as to form:**



10-01-2020

\_\_\_\_\_  
Date

\_\_\_\_\_  
[name]  
General Counsel, Facilities, Planning and Management

**CONTRACTOR**



\_\_\_\_\_  
Contractor Signature

9/22/2020

\_\_\_\_\_  
Date

Andrea L. Traber, Managing Principal

\_\_\_\_\_  
Print Name, Title

**EXHIBIT "A"**  
**Scope of Work for Amendment**

**Contractor Name: The Integral Group, Inc.**

1. Detailed Description of Services to be provided: Additional building envelope commissioning (BES) services, which includes reviewing RFI's, as-built drawings for the existing adjacent library building and support reviewing. Review architect supplemental instructions (ASI) related to the breezeway expansion joint, as described in the two proposals dated September 16, 2020 attached to this amendment as part of Exhibit A.

2. Specific Outcomes:

3. Alignment with District Strategic Plan: Indicate the goals and visions supported by the services of this contract:

|   |  |
|---|--|
| <input type="checkbox"/> Ensure a high quality instructional core               | <input type="checkbox"/> Prepare students for success in college and careers |
| <input type="checkbox"/> Develop social, emotional and physical health          | <input checked="" type="checkbox"/> Safe, healthy and supportive schools     |
| <input checked="" type="checkbox"/> Create equitable opportunities for learning | <input checked="" type="checkbox"/> Accountable for quality                  |
| <input type="checkbox"/> High quality and effective instruction                 | <input type="checkbox"/> Full service community district                     |



INTEGRAL  
GROUP

427 13<sup>th</sup> Street  
Oakland CA 94612  
Tel 510 663-2070  
Fax 510 663-2080  
[www.integralgroup.com](http://www.integralgroup.com)

## EXHIBIT A

September 16, 2020

Oakland Unified School District  
955 High Street  
Oakland CA 94601  
Attn: Paul Orr  
cc: JaQuan Cornish

RE: Fremont HS - Request for Add-Services for **BES Increment 3 Expansion Joint**

Dear Mr. Orr,

RDH Building Science, our building enclosure subconsultant, was requested by the District to provide services in the role of Building Enclosure Specialist (BES) in addition to their current scope as Building Enclosure Commissioning Agent. Attached herein is their proposal to

RDH has proposed a total not-to exceed budget of \$4,000 for services described below, to which we propose adding 10% to cover our management and administrative costs. This would result in a total not-to-exceed Add-Service amounting to **\$4,400**, raising our total contract value from \$313, 925 to \$318,325.

Please contact me with any questions.

Thank you,

Michael McNulty  
Integral Group

TO **Michael McNulty**  
EMAIL **mmculty@integralgroup.com**  
Integral Group  
427 13<sup>th</sup> Street  
Oakland CA 94612

**B10814.001**  
**Oakland Unified School**  
**District**  
**Building Enclosure Specialist**

**EXHIBIT A**

DATE September 16, 2020

REGARDING **Additional Service Request – BES for Increment 3 Expansion Joint**

Dear Michael,

At the request of Oakland Unified School District (OUSD), we are submitting this additional service request to provide Building Envelope Specialist (BES) services for the Fremont High School Campus project. As you are aware, RDH previously submitted a proposal on January 30, 2019 for scope to provide BES services for the Increment 3 window replacement. At this time, RDH has fulfilled the obligations of that additional services request and expended the previously approved budget amount.

### Scope Background

On September 10, 2020 RDH reviewed the Increment 3 breezeway expansion joint and reported on areas where the air/water barrier is not continuous as required in the Owner's Project Requirements (OPR). RDH shared these observations with Oakland Unified School District (OUSD), Integral Group, and LCA Architects in RDH's Site Visit Report (SVR) #13. OUSD has requested that RDH provide additional BES services and coordinate with the project team to resolve items identified for Cahill to RFI in RDH SVR #13.

### Scope of Services

At OUSD's request, we will provide BES services which includes reviewing RFI's, as-built drawings for the existing adjacent library building, and conference calls to coordinate with the team. Our scope is meant to supplement but not replace the work LCA is providing under their Construction Administration services agreement.

RFI/ASI Review: Provide support reviewing and responding to contractor requests for information (RFI) and architect supplemental instructions (ASI) related to the breezeway expansion joint. This may include reviewing as-built drawings for the exterior wall assemblies at the existing library building which connects to the Increment 3 breezeway. We have budgeted up to 10 hours for this scope item.

Coordination Calls: Participate in up to three (3) coordination calls with the project team. We have budgeted up to 6 hours for this scope item.

Field Verification: Conduct up to one (1) site visit to review the as-built conditions. While we have documented the current expansion joint installation in RDH SVR 13, additional field verification may be needed to confirm the existing wall assemblies at the adjacent library building. This scope is for field verification related to responding to RFI's only and does not include a site visit report. We have budgeted up to 4 hours for this scope item.

### Fees

We propose performing the scope above on a Time and Expense basis. We estimate a not to exceed budget of **\$4,000** for our services noted above. We will only bill for actual time

expended and will seek approval in advance if the required effort or scope is more than anticipated.

### Terms

We propose that the Contract Terms and Hourly Rates we negotiated for our base scope of services apply to these additional services.

### Closure

This Proposal is valid for 60 days from the date of this letter. If this Agreement is acceptable, please sign a copy of this proposal in the space provided on the last page and return a signed copy by email. Please do not hesitate to contact the writer should you wish to discuss any aspect of our proposal. We look forward to working with you.

Yours truly,



**Michael Hsueh** | M.S., P.E. (CA)  
Building Science Engineer  
mhsueh@rdh.com  
T 510 788 8922  
C 510 919 1408  
**RDH Building Science Inc.**



**Erin Andes** | M.S., P.E. (CA), LEED AP  
Associate, Senior Project Manager  
eandes@rdh.com  
510 788 8915  
**RDH Building Science Inc.**



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/1/2020

6/30/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

| <b>PRODUCER</b> Lockton Companies<br>444 W. 47th Street, Suite 900<br>Kansas City MO 64112-1906<br>(816) 960-9000 | <b>CONTACT NAME:</b><br><b>PHONE (A/C, No, Ext):</b><br><b>E-MAIL ADDRESS:</b>   | <b>FAX (A/C, No):</b> |                               |        |   |       |  |       |  |       |             |  |             |  |             |
|---|--|-----------------------|-------------------------------|--------|---|-------|--|-------|--|-------|-------------|--|-------------|--|-------------|
|   | <table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : Travelers Property Casualty Co of America</td> <td>25674</td> </tr> <tr> <td>INSURER B : Travelers Indemnity Company of America</td> <td>25666</td> </tr> <tr> <td>INSURER C : Continental Casualty Company</td> <td>20443</td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table> |                       | INSURER(S) AFFORDING COVERAGE | NAIC # | INSURER A : Travelers Property Casualty Co of America | 25674 | INSURER B : Travelers Indemnity Company of America | 25666 | INSURER C : Continental Casualty Company | 20443 | INSURER D : |  | INSURER E : |  | INSURER F : |
| INSURER(S) AFFORDING COVERAGE   | NAIC #   |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |
| INSURER A : Travelers Property Casualty Co of America   | 25674  |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |
| INSURER B : Travelers Indemnity Company of America  | 25666  |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |
| INSURER C : Continental Casualty Company  | 20443  |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |
| INSURER D :   |  |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |
| INSURER E :   |  |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |
| INSURER F :   |  |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |
| <b>INSURED</b> 1353599 INTEGRAL GROUP, INC.<br>427 13TH STREET<br>OAKLAND, CA 94612                               |  |                       |                               |        |   |       |  |       |  |       |             |  |             |  |             |

**COVERAGES** INTGR05      **CERTIFICATE NUMBER:** 14176506      **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE   | ADDL INSD                                    | SUBR WVD | POLICY NUMBER     | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS   |
|----------|---|--|----------|-------------------|-------------------------|-------------------------|--|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b>   | Y  | N        | 680002J670190(CA) | 7/1/2020                | 7/1/2021                | EACH OCCURRENCE \$ 1,000,000   |
| A        | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  |  |          | 680006J243785     | 7/1/2020                | 7/1/2021                | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>OTHER: \$ |
|          | GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC  |  |          |                   |                         |                         |  |
| B        | <b>AUTOMOBILE LIABILITY</b>   | Y  | N        | BA-8B772869       | 7/1/2020                | 7/1/2021                | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$ XXXXXXXX<br>BODILY INJURY (Per accident) \$ XXXXXXXX<br>PROPERTY DAMAGE (Per accident) \$ XXXXXXXX                                     |
|          | <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY                 |  |          |                   |                         |                         |  |
|          | <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY                                  |  |          |                   |                         |                         |  |
|          | <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE                        |  |          | NOT APPLICABLE    |                         |                         | EACH OCCURRENCE \$ XXXXXXXX<br>AGGREGATE \$ XXXXXXXX   |
|          | <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$  |  |          |                   |                         |                         | \$ XXXXXXXX  |
| A        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>  |  | N        | UB007K011223      | 7/1/2020                | 7/1/2021                | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000                |
|          | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N<br><input checked="" type="checkbox"/> N | N/A      |                   |                         |                         |  |
| C        | <b>PROFESSIONAL LIABILITY</b>   | N  | N        | AEH288326476      | 7/1/2019                | 11/1/2020               | \$1,000,000 PER CLAIM<br>\$1,000,000 AGGREGATE   |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

RE: THE DISTRICT AND THE STATE AND THEIR REPRESENTATIVES, EMPLOYEES, TRUSTEES, OFFICERS, AND VOLUNTEERS ARE ADDITIONAL INSURED AS RESPECTS GENERAL LIABILITY AND AUTO LIABILITY, AND THESE COVERAGES ARE PRIMARY, AS REQUIRED BY WRITTEN CONTRACT.

**CERTIFICATE HOLDER**

14176506  
OAKLAND UNIFIED SCHOOL DISTRICT

**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Joseph M. Amello*

© 1988-2015 ACORD CORPORATION. All rights reserved.





