

FOURTH AMENDMENT TO PROFESSIONAL SERVICES CONTRACT

KC-349-22-D

This Fourth Amendment to Professional Services Contract is entered into between Kitsap County (the "County"), a municipal corporation, and Rice Fergus Miller, Inc. (the "Contractor"), a Washington for-profit corporation.

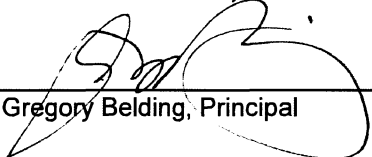
WHEREAS, the parties entered into a Professional Services Contract (the "Contract") effective May 10, 2022 and designated by the County as KC-349-22, for certain services; and

WHEREAS, the parties now wish to amend the Contract to extend the contract term;

NOW, THEREFORE, THE PARTIES AGREE THAT THE CONTRACT IS AMENDED AS FOLLOWS:


1. The above recitals are incorporated herein as if fully set forth.
2. The Contract is amended to extend the contract term from 12/31/2023 to 12/31/2024 for a new contract term of May 10, 2022 to December 31, 2024.
3. Except as modified herein, the provisions of the Contract remain in effect.
4. This contract amendment is effective upon mutual execution.

RICE FERGUS MILLER, INC.

By  _____
Gregory Belding, Principal

Date: 4/3/24

KITSAP COUNTY

By  for Doug Washburn _____
Doug Washburn, Human Services Director

Date: April 3, 2024



RICEINC-01

COMFO1

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
2/12/2024

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).

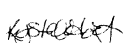
PRODUCER Fournier 5712 Orchard St. W. University Place, WA 98467	CONTACT NAME: Krystal Edwards
	PHONE (A/C, No, Ext): (253) 330-8955 FAX (A/C, No): (253) 473-5363 E-MAIL ADDRESS: krystale@fournierinsurance.com
INSURED Rice-Fergus-Miller, Inc. 275 5th Street, Suite 100 Bremerton, WA 98337	INSURER(S) AFFORDING COVERAGE NAIC #
	INSURER A : American Fire and Casualty Company 24066
	INSURER B : Ohio Security Insurance Company 24082
	INSURER C : The Ohio Casualty Insurance Company 24074
	INSURER D : INSURER E : INSURER F :

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

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 SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		BZA55354881	3/1/2024	3/1/2025	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000 \$
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY		BAS55354881	3/1/2024	3/1/2025	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		USO55354881	3/1/2024	3/1/2025	EACH OCCURRENCE \$ 4,000,000 AGGREGATE \$ \$ 4,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N N/A If yes, describe under DESCRIPTION OF OPERATIONS below					PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
RE: Kitsap County Temporary Housing Facility.

CERTIFICATE HOLDER Kitsap County Department of Human Services Care of Housing and Homelessness Division 614 Division Street MS-23 Port Orchard, WA 98366	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 

Debarred Contractors List

A debarred contractor may not bid on, or have a bid considered on, any public works contract. You can search and filter this list using the options presented below.

Company Name: Principal:
From: To:
WA UBI Number: RCW:
License Number: Penalty Due: Wage Due:

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Company Name	UBI	License	Principals	Status	RCW	Debar Begins	Debar Ends	Penalty Due	Wages Due
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AS OF 10/02/2023

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
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e.g. 1606N020Q02

debarment 

Federal Organizations

Rice Fergus Miller   

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