

SECOND AMENDMENT TO AGREEMENT FOR MAINTENANCE SERVICES

THIS SECOND AMENDMENT TO AGREEMENT FOR MAINTENANCE SERVICES ("Amendment") effective as of March 22, 2021 is entered into by the CITY OF BEAUMONT, a municipal corporation ("CITY"), and New Venture of San Bernardino, LLC, a California limited liability company dba Jan-Pro Cleaning Systems of Ontario ("CONTRACTOR").

RECITALS:

- A. CITY and CONTRACTOR entered into that certain Agreement for Maintenance Services dated October 1, 2020.
- B. CITY and CONTRACTOR entered into an Amendment for that certain Agreement for Maintenance Services dated December 1, 2020.
- B. CITY and CONTRACTOR wish to extend the term of the Agreement and add the Community Recreation Center premises scope of work.

NOW THEREFORE, THE PARTIES AGREE TO AMEND SECTIONS 1 AND 3 OF THE AGREEMENT TO READ AS FOLLOWS:

1. TERM OF AGREEMENT

This Agreement is effective as of the date first above written and shall continue until completion of the services ("Services") provided for in the Proposal attached to the original Agreement and as attached hereto as Exhibit "A" (collectively the "Proposal"). Contractor shall commence the Services on or before March 22, 2021 and shall complete the Services no later than June 30, 2021. Notwithstanding the foregoing or anything to the contrary in the Proposal, City may terminate this Agreement upon written notice to Contractor, provided it pays Contractor for all services provided prior to termination.

3. COMPENSATION

3.01 CONTRACTOR shall be paid at the rates set forth in the Proposal. Notwithstanding anything in this Agreement to the contrary, total fees and charges paid by CITY to CONTRACTOR for the completion of the Services under this Agreement shall not exceed seventy-three thousand nine-hundred twenty-two and twenty-six cents (\$73,922.26).

The parties have caused this Amendment to be executed by their duly authorized representatives as of the dates set forth below their respective signatures. The Recitals to this Amendment are made a part of this Amendment by this reference. Terms purportedly binding on the City in the Proposal that are in addition to or that conflict with the terms of the Agreement as amended by this Amendment are not binding on the City.

CITY:

CITY OF BEAUMONT

By: 

Todd Parton, City Manager

CONTRACTOR:

JAN-PRO OF ONTARIO

By: 

Print Name: Patricia Gibson

Title: General Manager

4/17/2021

EXHIBIT "A"
(ATTACH PROPOSAL FOR CHATIGNY COMMUNITY RECREATION CENTER PREMISES)

PROPOSAL AGREEMENT

CLIENT: Beaumont Community Recreation Center
CLEANING LOCATION: 1310 Oak Valley Pkwy
 Beaumont, CA 92223
DESCRIPTION OF CLEANABLE AREA: See attached Scope of Work
START DATE:

	PRICE PER MONTH*
After Business Hours	
	\$2490.00
Vaccine Clinic 5X per week Mon-Friday \$2490.00	
Gym, gym area restrooms, stage, office by stage, front lobby and lobby restrooms	

	PRICE PER SERVICE
Deep Cleaning of Entire Building	\$2800.00
Special Service 1	--
Special Service 1	--
TOTAL SPECIAL SERVICES	--
TOTAL COMBINED SERVICES	--

NOTES:

- Pricing is valid for 30 days from the proposal date unless specifically extended by JAN-PRO at its sole discretion.
- Holidays (days not serviced): New Year's, MLK Day, Labor Day, Memorial Day, Thanksgiving Day, Independence Day & Christmas Day
- By executing this Agreement, the parties agree to be bound by these terms and the conditions set forth in the accompanying Janitorial Services Agreement.

CLIENT	JAN-PRO
SIGNATURE:	SIGNATURE: <i>Patricia Gibson</i>
PRINT:	PRINT: Patricia Gibson
DATE:	DATE: April 8, 2021



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

12/8/2020

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).

PRODUCER Exchange Underwriters, Inc 2111 N Franklin Dr Ste. 100 Washington PA 15301	CONTACT NAME: Diane Merrick PHONE (A/C, No, Ext): 724-745-1600 E-MAIL ADDRESS: dmerrick@exchangeunderwriters.com	FAX (A/C, No): 724-745-0224	
	INSURER(S) AFFORDING COVERAGE		
INSURED Commercial Cleaning Solutions Inc. dba Jan-Pro of Riverside Suite 205 3200 East Inland Empire Blvd. Ontario CA 91764	JANP-34	INSURER A: Western Surety Company/ INSURER B: PENN MFG ASSOCIATION INSURER C: Ohio Casualty INSURER D: American Fire & Casualty Co. INSURER E: Ohio Security INSURER F:	NAIC # 13188 12262 24074 24066 24082

COVERAGES **CERTIFICATE NUMBER: 824086108** **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	ADD'L SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
C	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> 1,000 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y Y	BKO60050816	11/1/2020	11/1/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 500,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
E	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y Y	BAS60050816	11/1/2020	11/1/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
D	<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	Y	USA60050816	11/1/2020	11/1/2021	EACH OCCURRENCE \$ 2,000,000 AGGREGATE \$ 2,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A	Y	202001 1033331	11/1/2020	11/1/2021	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A	Third Party Bond		69767974	11/1/2020	11/1/2021	Limit 50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
 Certificate holder is named as Additional Insured as respects to General Liability and Automobile Liability re: Jan-Pro billed contracts only. Participating franchisees are covered for General Liability, Workers Compensation and Bond. Insured's General Liability insurance is primary and non-contributory to Additional Insured's insurance. Waiver of subrogation in favor of Additional Insured re: General Liability, Automobile Liability, Workers Compensation and Umbrella Liability where required by written contract. Umbrella policy to follow form over the General Liability, Automobile Liability and Workers Compensation policies.

CERTIFICATE HOLDER**CANCELLATION**

City of Beaumont, CA
 550 East 6th Street
 Beaumont CA 92223

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

Susan A. Herman

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ACORD 25 (2016/03)

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THIS CERTIFICATE SUPERSEDES PREVIOUSLY ISSUED CERTIFICATE