## DIVISION OF FACILITIES PLANNING & MANAGEMENT ROUTING FORM

### Project Information

|                     |  |             |     |
|---------------------|--|-------------|-----|
| <b>Project Name</b> | Fremont High School New Construction Project | <b>Site</b> | 302 |
|---------------------|--|-------------|-----|

### Basic Directions

**Services cannot be provided until the contract is awarded by the Board or is entered by the Superintendent pursuant to authority delegated by the Board.**

|                             |   |
|-----------------------------|---|
| <b>Attachment Checklist</b> | <input checked="" type="checkbox"/> Proof of general liability insurance, including certificates and endorsements, if contract is over \$15,000<br><input checked="" type="checkbox"/> Workers compensation insurance certification, unless vendor is a sole provider |
|-----------------------------|---|

### Contractor Information

|                           |   |                         |   |              |    |            |       |
|---------------------------|---|-------------------------|---|--------------|----|------------|-------|
| <b>Contractor Name</b>    | The Integral Group, Inc.  | <b>Agency's Contact</b> | Andrea Traber   |              |    |            |       |
| <b>OUSD Vendor ID #</b>   | 002203  | <b>Title</b>            | Manager   |              |    |            |       |
| <b>Street Address</b>     | 427 13th Street   | <b>City</b>             | Oakland   | <b>State</b> | CA | <b>Zip</b> | 94612 |
| <b>Telephone</b>          | 510-663-2070  | <b>Policy Expires</b>   |   |              |    |            |       |
| <b>Contractor History</b> | Previously been an OUSD contractor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No |                         | Worked as an OUSD employee? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |              |    |            |       |
| <b>OUSD Project #</b>     | 13158   |                         |   |              |    |            |       |

### Term of Original/Amended Contract

|  |           |   |            |
|--|-----------|---|------------|
| <b>Date Work Will Begin</b> (i.e., effective date of contract) | 8-25-2016 | <b>Date Work Will End By</b> (not more than 5 years from start date; for construction contracts, enter planned completion date) | 12-30-2020 |
|  |           | <b>New Date of Contract End (If Any)</b>  |            |

### Compensation/Revised Compensation

|   |    |  |             |
|---|----|--|-------------|
| <b>If New Contract, Total Contract Price (Lump Sum)</b> | \$ | <b>If New Contract, Total Contract Price (Not To Exceed)</b> | \$          |
| <b>Pay Rate Per Hour (If Hourly)</b>                    | \$ | <b>If Amendment, Change in Price</b>                         | \$ 4,400.00 |
| <b>Other Expenses</b>                                   |    | <b>Requisition Number</b>                                    |             |

### Budget Information

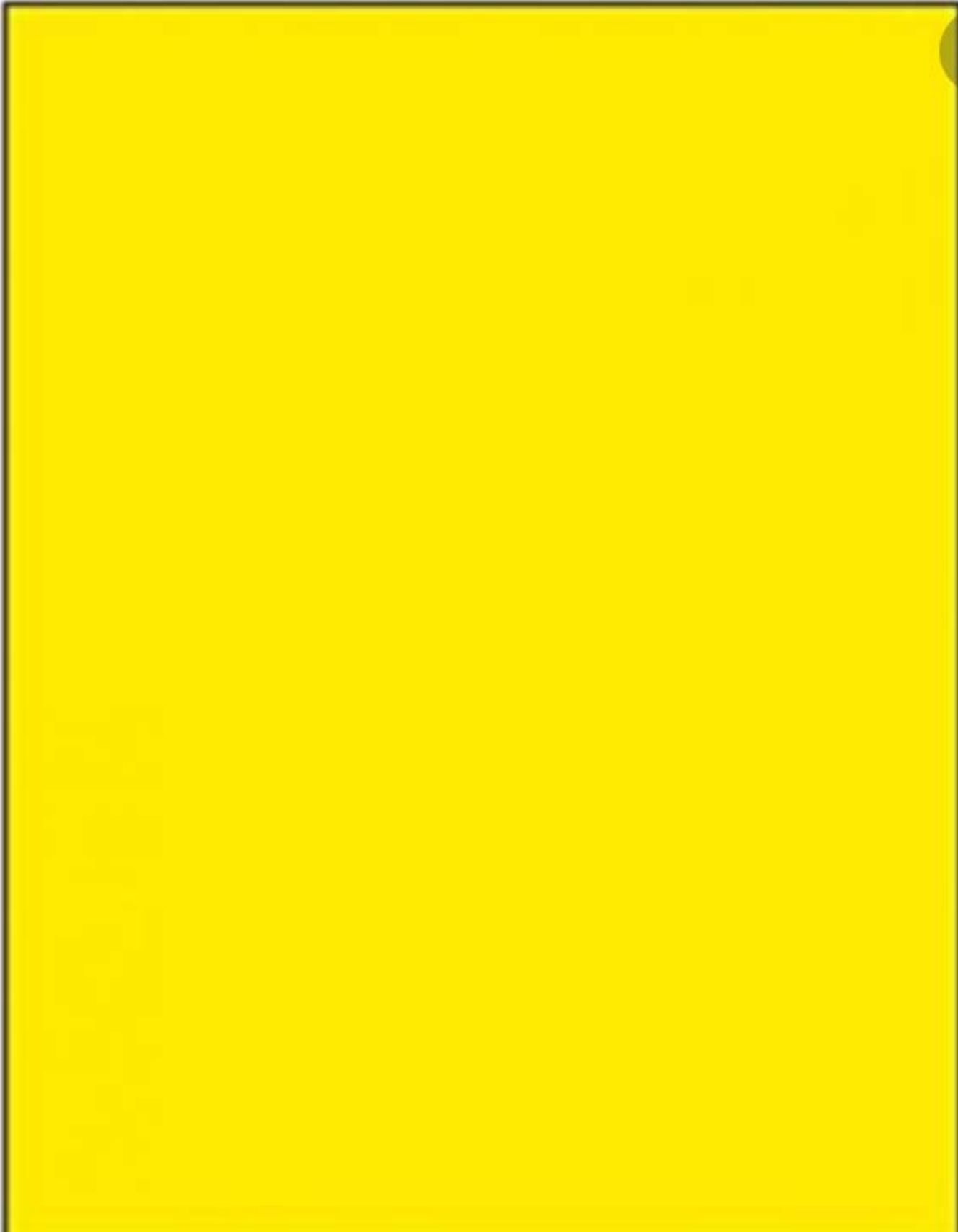
*If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition.*

| Resource # | Funding Source     | Org Key  | Object Code | Amount     |
|------------|--------------------|--|-------------|------------|
| 9650/9594  | Fund 21, Measure J | 210-9650-0-9594-8500-6215-302-9180-9905-9999-99999 | 6215        | \$4,400.00 |

### Approval and Routing (in order of approval steps)

Services cannot be provided before the contract is fully approved and a Purchase Order is issued. Signing this document affirms that to your knowledge services were not provided before a PO was issued.

|    |  |                      |              |            |              |
|----|--|----------------------|--------------|------------|--------------|
|    | <b>Division Head</b>   | <b>Phone</b>         | 510-535-7038 | <b>Fax</b> | 510-535-7082 |
| 1. | <b>Director, Facilities Planning and Management</b>                      |                      |              |            |              |
|    | <b>Signature</b> <b>for Kenya Chatman</b>                                | <b>Date Approved</b> | 10/2/2020    |            |              |
| 2. | <b>General Counsel, Department of Facilities Planning and Management</b> |                      |              |            |              |
|    | <b>Signature</b> <b>Lozano Smith, As to form only</b>                    | <b>Date Approved</b> | 10-01-2020   |            |              |
| 3. | <b>Deputy Chief, Facilities Planning and Management</b>                  |                      |              |            |              |
|    | <b>Signature</b>   | <b>Date Approved</b> | 10/2/2020    |            |              |
| 4. | <b>Chief Financial Officer</b>   |                      |              |            |              |
|    | <b>Signature</b>   | <b>Date Approved</b> |              |            |              |
| 5. | <b>President, Board of Education</b>                                     |                      |              |            |              |
|    | <b>Signature</b>   | <b>Date Approved</b> |              |            |              |



| Board Office Use: Legislative File Info. |            |
|--|------------|
| File ID Number                           | 19-0385    |
| Introduction Date                        | 4/10/19    |
| Enactment Number                         | 19-0474    |
| Enactment Date                           | 4/10/19 If |



# Memo

**To** Board of Education  
**From** Kyla Johnson-Trammell, Superintendent  
 Timothy White, Deputy Chief, Facilities Planning and Management

**Board Meeting Date** 4-10-2019  
**Subject** Amendment No. 1 to INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL  
 Contractor: The Integral Group, Inc.  
 Services For: Fremont High School New Construction Project

**Action Requested and Recommendation** Approval by the Board of Education of Amendment No. 1 to INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL SERVICES between Oakland Unified School District and The Integral Group Inc. Oakland, CA, for the latter to

provide additional services to scope of work expansion to accommodate full window replacement for Bldg. B; and additional construction administration review in the remaining increments.

for the period of 8 / 2 5 / 1 6 through 1 2 / 3 0 / 2 0 in an amount not to exceed 313,925.

**Prior Contract** The Agreement was previously approved by the Board on 8-24-2019 (Enactment No. 16-1400 ).

**Modification** This amendment modifies the scope of work and compensation. All other provisions remain the same.

**Competitively Bid** Was this contract competitively bid? Yes  
 If no, exception:

**Fiscal Impact** Funding resource(s): Fund 21, Measure J

**Attachments**

- Contract Amendment
- Copy of original contract and all prior amendments (if any)

| Board Office Use: Legislative File Info. |            |
|--|------------|
| File ID Number                           | 19-0385    |
| Introduction Date                        | 4/10/19    |
| Enactment Number                         | 19-0474    |
| Enactment Date                           | 4/10/19 If |



**OAKLAND UNIFIED SCHOOL DISTRICT**

Community Schools, Thriving Students

**AMENDMENT NO. 1 TO**

**INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL SERVICES**

This Amendment amends INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL SERVICES between Oakland Unified School District (OUSD) and The Integral Group, Inc. (Contractor) entered into on 8-24-2019 (OUSD Enactment No. 16-1400). The parties agree to amend that Agreement as follows:

|   |
|---|
| <p>1. <b>Services:</b> <input type="checkbox"/> The scope of work is <u>unchanged</u>. <input checked="" type="checkbox"/> The scope of work has <u>changed</u>.</p> <p><b>If the scope of work has changed:</b> Provide brief description of revised scope of work including measurable description of expected final results, such as services, materials, products, and/or reports; attach additional pages as necessary.</p> <p><input checked="" type="checkbox"/> Revised scope of work attached. OR <input type="checkbox"/> CONTRACTOR agrees to provide the following amended services:</p> <p>provide additional services to scope of work expansion to accommodate full window replacement for Bldg. B; and additional construction administration review in the remaining increments.</p> |
| <p>2. <b>Term (duration):</b> <input checked="" type="checkbox"/> The term of the contract is <u>unchanged</u>. <input type="checkbox"/> The term of the contract has <u>changed</u>.</p> <p><b>If the term has changed:</b> The contract term began on _____ and expires on _____. The parties agree to extend the contract through _____.</p>   |
| <p>3. <b>Compensation:</b> <input type="checkbox"/> The contract price is <u>unchanged</u>. <input checked="" type="checkbox"/> The contract price has <u>changed</u>.</p> <p><b>If the compensation has changed:</b> The contract price is amended by</p> <p><input checked="" type="checkbox"/> Increase of \$ <u>49,225</u> to original contract amount.</p> <p><input type="checkbox"/> Decrease of \$ _____ to original contract amount.</p> <p>The new contract total is <u>Three hundred thirteen thousand, Nine hundred twenty-five</u> Dollars ( <u>313,925</u> )</p>  |

- Remaining Provisions:** All other provisions of the Agreement, and prior Amendment(s) if any, shall remain unchanged and in full force and effect as originally stated.
- Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion:** CONTRACTOR certifies to the best of his/her/its knowledge and belief, that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency according to Federal Acquisition Regulation Subpart 9.4, and by signing this contract, certifies that this vendor does not appear on the Excluded Parties List (<https://www.sam.gov/>).

6. **Approval:** Approval requires signature by the Board of Education and/or the Superintendent as its designee. This Amendment shall be deemed approved when it has been signed by the Board of Education, and/or the Superintendent as its designee.

**OAKLAND UNIFIED SCHOOL DISTRICT**

Amie Long 4/11/19  
 Date  
 President, Board of Education  
 Superintendent  
 Chief or Deputy Chief  
[Signature] 4/11/19  
 Date  
 Secretary, Board of Education

**CONTRACTOR**

[Signature] 2/20/19  
 Contractor Signature Date  
ANDREA TRABER,  
 Print Name, Title  
Sr. PRINCIPAL

Form approved by OUSD General Counsel for 2018-19 FY

FOR OUSD PURPOSES ONLY – The following information is not part of the Contract.

| OUSD Internal Routing   |                                 |                 |         |
|---|---------------------------------|-----------------|---------|
| Services above original contract cannot be provided before the amendment is fully approved and the PO amount is increased by Procurement. |                                 |                 |         |
|   | Signature - Approved            | Denied - Reason | Date    |
| 1. Administrator/Manager  | [Signature]                     |                 |         |
| 2. Resource Manager (If restricted funds)   | [Signature]                     |                 | 2/20/19 |
| 3. Network Superintendent/Executive Director  | [Signature]                     |                 |         |
| 4. Chief/Deputy Chief   | [Signature]                     |                 | 2/20/19 |
| 5. Legal (if increase takes contract above \$90,200)  |                                 |                 |         |
| 6. Superintendent, Board of Education   | Signature on the legal contract |                 |         |

**Alignment with Single Plan for Student Achievement – SPSA (required if using State or Federal Funds)**

Please select:

Action Item included in Board Approved SPSA (no additional documentation required)—Item Number: \_\_\_\_\_

Action Item added as modification to Board Approved SPSA – Submit the following documents to the Resource Manager either electronically via email of scanned documents, fax or drop off.

- Relevant page of SPSA with action item highlighted. Page must include header with the word "Modified", modification date, school site name, both principal and school site council chair initials and date.
- Meeting announcement for meeting in which the SPSA modification was approved.
- Minutes for meeting in which the SPSA modification was approved indicating approval of the modification.
- Sign-in sheet for meeting in which the SPSA modification was approved.



EXHIBIT "A" SCOPE OF WORK

[IF A CONTRACTOR PROVIDES AN ACCEPTABLE DESCRIPTION OF SERVICES AS PART OF A PROPOSAL, THAT DESCRIPTION OF SERVICES MAY BE ATTACHED WITHOUT ANY TERMS, CONDITIONS, LIMITATIONS, ETC., FROM THAT PROPOSAL.]

1. **Description of Services to be Provided:** Provide a description of the service(s) the contractor will provide. Be specific about what service(s) OUSD is purchasing and what *this* Contractor will do.

provide additional services to scope of work expansion to accommodate full window replacement for Bldg. B; and additional construction administration review in the remaining increments.



---

427 13<sup>th</sup> Street  
Oakland CA 94612  
Tel 510 663-2070  
Fax 510 663-2080  
[www.integralgroup.com](http://www.integralgroup.com)

January 30, 2019

Oakland Unified School District  
955 high Street  
Oakland CA 94601  
Attn: Huy Hoang

RE: Fremont HS Inc. 2-4 - Request for Additional Services for **Building Envelope Commissioning Services**

Dear Mr. Hoang,

RDH Building Science, our building enclosure subconsultant, was requested by the District to provide additional services regarding (1) a scope expansion to accommodate full window replacement at Building B, (2) additional Construction Administration Services (CAS) scope to review and advise on RFI/ATIs in the remaining increments, and (3) additional Construction Field Review (CFR) scope to accommodate what is now understood to be the appropriate time on site.

RDH has proposed a total not-to exceed budget of \$44,750 for the remaining 3 increments, to which we propose adding 10% to cover our management and administrative costs. This would result in a total not to exceed Add-Service amount of \$49,225.

If this is acceptable, please send the appropriate authorizations. And feel free to contact me and RDH with any questions.

Thank you,

Michael McNulty  
Integral Group



# CERTIFICATE OF LIABILITY INSURANCE

7/1/2019

DATE (MM/DD/YYYY)

6/28/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


|   |  |                                |
|---|--|--------------------------------|
| <b>PRODUCER</b> Lockton Companies<br>444 W. 47th Street, Suite 900<br>Kansas City MO 64112-1906<br>(816) 960-9000 | <b>CONTACT NAME:</b><br>_____          |                                |
|   | <b>PHONE (A/C, No., Ext):</b><br>_____ | <b>FAX (A/C, No):</b><br>_____ |
| <b>E-MAIL ADDRESS:</b><br>_____   |  |                                |
| <b>INSURER(S) AFFORDING COVERAGE</b>  |  | <b>NAIC #</b>                  |
| <b>INSURER A :</b> Travelers Property Casualty Co of America  |  | 25674                          |
| <b>INSURER B :</b> The Travelers Indemnity Company  |  | 25658                          |
| <b>INSURER C :</b> Continental Casualty Company   |  | 20443                          |
| <b>INSURER D :</b> Travelers Indemnity Company of America   |  | 25666                          |
| <b>INSURER E :</b>  |  |                                |
| <b>INSURER F :</b>  |  |                                |

**COVERAGES** INTGR05      **CERTIFICATE NUMBER:** 14176506      **REVISION NUMBER:** XXXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | ADDL INSD | SUBR WVD | POLICY NUMBER     | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|--|-----------|----------|-------------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b><br><input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br><input type="checkbox"/> OTHER: _____ | Y         | N        | 680002J670190(CA) | 7/1/2018                | 7/1/2019                | EACH OCCURRENCE \$ 1,000,000  |
| B        |  |           |          | 680006J243785     | 7/1/2018                | 7/1/2019                | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>\$ |
| D        | <input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b><br><input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY   | Y         | N        | BA-8B772869       | 7/1/2018                | 7/1/2019                | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$ XXXXXXXX<br>BODILY INJURY (Per accident) \$ XXXXXXXX<br>PROPERTY DAMAGE (Per accident) \$ XXXXXXXX<br>\$ XXXXXXXX               |
|          | <input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR<br><input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE<br><input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$   |           |          | NOT APPLICABLE    |                         |                         | EACH OCCURRENCE \$ XXXXXXXX<br>AGGREGATE \$ XXXXXXXX<br>\$ XXXXXXXX   |
| A        | <b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below  | Y/N       | N/A      | UB007K011223      | 7/1/2018                | 7/1/2019                | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000         |
| C        | <b>PROFESSIONAL LIABILITY</b>  | N         | N        | AEH288326476      | 7/1/2018                | 7/1/2019                | \$1,000,000 PER CLAIM<br>\$1,000,000 AGGREGATE  |

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)**  
 RE: THE DISTRICT AND THE STATE AND THEIR REPRESENTATIVES, EMPLOYEES, TRUSTEES, OFFICERS, AND VOLUNTEERS ARE ADDITIONAL INSURED AS RESPECTS GENERAL LIABILITY AND AUTO LIABILITY, AND THESE COVERAGES ARE PRIMARY, AS REQUIRED BY WRITTEN CONTRACT.

|   |   |
|---|---|
| <b>CERTIFICATE HOLDER</b><br><b>14176506</b><br>OAKLAND UNIFIED SCHOOL DISTRICT | <b>CANCELLATION</b><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|---|---|

© 1988-2015 ACORD CORPORATION. All rights reserved.



**AMENDMENT ROUTING FORM 2018-2019**

**Amendment No. 1 to INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL**

**Directions**

Services beyond the original contract cannot be provided until the amendment is fully approved and PO is increased by Procurement.

- To be eligible for an amendment, term end date of the contract cannot not be expired. If expired, a new contract is necessary.
- Insert the amendment number (i.e. if this is the first amendment enter "1," second enter "2," etc.) at the top of the amendment.
- If contract total amount has increased, the scope of work must change.
- OUSD contract originator **creates new requisition with the original PO number referenced in the item description.**

**When the contract amendment is approved, Procurement will add additional funds to the original Purchase Order.**

Attachment Checklist

- Contract amendment packet including Board Memo and Amendment Form
- Board approved copy of the original contract and any prior Amendments.

**Contractor Information**

|                  |                          |                      |                           |          |       |
|------------------|--------------------------|----------------------|---------------------------|----------|-------|
| Contractor Name  | The Integral Group, Inc. | Contractor's Contact | Michael McNulty           |          |       |
| OUSD Vendor ID # | 002203                   | Title                | President                 |          |       |
| Street Address   | 427 13th Street          | City, State          | Oakland, CA               | Zip Code | 94612 |
| Telephone        | 510-663-2070             | Email (required)     | mmculty@integralgroup.com |          |       |

**Compensation and Terms**

|                           |              |                   |        |  |            |
|---------------------------|--------------|-------------------|--------|--|------------|
| Current Contract Amount   | \$264,700.00 | OUSD Vendor ID #  | 002203 | Start Date of Original Contract                      | 8-25-2016  |
| Amount of Increase        | 49,225       | Original PO #     |        | Current Term End Date                                | 12-30-2020 |
| Amount of Decrease        |              | New Requisition # |        | New Term End Date*                                   |            |
| New Total Contract Amount | 313,925      | % Change          |        | *Must be no more than five years from the start date |            |

**Budget Information** (If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition)

| Requisition No. | Budget Number                                      | Resource Name | Amount       |
|-----------------|--|---------------|--------------|
|                 | 210-9350-0-9594-8500-6215-302-9180-9905-9999-99999 | 9350/9594     | \$ 49,225.00 |
|                 |  |               | \$ 0.00      |
|                 |  |               | \$ 0.00      |
|                 |  |               | \$ 0.00      |

**Contract History**

|           | OUSD Enactment # | Exact Name of Contract                      | Contract Amount          |
|-----------|------------------|---|--------------------------|
| Agreement | 16-1400          | Fremont High School New Construction        | \$264,700.00             |
| Amend #   | OUSD Enactment # | General Description of Reason for Amendment | Increase/Decrease Amount |
|           |                  |   |                          |
|           |                  |   |                          |

**OUSD Contract Originator Information**

|                      |                                    |        |                    |                    |
|----------------------|------------------------------------|--------|--------------------|--------------------|
| Name of OUSD Contact | Tadashi Nakadegawa                 | Email  | tadashi.nakadegawa | @ousd.org          |
| Site/Dept. Name      | Facilities Planning and Management | Site # | 918                | Phone 510-353-7038 |

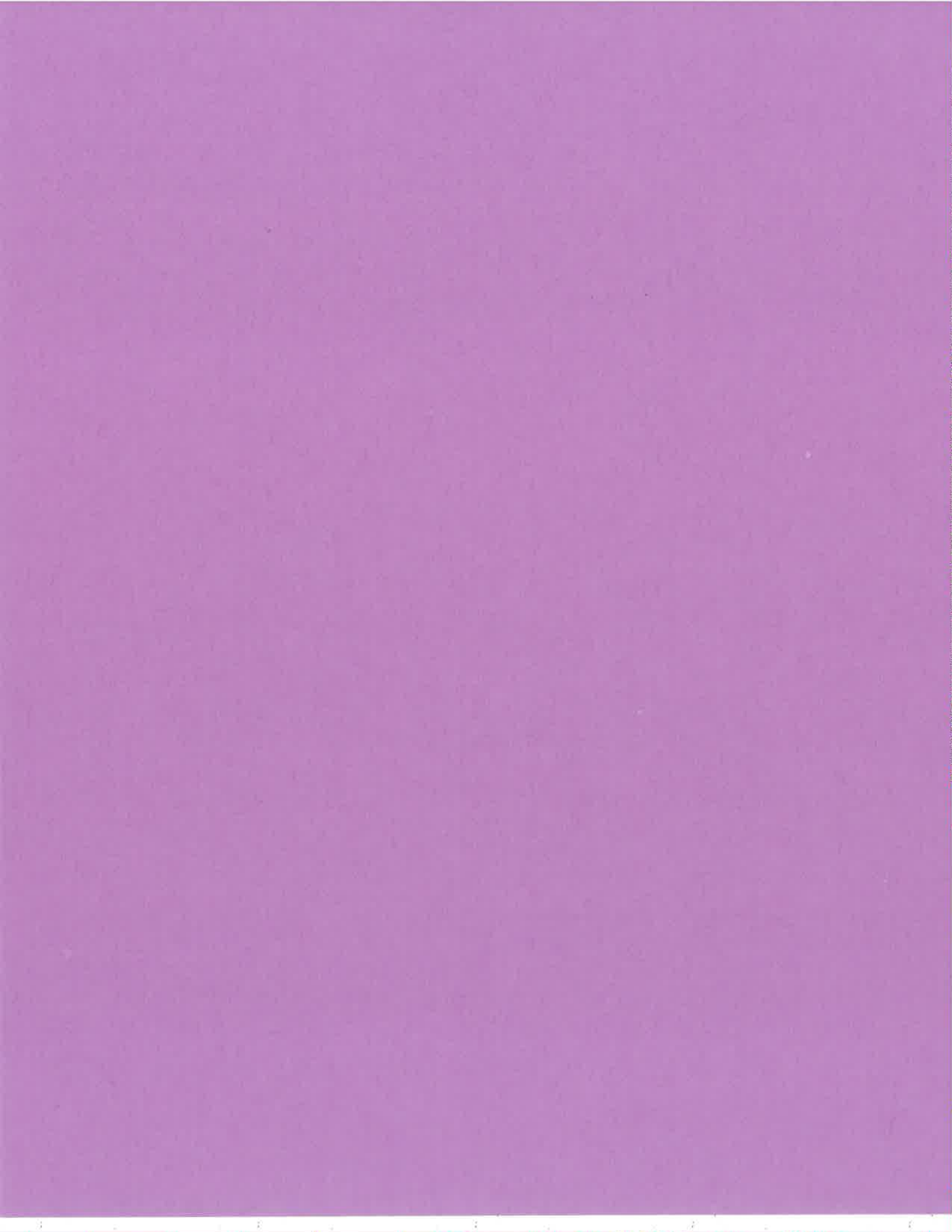
**Approval and Routing (in order of approval steps)**

Services above original contract cannot be provided before the amendment is fully approved and the PO amount is increased by Procurement.

|  | Signature - Approved            | Denied - Reason | Date    |
|--|---------------------------------|-----------------|---------|
| 1. Administrator/Manager                             |                                 |                 |         |
| 2. Resource Manager (if restricted funds)            |                                 |                 | 2/21/19 |
| 3. Network Superintendent/Executive Director         |                                 |                 |         |
| 4. Chief/Deputy Chief                                |                                 |                 | 2/25/19 |
| 5. Legal (if increase takes contract above \$90,200) |                                 |                 |         |
| 6. Superintendent, Board of Education                | Signature on the legal contract |                 |         |

Procurement-Date Received: \_\_\_\_\_

**THIS FORM IS NOT A CONTRACT**





|   |           |
|---|-----------|
| <b>Board Office Use: Legislative File Info.</b> |           |
| File ID Number                                  | 16-1795   |
| Introduction Date                               | 8-24-2016 |
| Enactment Number                                | 16-1400   |
| Enactment Date                                  | 8/24/16   |



OAKLAND UNIFIED  
SCHOOL DISTRICT

# Memo

**To** Board of Education

**From** Antwan Wilson, Superintendent and Secretary, Board of Education  
 By: Vernon Hal, Senior Business Officer VEH  
 Joe Dominguez, Deputy Chief, Facilities Planning and Management

**Board Meeting Date** August 24, 2016

**Subject** Independent Consultant Agreement for Professional Services - Integral Group, Inc. - Fremont High School New Construction Project

**Action Requested** Approval by the Board of Education of an Independent Consultant Agreement between the District and Integral Group, Inc., Oakland, CA., for the latter to provide commissioning services includes: heating, ventilation, air conditioning (HVAC) systems and controls(CHPS/T24 required), lighting systems and controls, domestic hot water systems, pumping systems (sewage/sump booster), landscape irrigation systems, water re-use systems, on-site renewable energy systems; review of Owner's or Owner representative's Project Requirements(OPR), Review of Basis of Design (BOD), Full commissioned systems peer design review; commissioning plan, submittal review; pre-functional test/checklists, in conjunction with the Fremont High School New Construction Project more specifically delineated in the Scope of Services in Exhibit "A", incorporated herein by reference as though fully set forth, commencing August 25, 2016 and concluding no later than December 30, 2020, in an amount not-to exceed \$264,700.00.

**Discussion** Commissioning services are required and must meet the OUSD and State standards.

**LBP (Local Business Participation Percentage)** 58.00%

**Procurement Procedure** Materials, supplies, equipment and/or Services under the bid limit \$87,000.

**Recommendation** Approval by the Board of Education of an Independent Consultant Agreement between the District and Integral Group, Inc., Oakland, CA., for the latter to provide commissioning services includes: heating, ventilation, air conditioning (HVAC) systems and controls(CHPS/T24 required), lighting systems and controls, domestic hot water systems, pumping systems (sewage/sump booster), landscape irrigation systems, water re-use systems, on-site renewable energy systems; review of Owner's or Owner representative's Project Requirements(OPR), Review of Basis of Design (BOD), Full commissioned systems peer design review; commissioning plan, submittal review; pre-functional test/checklists, in conjunction with the Fremont High School New Construction Project more specifically delineated in the Scope of Services in Exhibit "A", incorporated herein by reference as though fully set

forth, commencing August 25, 2016 and concluding no later than December 30, 2020, in an amount not-to exceed \$264,700.00.

**Fiscal Impact**

Fund 21, Measure J

**Attachments**

- Independent Consultant Agreement including scope of work
- Certificate of Insurance
- Consultant Proposal



**CONTRACT JUSTIFICATION FORM**  
**This Form Shall Be Submitted to the Board Office**  
**With Every Consent Agenda Contract.**

Legislative File ID No. 16-1795

Department: Facilities Planning and Management

Vendor Name: The Integral Group, Inc.

Project Name: Fremont New Construction Project No.: 13158

Contract Term: Intended Start: 8/11/2016 ~~8/25/16~~ Intended End: 12/30/2020

Annual (if annual contract) or Total (if multi-year agreement) Cost: \$264,700.00

Approved by: Cesar Monterrosa

Is Vendor a local Oakland Business or have they meet the requirements of the

Local Business Policy?  Yes (No if Unchecked)

How was this Vendor selected?

There was an RFP process for commissioning services, this vendor was selected based on District review, team qualifications and experience, project approach, and verification of licenses and insurance.

Summarize the services this Vendor will be providing.

Commissioning process as required by Title 24-2013 and CHPS (EE 3.0 and EE 3.1). Commissioning systems include: heating, ventilation, air conditioning (HVAC) systems and controls (CHPS/T24 required), lighting systems and controls, domestic hot water systems, pumping systems (sewage/sump/booster), landscape irrigation systems, water re-use systems, on-site renewable energy systems; review of Owner's or Owner representative's Project Requirements (OPR), Review of Basis of Design (BOD), Full commissioned systems peer design review; commissioning plan, submittal review; pre-functional test/checklists;

Was this contract competitively bid?  Yes (No if Unchecked)

If No, please answer the following:

1) How did you determine the price is competitive?

## SCOPE OF SERVICES

Commissioning process as required by Title 24-2013 and CHPS (EE 3.0 and EE 3.1). Commissioning systems include: heating, ventilation, air conditioning (HVAC) systems and controls (CHPS/T24 required), lighting systems and controls, domestic hot water systems, pumping systems (sewage/sump/booster), landscape irrigation systems, water re-use systems, on-site renewable energy systems; review of Owner's or Owner representative's Project Requirements (OPR), Review of Basis of Design (BOD), Full commissioned systems peer design review; commissioning plan, submittal review; pre-functional test/checklists;

## REASON SERVICES OR EQUIPMENT IS NEEDED

Commissioning requirements are OUSD and State standards.

## For CONSTRUCTION CONTRACTS -

1. Date(s) of Bid Advertisement;
2. Number of Bids Received, List of Bidders and Bid Amounts;
3. Date of Bid Opening;
4. Name of Architect;
5. Project Duration
6. Liquidated Damages \$ per day \$0.00
7. Phasing/Milestones
8. DIR Contractor / Subcontractor registration #;
9. Other pertinent information.

**OAKLAND UNIFIED SCHOOL DISTRICT**

**INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL SERVICES**

**Fremont High School New Construction Project**

**THIS CONTRACT** is made and entered into and upon Board of Education approval as indicated below ("Contract"), by and between **Integral Group, Inc.** ("Contractor") and Oakland Unified School District ("District"). Contractor and District may be referred to herein individually as a "Party" or collectively as the "Parties."

**WHEREAS**, the District is authorized by Section 53060 of the California Government Code to contract with and employ any persons for the furnishing of special services and advice in financial, economic, accounting, engineering, legal or administrative matters, if those persons are specially trained and experienced and competent to perform the special services required;

**WHEREAS**, the District is in need of such services and advice and the Contractor warrants that it is specially trained, licensed and experienced and competent to perform the services required by the District;

**WHEREAS**, the Contractor agrees to perform the Services described in this Agreement in accordance with the standards of its profession, to District's satisfaction, and in accordance with this Agreement.

**NOW, THEREFORE**, the Parties agree as follows:

- 1. **Services.** The Contractor shall furnish to the District the services as described in **Exhibit "A,"** attached hereto and incorporated herein by this reference ("Services" or "Work"):

The scope of the project is to provide commissioning services includes: heating, ventilation, air conditioning (HVAC) systems and controls(CHPS/T24 required), lighting systems and controls, domestic hot water systems, pumping systems (sewage/sump booster), landscape irrigation systems, water re-use systems, on-site renewable energy systems; review of Owner's or Owner representative's Project Requirements(OPR), Review of Basis of Design (BOD), Full commissioned systems peer design review; commissioning plan, submittal review; pre-functional test/checklists.

- 2. **Term.** Contractor shall **commence on August 25, 2016 and concluding no later than December 30, 2020** upon Board Approval and will diligently perform as required or requested by District as applicable. This Agreement may be extended upon mutual approval of both parties on an annual basis to the extent permissible under applicable law.

- 3. **Submittal of Documents.** The Contractor shall not commence the Work under this Contract until the Contractor has submitted and the District has approved the certificate(s) and affidavit(s), and the endorsement(s) of insurance required as indicated below:

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Signed Agreement                      | <input checked="" type="checkbox"/> Workers' Compensation Certificate |
| <input checked="" type="checkbox"/> Insurance Certificates & Endorsements | <input type="checkbox"/> W-9 Form                                     |
| <input type="checkbox"/> Bonds (as requested by District)                 | <input type="checkbox"/> Other: Fingerprinting                        |
| <input checked="" type="checkbox"/> Debarment Certificate                 |   |

- 4. **Compensation.** District agrees to pay the Contractor for Services satisfactorily rendered pursuant to this Agreement, at the rates indicated and as more specifically described in **Exhibit "A,"** on an hourly basis and a per-Item basis, as applicable, and up to a **maximum amount not-to-exceed Two hundred sixty-four thousand, seven hundred dollars and no cents (\$264,700.00)**. District shall pay Contractor only for all undisputed amounts in installment



payments within thirty (30) days after the Contractor submits an invoice to the District for Work actually completed and after the District's written approval of the Work, or the portion of the Work for which payment is to be made.

5. **Expenses.** District shall not be liable to Contractor for any costs or expenses paid or incurred by Contractor in performing the Work. Expenses will not be charged on the Work above the maximum not-to-exceed amount of **Zero (\$0.00)**. Rates for expenses are included on the Schedule of Fees and Charges attached hereto as **Exhibit "B"**.
6. **Materials.** Contractor shall furnish, at his/her own expense, all labor, materials, equipment, supplies and other items necessary to complete the services to be provided pursuant to this Agreement.
7. **Independent Contractor.** Contractor, in the performance of this Agreement, shall be and act as an independent contractor. Contractor understands and agrees that he/she and all of his/her employees shall not be considered officers, employees, agents, partner, or joint venture of the District, and are not entitled to benefits of any kind or nature normally provided employees of the District and/or to which District's employees are normally entitled, including, but not limited to, State Unemployment Compensation or Worker's Compensation. Contractor shall assume full responsibility for payment of all federal, state and local taxes or contributions, including unemployment insurance, social security and income taxes with respect to Contractor's employees.
8. **Standard of Care.** Contractor's services will be performed, findings obtained, reports and recommendations prepared in accordance with generally and currently accepted principles and practices of his/her profession for services to California school districts.
9. **Originality of Services.** Contractor agrees that all technologies, formulae, procedures, processes, methods, writings, ideas, dialogue, compositions, recordings, teleplays and video productions prepared for, written for, or submitted to the District and/or used in connection with this Agreement, shall be wholly original to Contractor and shall not be copied in whole or in part from any other source, except that submitted to Contractor by District as a basis for such services. District represents and warrants that any information supplied to Contractor by District or its representative as a basis to perform such services is accurate and complete and acknowledges that Contractor is relying on such information without any further duty to confirm the accuracy or completeness.
10. **Copyright/Trademark/Patent.** Contractor understands and agrees that all matters produced under this Agreement shall become the property of District and cannot be used without District's express written permission. District shall have all right, title and interest in said matters, including the right to secure and maintain the copyright, trademark and/or patent of said matter in the name of the District. District shall not use or distribute any reports submitted under this Agreement in a misleading manner and such reports shall be copied in their entirety when distributed.
11. **Termination.**
  - 11.1. **Without Cause by District.** District may, at any time, with or without reason, terminate this Agreement and compensate Contractor only for services satisfactorily rendered to the date of termination. Written notice by District shall be sufficient to stop further performance of services by Contractor. Notice shall be deemed given when received by the Contractor or no later than three days after the day of mailing, whichever is sooner.
  - 11.2. **Without Cause by Contractor.** Contractor may, upon thirty (30) day notice, with or without reason, terminate this Agreement. Upon this termination, District shall only be

obligated to compensate Contractor for services satisfactorily rendered to the date of termination. Written notice by Contractor shall be sufficient to stop further performance of services to District. District acknowledges that this thirty (30) day notice period is acceptable so that the District can attempt to procure the Services from another source.

**11.3. With Cause by District.** District may terminate this Agreement upon giving of written notice of intention to terminate for cause. Cause shall include:

11.3.1. material violation of this Agreement by the Contractor; or

11.3.2. any act by Contractor exposing the District to liability to others for personal injury or property damage; or

11.3.3. Contractor is adjudged a bankrupt, Contractor makes a general assignment for the benefit of creditors or a receiver is appointed on account of Contractor's insolvency.

Written notice by District shall contain the reasons for such intention to terminate and unless within three (3) calendar days after that notice the condition or violation ceases, or satisfactory arrangements for the correction thereof be made, this Agreement shall upon the expiration of the three (3) calendar days cease and terminate. In the event of such termination, the District may secure the required services from another Contractor. If the expense, fees, and/or costs to the District exceeds the cost of providing the service pursuant to this Agreement, the Contractor shall immediately pay the excess expense, fees, and/or costs to the District upon the receipt of the District's notice of these expenses, fees, and/or costs. The foregoing provisions are in addition to and not a limitation of any other rights or remedies available to District.

**11.4.** Upon termination, Contractor shall provide the District with all completed documents produced maintained or collected by Contractor pursuant to this Agreement.

**12. Indemnification.** To the furthest extent permitted by California law, Contractor shall, at its sole expense, defend, indemnify, and hold harmless the District, the State of California, and their agents, representatives, officers, employees, trustees, and volunteers (the "Indemnified Parties") from any and all demands, losses, liabilities, claims, suits, and actions (the "Claims") of any kind, nature, and description, including, but not limited to, personal injury, death, property damage, and reasonable attorneys' fees and costs, resulting from the performance of the Agreement or from any activity, work, or thing done, permitted, or suffered by the Contractor in conjunction with this Agreement, to the extent caused by the negligence or willful misconduct of Contractor, its employees or subcontractors. The District shall have the right to accept or reject any legal representation that Contractor proposes to defend the Indemnified Parties.

**13. Insurance.**

13.1. The Contractor shall procure and maintain at all times it performs any portion of the Services the following insurance with minimum limits equal to the amount indicated below.

13.1.1. **Commercial General Liability and Automobile Liability Insurance.** Commercial General Liability Insurance and Any Auto Automobile Liability Insurance that insure against all claims of bodily injury, property damage, personal injury, death, advertising injury, and medical payments arising from Contractor's performance of any portion of the Services. (Form CG 0001 and CA 0001)

13.1.2. **Workers' Compensation and Employers' Liability Insurance.** Workers' Compensation Insurance and Employers' Liability Insurance for all of its employees performing any portion of the Services. In accordance with provisions of section 3700 of the California Labor Code, the Contractor shall be required to secure workers' compensation coverage for its employees. If any class of employee or employees engaged in performing any portion of the Services under this Agreement are not protected under the Workers' Compensation Statute, adequate insurance coverage for the protection of any employee(s) not otherwise protected must be obtained before any of those employee(s) commence performing any portion of the Services.

13.1.3. **Professional Liability (Errors and Omissions).** Professional Liability (Errors and Omissions) Insurance as appropriate to the Contractor's profession.

| Type of Coverage   | Minimum Requirement |
|--|---------------------|
| <b>Commercial General Liability Insurance, Including</b> Bodily Injury, Personal Injury, Property Damage, Advertising Injury, and Medical Payments |                     |
| Each Occurrence  | \$ 1,000,000        |
| General Aggregate  | \$ 1,000,000        |
| <b>Automobile Liability Insurance - Any Auto</b>   |                     |
| Each Occurrence  | \$ 1,000,000        |
| General Aggregate  | \$ 1,000,000        |
| <b>Professional Liability</b>  | \$ 1,000,000        |
| <b>Workers Compensation</b>  | Statutory Limits    |
| <b>Employer's Liability</b>  | \$ 1,000,000        |

13.2. **Proof of Carriage of Insurance.** The Contractor shall not commence performing any portion of the Services until all required insurance has been obtained and certificates indicating the required coverage's have been delivered in duplicate to the District and approved by the District. Certificates and insurance policies shall include the following:

13.2.1. A clause stating: "This policy shall not be canceled or reduced in required limits of liability or amounts of insurance until notice has been mailed to the District, stating date of cancellation or reduction. Date of cancellation or reduction shall not be less than thirty (30) days after date of mailing notice."

13.2.2. Language stating in particular those insured, extent of insurance, location and operation to which insurance applies, expiration date, to whom cancellation and reduction notice will be sent, and length of notice period.

13.2.3. An endorsement stating that the District and the State and their representatives, employees, trustees, officers, and volunteers are named additional insureds under all policies except Workers' Compensation Insurance, Professional Liability, and Employers' Liability Insurance. An endorsement shall also state that Contractor's insurance policies shall be primary to any insurance or self-insurance maintained by District.

13.2.4. All policies shall be written on an occurrence form, except for Professional Liability which shall be on a claims-made form.

13.3. **Acceptability of Insurers.** Insurance is to be placed with insurers with a current A.M. Best's rating of no less than A: VII, unless otherwise acceptable to the District.

- 14. Assignment.** The obligations of the Contractor pursuant to this Agreement shall not be assigned by the Contractor without District's written consent.
- 15. Compliance with Laws.** Contractor shall observe and comply with all rules and regulations of the governing board of the District and all federal, state, and local laws, ordinances and regulations. Contractor shall give all notices required by any law, ordinance, rule and regulation bearing on conduct of the Work as indicated or specified. If Contractor observes that any of the Work required by this Contract is at variance with any such laws, ordinance, rules or regulations, Contractor shall notify the District, in writing, and, at the sole option of the District, any necessary changes to the scope of the Work shall be made and this Contract shall be appropriately amended in writing, or this Contract shall be terminated effective upon Contractor's receipt of a written termination notice from the District. If Contractor performs any work that is in violation of any laws, ordinances, rules or regulations, without first notifying the District of the violation, Contractor shall bear all costs arising therefrom.
- 16. Permits/Licenses.** Contractor and all Contractor's employees or agents shall secure and maintain in force such permits and licenses as are required by law in connection with the furnishing of services pursuant to this agreement.
- 17. Safety and Security.** Contractor is responsible for maintaining safety in the performance of this Agreement. Contractor shall be responsible to ascertain from the District the rules and regulations pertaining to safety, security, and driving on school grounds, particularly when children are present.
- 18. Employment with Public Agency.** Contractor, if an employee of another public agency, agrees that Contractor will not receive salary or remuneration, other than vacation pay, as an employee of another public agency for the actual time in which services are actually being performed pursuant to this Agreement.
- 19. Anti-Discrimination.** It is the policy of the District that in connection with all work performed under Contracts there be no discrimination against any employee engaged in the work because of race, color, ancestry, national origin, religious creed, physical disability, medical condition, marital status, sexual orientation, gender, or age and therefore the Contractor agrees to comply with applicable Federal and California laws including, but not limited to the California Fair Employment and Housing Act beginning with Government Code Section 12900 and Labor Code Section 1735. In addition, the Contractor agrees to require like compliance by all its subcontractor(s).
- 20. Fingerprinting of Employees.** ~~The Contractor shall comply with the provisions of Education Code section 45125.1 regarding the submission of employee fingerprints to the California Department of Justice and the completion of criminal background investigations of its employees. The Contractor shall not permit any employee to have any contact with District pupils until such time as the Contractor has verified in writing to the governing board of the District that the employee has not been convicted of a felony, as defined in Education Code section 45122.1. The Contractor's responsibility shall extend to all employees, subcontractors, agents, and employees or agents of subcontractors regardless of whether these individuals are paid or unpaid, concurrently employed by the District, or acting as independent contractors of the Contractor. Verification of compliance with this section shall be provided in writing to the District prior to each individual's commencement of employment or performing any portion of the Services and prior to permitting contact with any student.~~
- 21. Audit.** Contractor shall establish and maintain books, records, and systems of account, in accordance with generally accepted accounting principles, reflecting all business operations of Contractor transacted under this Agreement. Contractor shall retain these books, records, and systems of account during the Term of this Agreement and for three (3) years thereafter. Contractor shall permit the District, its agent, other representatives, or an independent auditor

to audit; examine, and make excerpts, copies, and transcripts from all books and records, and to make audit(s) of all billing statements, invoices, records, and other data related to the Services covered by this Agreement. Audit(s) may be performed at any time, provided that the District shall give reasonable prior written notice to Contractor and shall conduct audit(s) during Contractor's normal business hours, unless Contractor otherwise consents.

**22. District's Evaluation of Contractor and Contractor's Employees and/or Subcontractors.** The District may evaluate the Contractor in any manner which is permissible under the law. The District's evaluation may include, without limitation:

22.1. Requesting that District employee(s) evaluate the Contractor and the Contractor's employees and subcontractors and each of their performance.

22.2. Announced and unannounced observance of Contractor, Contractor's employee(s), and/or subcontractor(s).

**23. Limitation of District Liability.** Other than as provided in this Agreement, District's financial obligations under this Agreement shall be limited to the payment of the compensation provided in this Agreement. Notwithstanding any other provision of this Agreement, in no event shall District be liable, regardless of whether any claim is based on contract or tort, for any special, consequential, indirect or incidental damages, including, but not limited to, lost profits or revenue, arising out of or in connection with this Agreement for the services performed in connection with this Agreement.

23.1 Limitation of Contractor Liability. The maximum aggregate liability of Contractor in contract, tort (including negligence and breach of statutory duty) or otherwise for any breach of the Agreement or any matter arising out of or in connection with the Work to be provided in accordance with this Agreement shall be the amount of fees due by District to Contractor under this Agreement except that such limitation shall not apply in the event of a finding of gross negligence or willful misconduct on the part of Contractor by a court of competent jurisdiction. Notwithstanding any other provision of this Agreement, in no event shall Contractor be liable, regardless of whether any claim is based on contract or tort, for any special, consequential, indirect or incidental damages, including, but not limited to, lost profits or revenue, arising out of or in connection with this Agreement for the services performed in connection with this Agreement.

**24. Disputes.** In the event of a dispute between the parties as to performance of Work, Agreement interpretation, or payment, the Parties shall attempt to resolve the dispute by negotiation and/or mediation, if agreed to by the Parties. Pending resolution of the dispute, Contractor shall neither rescind the Agreement nor stop Work.

**25. Confidentiality.** The Contractor and all Contractor's agents, personnel, employee(s), and/or subcontractor(s) shall maintain the confidentiality of all information received in the course of performing the Services. This requirement to maintain confidentiality shall extend beyond the termination of this Agreement for a period of five years.

**26. Notice.** Any notice required or permitted to be given under this Agreement shall be deemed to have been given, served, and received if given in writing and either personally delivered or deposited in the United States mail, registered or certified mail, postage prepaid, return receipt required, or sent by overnight delivery service, or facsimile transmission, addressed as follows:

**Oakland Unified School District**

955 High Street  
Oakland, CA 94601

**Attn: Tadashi Nakadegawa**

Tel: 510-535-7038

**Contractor**

Integral Group, Inc.

427 13<sup>th</sup> Street

Oakland, CA 94612

**Attn: William Casper-Ortiz**

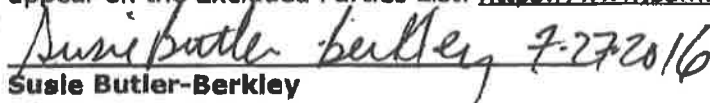


Any notice personally given or sent by facsimile transmission shall be effective upon receipt. Any notice sent by overnight delivery service shall be effective the business day next following delivery thereof to the overnight delivery service. Any notice given by mail shall be effective three (3) days after deposit in the United States mail.

- 27. Local, Small Local and Small Local Resident Business Enterprise Program (L/SL/SLRBE Program).** Contractor shall comply with the requirements of the District's L/SL/SLRBE Program, as applicable, which may require a fifty percent (50%) mandatory minimum local participation requirement in the performance of this Agreement. A copy of the District's L/SL/SLRBE Program can be obtained on the District website, at [www.ousd.org](http://www.ousd.org), under the Facilities Planning & Management Department drop down menu, Bids and Requests for Proposals.
- 28. Integration/Entire Agreement of Parties.** This Agreement constitutes the entire agreement between the Parties and supersedes all prior discussions, negotiations, and agreements, whether oral or written. This Agreement may be amended or modified only by a written instrument executed by both Parties.
- 29. California Law.** This Agreement shall be governed by and the rights, duties and obligations of the Parties shall be determined and enforced in accordance with the laws of the State of California. The Parties further agree that any action or proceeding brought to enforce the terms and conditions of this Agreement shall be maintained in the county in which the District's administration offices are located.
- 30. Waiver.** The waiver by either party of any breach of any term, covenant, or condition herein contained shall not be deemed to be a waiver of such term, covenant, condition, or any subsequent breach of the same or any other term, covenant, or condition herein contained.
- 31. Severability.** If any term, condition or provision of this Agreement is held by a court of competent jurisdiction to be invalid, void or unenforceable, the remaining provisions will nevertheless continue in full force and effect, and shall not be affected, impaired or invalidated in any way.
- 32. Incorporation of Recitals and Exhibits.** The Recitals and each exhibit attached hereto are hereby incorporated herein by reference.

**Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion:**

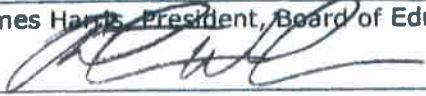
The District certifies to the best of its knowledge and belief, that it and its officials: Are not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any Federal department or agency according to Federal Acquisition Regulation Subpart 9.4, and by signing this contract, certifies that this vendor does not appear on the Excluded Parties List. <https://www.sam.gov/portal/public/SAM>

  
Susie Butler-Berkley  
Contract Analyst

ACCEPTED AND AGREED on the date indicated below:

**OAKLAND UNIFIED SCHOOL DISTRICT**

  
\_\_\_\_\_  
James Harris, President, Board of Education 8/25/16  
Date

  
\_\_\_\_\_  
Antwan Wilson, Superintendent & Secretary, Board of Education 8/25/16  
Date

  
\_\_\_\_\_  
Joe Dominguez, Deputy Chief, Facilities Planning and Management Date

**CONTRACTOR**

  
\_\_\_\_\_  
By: ANDREA L. TRABER 7/22/16  
Date  
Its: PRINCIPAL

**APPROVED AS TO FORM:**

  
\_\_\_\_\_  
OUSD Facilities Legal Counsel 7/29  
Date

**Information regarding Contractor:**

Contractor: INTEGRAL GROUP, INC EIN 94-3391867  
 License No.: 1844792 (OK TALKER) Employer Identification and/or Social Security Number  
 Address: 427 13th St  
OAKLAND CA 94612  
 Telephone: 510.663.2070  
 Facsimile: 510.663.2080  
 E-Mail: atraber@integralgroup.com  
 Type of Business Entity:  
 Individual  Sole Proprietorship  
 Partnership  Limited Partnership  
 Limited Liability Company  
 Corporation, State: CA  
 Other: \_\_\_\_\_

**NOTE: Federal Code of Regulations sections 6041 and 6209 require non-corporate recipients of \$600.00 or more to furnish their taxpayer identification number to the payer. The regulations also provide that a penalty may be imposed for failure to furnish the taxpayer identification number. In order to comply with these regulations, the District requires your federal tax identification number or Social Security number, whichever is applicable.**

**WORKERS' COMPENSATION CERTIFICATION**

Labor Code Section 3700 In relevant part provides that every employer except the State shall secure the payment of compensation in one or more of the following ways:

- By being insured against liability to pay compensation by one or more insurers duly authorized to write compensation insurance in this State.
- By securing from the Director of Industrial Relations a certificate of consent to self-insure, which may be given upon furnishing proof satisfactory to the Director of Industrial Relations of ability to self-insure and to pay any compensation that may become due to its employees.

I am aware of the provisions of Section 3700 of the Labor Code which require every employer to be insured against liability for workers' compensation or to undertake self-insurance in accordance with the provisions of that code, and I will comply with such provisions before commencing the performance of the Work of this Contract.

Date:

Proper Name of Contractor:

Signature:

Print Name:

Title:

7/22/16  
~~INTEGRAL TRAPER~~ INTEGRAL GROUP  
Andrea Traber  
ANDREA TRABER  
PRINCIPAL

(In accordance with Article 5 – commencing at Section 1860, Chapter 1, part 7, Division 2 of the Labor Code, the above certificate must be signed and filed with the District prior to performing any Work under this Contract.)

**EXHIBIT A**  
**Scope of Services**

Proposal to be attached.

---



6/23/2016

Dear Kenya Chatman:

This letter is to confirm our team's Local Business Enterprise (LBE) certification with the city of Oakland. Per our earlier discussions OUSD would like to proceed with the Base Services and Add Alternate 1 sections listed on Integral Group's Proposal for Commissioning Services for Fremont High School. The fee breakdown listed on the proposal is as follows:

- Base Services (Integral Group) – \$143,700
- Add Alternate for Envelope Commissioning (sub-contractor) – \$106,000
- Reimbursable Expenses – \$3,000
- Total fee: \$252,700

12,000 Contingency

\$264,700

Integral Group is currently certified as a local business enterprise by the city of Oakland with a LBE number 5628. However our proposed envelope commissioning sub-contractor does not currently hold a LBE certification with the city of Oakland. This results in the following LBE percentage breakdown:

- Integral Group (LBE # 5628) – \$146,700/\$252,700 = 58.05%
- Sub-contractor (Not an LBE) – \$106,000/\$252,700 = 41.98%

Hence the proposed commissioning team LBE percentage is above the 50% threshold required by the city for contracts above \$100,000.

Please feel free to contact us with any questions or concerns.

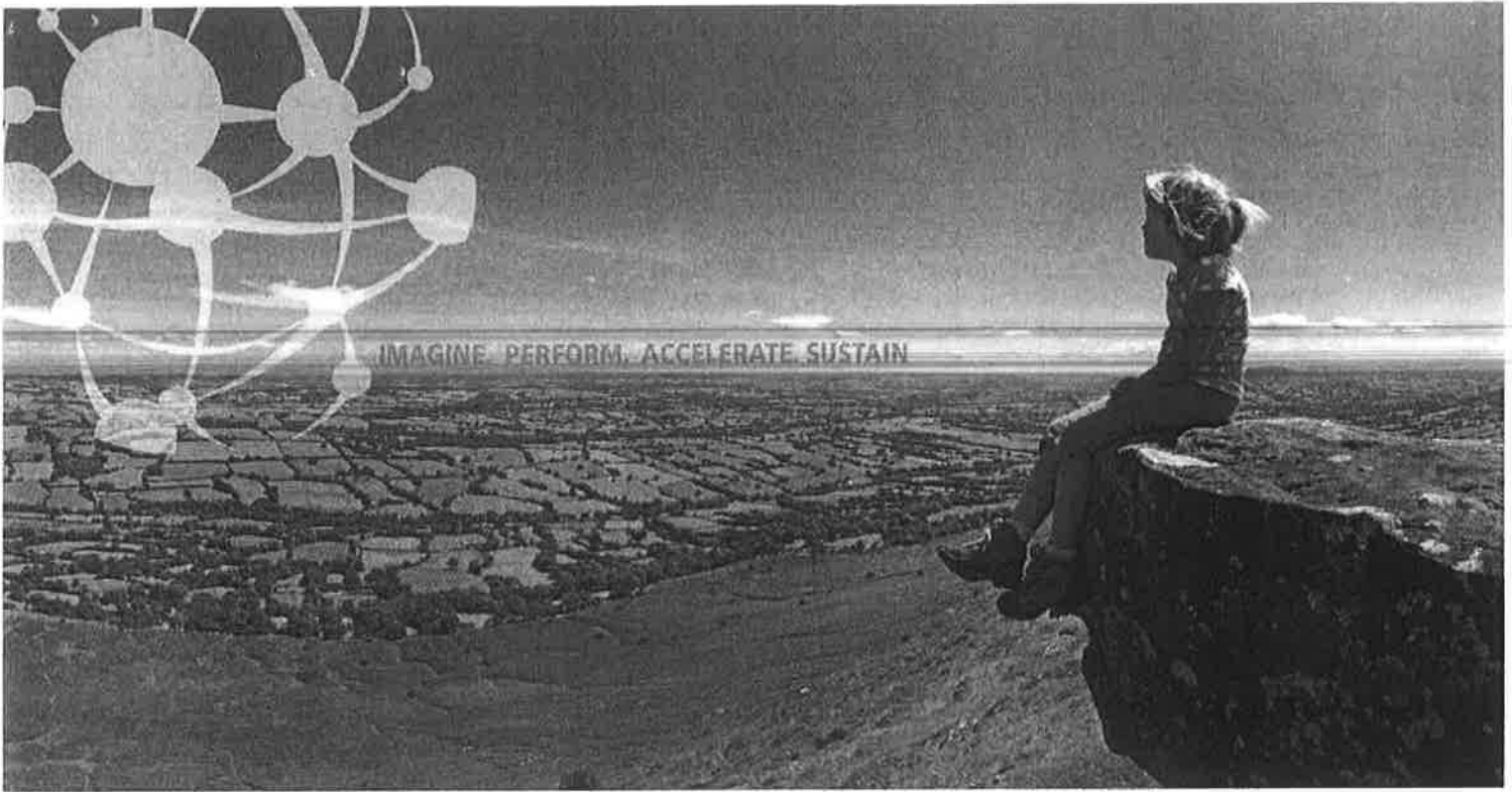
Sincerely,

William Casper-Ortiz MSME | Associate  
Integral Group | 427 13th Street | Oakland CA USA 94612  
T 510.663.2070 x 2009 | D 510.457.0109 | C 510.393.1986  
wcasperortiz@integralgroup.com

REF 201A

EXHIBIT A





**Proposal for Commissioning Services  
Fremont High School**

**Prepared for:**  
**Tadashi Nakadegawa**  
Oakland Unified School District

**Prepared by:**  
**INTEGRAL GROUP, INC.**  
427 13th Street  
Oakland, CA 94612

William Casper-Ortiz, Associate  
510 663.2070 ext 2009  
wcasperortiz@integralgroup.com

**JUNE 23, 2016**

#### **Title 24 – 2013 Design Review Checklist/Kick-off Meeting**

As part of the commissioning requirements set forth in the new Title 24 2013 Energy Standards, IG will conduct the Title 24-2013 design review and corresponding design review kick off meeting (to be held in Schematic Design). This review is guided by T24 Cx compliance forms and it is aimed at verifying the inclusion of code mandated energy efficiency measures into the construction documents. The Owner and design team will receive completed checklists for incorporation into the construction documents.

#### **Commissioning Specifications**

Integral Group will provide commissioning specifications to be included into the contract documents. The following specification sections will be provided for inclusion by the Design Team:

- 019113 – General Commissioning Requirements
- 220800 – Plumbing Systems Commissioning
- 230800 – Mechanical Systems Commissioning
- 260800 – Electrical Systems Commissioning

IG will also review the specifications to ensure proper commissioning language is in the project documents, as necessary. IG will ensure that systems manual items are included in the commissioning specifications.

#### **Commissioning Plan**

Prior to permit issuance, Integral Group will develop a commissioning plans to document how the project will be commissioned and will be provided during the design and construction phases of the building project to guide the project team. The Commissioning Plan will include the following:

- General project information
- Commissioning team information
- Commissioning goals
- Commissioning process activities, schedules and responsibilities
- Systems to be commissioned
- Plans to test systems and components and shall include:
  - Equipment and systems to be tested, including the extent of tests
  - Functions to be tested
- Conditions under which the test shall be performed
- Measurable criteria for acceptable performance

#### **Submittal Review**

Integral Group will review contractor submittals applicable to systems being commissioned for compliance with the OPR; BOD and contract documents. This review shall be concurrent with A/E reviews and submitted to the design team and Owner for inclusion back to the installing sub-contractor.

Applicable RFIs and COs will be reviewed as it impacts the Commissioned systems as necessary.

#### **Pre-Functional Test/Checklists – Installation Verification**

IG will prepare a pre-functional test/checklist for each commissioned piece of equipment for the use of the installed sub-contractor. This will ensure that all equipment is ready for functional testing (see next item) to begin. These phase will require TAB reports, sub-contractor start-up checklists, controls point-to-point checklists, chlorination reports, etc. The contractor is required to complete these forms and submit them to IG for review prior to functional testing.

IG will also conduct site installation visits during construction to ensure proper installation of the commissioned systems. The visits are to coincide with construction progress meetings. Site reports will be issued to the team. Refer to the meeting section for proposed number of site visits/meetings.

IG will not monitor T24 acceptance tests which are to be performed by the others. However, completed T24 acceptance tests will be required to be submitted as a complete pre-functional test package prior to commencement of the functional testing phase.

IG may witness select start-up and TAB activities to ensure proper procedures. Exact systems and activities to be witnessed shall be documented through the Commissioning plan and communicated during the construction kick off meeting.

### **10 Month Warranty Review**

IG will review the operation of the building during the warranty period; usually 10 months into occupancy. IG will review the following items:

- Interview facilities staff for known issues
- Statically inspect the commissioned systems for issues
- Selectively test building systems to ensure proper operation and/or overrides are not present affecting the operation and energy efficiency of the system. This may be done via BMS trend reviews. It is assumed that facilities personnel and/or contractors will provide the trends.

IG will provide a list of issues to be corrected by the Contractor. IG has included a visit onsite for this task.

### **Plan Check and CHPS Forms Submission**

IG will prepare the appropriate commissioning related forms for plan check and CHPS (EE 3.0 and EE 3.1) submission. We will also provide written comments and responses to all AHJ and CHPS comments.

### **Meetings**

The following meetings are included in the base scope of work:

- One - In-person T24 design review CX kickoff meeting
- Two – In-Person Peer Design Review Meetings with Design Team (including Back check)
- One – In-Person Controls Integration Meeting with District and Design Team
- One – In-Person Pre-bid meeting
- One - In-person construction CX kickoff meeting
- Twenty – Progress meetings onsite while conducting site installation walks and construction progress monitoring

The above meetings are in addition to the onsite functional testing activities.

### **ADD ALTERNATE 1 - CHPS (EE 3.2) ENVELOPE COMMISSIONING**

This additional scope will incorporate the CHPS EE 3.2 envelope commissioning requirements. This will be conducted by a third party sub-contractor to Integral Group. We will manage and supervise our sub-contractor at cost. The proposed sub-contractor is RDH Consulting. They have offices in Oakland, CA.

It is expected that the envelope commissioning sub-contractor will attend some of the meetings for the base scope of work, as necessary, for integration into the overall commissioning process. However the envelope sub-contractor will not be expected to attend all meetings and may host separate envelope commissioning meetings.

### **ADD ALTERNATE 2 – FIRE/LIFE SAFETY SYSTEMS**

Integral group will include the commissioning of the fire alarm and sprinkler systems. We will interface with the IOR to test the systems prior to the local AHJ testing the systems to ensure a smooth inspection process for code approval.

It is not expected that additional meetings will be required, rather covered during regularly scheduled meetings already included in the base scope of work.

### **ADD ALTERNATE 3 – ADDITIONAL SYSTEM COMMISSIONING**

Per the RFP there additional systems that would like to be commissioned that are not part of the base T24-2013 and CHPS requirements. Therefore, we have provided an itemized list of systems in the fee section to add individual systems to IG's scope of commissioning. These additional systems will be monitored and witnessed only by the installing sub-contractors testing and commissioning process. IG will collect all documentation and track any issues as a result of the testing of these additional systems.

It is not expected that additional meetings will be required, rather covered during regularly scheduled meetings already included in the base scope of work.

## APPROVAL

Please indicate approval by signing below and returning a copy to us. We look forward to the opportunity of working with you to make this a successful project.

---

**Print Name**  
Tadashi Nakadegawa  
OUSD

**Title**  
**Signature**  
Tadashi Nakadegawa  
OUSD

**Date**

**FINGERPRINTING/CRIMINAL BACKGROUND INVESTIGATION CERTIFICATION**

One of the three boxes below **must** be checked, with the corresponding certification provided, and this form attached to the Independent Consultant Agreement for Independent Contractor Agreement- Special Services ("Agreement"):

**[TO BE COMPLETED BY AUTHORIZED DISTRICT EMPLOYEE ONLY.]** Consultant's employees will have only limited contact, if any, with District pupils and the District will take appropriate steps to protect the safety of any pupils that may come in contact with Consultant's employees so that the fingerprinting and criminal background investigation requirements of Education Code section 45125.1 shall not apply to Consultant for the services under this Agreement. As an authorized District official, I am familiar with the facts herein certified, and am authorized to execute this certificate on behalf of the District. (Education Code § 45125.1 (c))

Date: \_\_\_\_\_  
District Representative's Name and Title: \_\_\_\_\_  
Signature: \_\_\_\_\_

The fingerprinting and criminal background investigation requirements of Education Code section 45125.1 apply to Consultant's services under this Agreement and Consultant certifies its compliance with these provisions as follows: *"Consultant certifies that the Consultant has complied with the fingerprinting and criminal background investigation requirements of Education Code section 45125.1 with respect to all Consultant's employees, subcontractors, agents, and subcontractors' employees or agents ("Employees") regardless of whether those Employees are paid or unpaid, concurrently employed by the District, or acting as independent contractors of the Consultant, who may have contact with District pupils in the course of providing services pursuant to the Agreement, and the California Department of Justice has determined that none of those Employees has been convicted of a felony, as that term is defined in Education Code section 45122. 1. A complete and accurate list of all Employees who may come in contact with District pupils during the course and scope of the Agreement is attached hereto."*

Consultant's services under this Agreement shall be limited to the construction, reconstruction, rehabilitation, or repair of a school facility and although all Employees will have contact, other than limited contact, with District pupils, pursuant to Education Code section 45125.2 District shall ensure the safety of the pupils by at least one of the following as marked:

\_\_\_\_\_ The Installation of a physical barrier at the worksite to limit contact with pupils.

\_\_\_\_\_ Continual supervision and monitoring of all Consultant's on-site employees of Consultant by an employee of Consultant, \_\_\_\_\_, whom the Department of Justice has ascertained has not been convicted of a violent or serious felony.

\_\_\_\_\_ Surveillance of Employees by District personnel. **[TO BE COMPLETED BY AUTHORIZED DISTRICT EMPLOYEE ONLY.]**

Date: \_\_\_\_\_  
District Representative's Name and Title: \_\_\_\_\_  
Signature: \_\_\_\_\_

**Megan's Law (Sex Offenders)**. I have verified and will continue to verify that the employees of Contractor that will be on the Project site and the employees of the Subcontractor(s) that will be on the Project site are **not** listed on California's "Megan's Law" Website (<http://www.meganslaw.ca.gov/>).

**[MUST BE COMPLETED BY CONSULTANT'S AUTHORIZED REPRESENTATIVE.]** I am a representative of the Consultant entering into this Agreement with the District and I am familiar with the facts herein certified, and am authorized and qualified to execute this certificate on behalf of Consultant.





# CERTIFICATE OF LIABILITY INSURANCE

7/1/2017

DATE (MM/DD/YYYY)

7/27/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|   |   |                |
|---|---|----------------|
| PRODUCER<br>Lockton Companies<br>444 W. 47th Street, Suite 900<br>Kansas City MO 64112-1906<br>(816) 960-9000 | CONTACT NAME:   |                |
|   | PHONE (A/C, No, Ext):                                 | FAX (A/C, No): |
| INSURED<br>1353599 INTEGRAL GROUP, INC.<br>427 13TH STREET<br>OAKLAND, CA 94612                               | E-MAIL ADDRESS:                                       |                |
|   | INSURER(S) AFFORDING COVERAGE                         |                |
|   | INSURER A : Travelers Property Casualty Co of America | NAIC # 25674   |
|   | INSURER B : The Travelers Indemnity Company           | 25658          |
|   | INSURER C : Continental Casualty Company              | 20443          |
|   | INSURER D : The Travelers Indemnity Co of America     | 25666          |
|   | INSURER E :   |                |
|   | INSURER F :   |                |

COVERAGES INTGR05 CERTIFICATE NUMBER: 14176506 REVISION NUMBER: XXXXXXX

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | ADDL INSD | SUBR WVD | POLICY NUMBER  | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|--|-----------|----------|----------------|-------------------------|-------------------------|---|
| A        | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY   | Y         | N        | 6808B769853    | 7/1/2016                | 7/1/2017                | EACH OCCURRENCE \$ 1,000,000  |
| B        | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR   |           |          | 6808B772071    | 7/1/2016                | 7/1/2017                | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000<br>MED EXP (Any one person) \$ 10,000<br>PERSONAL & ADV INJURY \$ 1,000,000<br>GENERAL AGGREGATE \$ 2,000,000<br>PRODUCTS - COMP/OP AGG \$ 2,000,000<br>\$ |
|          | GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC<br>OTHER:   |           |          |                |                         |                         |   |
| D        | AUTOMOBILE LIABILITY   | Y         | N        | BA-8B772869    | 7/1/2016                | 7/1/2017                | COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000<br>BODILY INJURY (Per person) \$ XXXXXXX<br>BODILY INJURY (Per accident) \$ XXXXXXX<br>PROPERTY DAMAGE (Per accident) \$ XXXXXXX<br>\$ XXXXXXX                   |
|          | <input checked="" type="checkbox"/> ANY AUTO<br><input type="checkbox"/> OWNED AUTOS ONLY<br><input checked="" type="checkbox"/> HIRED AUTOS ONLY                                      |           |          |                |                         |                         |   |
|          | <input type="checkbox"/> SCHEDULED AUTOS<br><input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY   |           |          |                |                         |                         |   |
|          | UMBRELLA LIAB <input type="checkbox"/> OCCUR<br>EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE   |           |          | NOT APPLICABLE |                         |                         | EACH OCCURRENCE \$ XXXXXXX<br>AGGREGATE \$ XXXXXXX<br>\$ XXXXXXX  |
|          | DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>   |           |          |                |                         |                         |   |
| A        | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY<br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)<br>If yes, describe under DESCRIPTION OF OPERATIONS below | Y/N       | N/A      | UB3915T396     | 7/1/2016                | 7/1/2017                | <input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER<br>E.L. EACH ACCIDENT \$ 1,000,000<br>E.L. DISEASE - EA EMPLOYEE \$ 1,000,000<br>E.L. DISEASE - POLICY LIMIT \$ 1,000,000         |
| C        | PROFESSIONAL LIABILITY   | N         | N        | AEH288326476   | 7/1/2016                | 7/1/2017                | \$1,000,000 PER CLAIM<br>\$1,000,000 AGGREGATE  |

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
RE: THE DISTRICT AND THE STATE AND THEIR REPRESENTATIVES, EMPLOYEES, TRUSTEES, OFFICERS, AND VOLUNTEERS ARE ADDITIONAL INSURED AS RESPECTS GENERAL LIABILITY AND AUTO LIABILITY, AND THESE COVERAGES ARE PRIMARY, AS REQUIRED BY WRITTEN CONTRACT.

## CERTIFICATE HOLDER

14176506  
OAKLAND UNIFIED SCHOOL DISTRICT

## CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

*Joseph M. Amello*

© 1988-2015 ACORD CORPORATION. All rights reserved.



# INDEPENDENT CONSULTANT AGREEMENT FOR PROFESSIONAL SERVICES ROUTING FORM

| Project Information  |   |             |     |
|--|---|-------------|-----|
| <b>Project Name</b>  | Fremont High School New Construction  | <b>Site</b> | 302 |
| Basic Directions   |   |             |     |
| Services cannot be provided until the contract is fully approved and a Purchase Order has been issued. |   |             |     |
| <b>Attachment Checklist</b>  | <input type="checkbox"/> Proof of general liability insurance, including certificates and endorsements, if contract is over \$15,000<br><input type="checkbox"/> Workers compensation insurance certification, unless vendor is a sole provider |             |     |

| Contractor Information    |   |                                    |   |
|---------------------------|---|------------------------------------|---|
| <b>Contractor Name</b>    | Integral Group, Inc.  | <b>Agency's Contact</b>            | William Casper-Ortiz  |
| <b>OUSD Vendor ID #</b>   | V068994   | <b>Title</b>                       | Director  |
| <b>Street Address</b>     | 427 13 <sup>th</sup> Street   | <b>City</b>                        | Oakland   |
| <b>Telephone</b>          | 510-663-2070  | <b>State</b>                       | CA  |
| <b>Contractor History</b> | Previously been an OUSD contractor? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | <b>Policy Expires</b>              | 7-1-2017  |
| <b>OUSD Project #</b>     | 13158   | <b>Worked as an OUSD employee?</b> | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

| Term                        |                              |   |            |
|-----------------------------|------------------------------|---|------------|
| <b>Date Work Will Begin</b> | <del>8-24-2016</del> 8/24/16 | <b>Date Work Will End By</b><br>(not more than 5 years from start date) | 12-30-2020 |

| Compensation                         |    |                                     |              |
|--------------------------------------|----|-------------------------------------|--------------|
| <b>Total Contract Amount</b>         | \$ | <b>Total Contract Not To Exceed</b> | \$264,700.00 |
| <b>Pay Rate Per Hour</b> (if Hourly) | \$ | <b>If Amendment, Changed Amount</b> | \$           |
| <b>Other Expenses</b>                |    | <b>Requisition Number</b>           |              |

| Budget Information  |                    |            |             |              |
|---|--------------------|------------|-------------|--------------|
| <i>If you are planning to multi-fund a contract using LEP funds, please contact the State and Federal Office before completing requisition.</i> |                    |            |             |              |
| Resource #  | Funding Source     | Org Key    | Object Code | Amount       |
| 9360  | Fund 21, Measure J | 3029905812 | 6215        | \$264,700.00 |

| Approval and Routing (in order of approval steps)   |  |                  |                      |                         |
|---|--|------------------|----------------------|-------------------------|
| Services cannot be provided before the contract is fully approved and a Purchase Order is issued. Signing this document affirms that to your knowledge services were not provided before a PO was issued. |  |                  |                      |                         |
|   | <b>Division Head</b>   | <b>Phone</b>     | 510-535-7038         | <b>Fax</b> 510-535-7082 |
| 1.  | <b>Director, Facilities Planning and Management</b>                      | <b>Signature</b> | <b>Date Approved</b> | 8/4/16                  |
| 2.  | <b>General Counsel, Department of Facilities Planning and Management</b> | <b>Signature</b> | <b>Date Approved</b> | 8-4-16                  |
| 3.  | <b>Deputy Chief, Facilities Planning and Management</b>                  | <b>Signature</b> | <b>Date Approved</b> |                         |
| 4.  | <b>Senior Business Officer</b>   | <b>Signature</b> | <b>Date Approved</b> |                         |
| 5.  | <b>President, Board of Education</b>                                     | <b>Signature</b> | <b>Date Approved</b> |                         |