# **AGENDA WORKSHEET**

***Submit completed worksheet to:***

*Siskiyou County Clerk, 510 N Main St, Yreka, CA 96097*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** | **[ ]**  |  | **Time Requested:** | **5 Min**  | **Meeting Date:** | **September 7, 2021** |
| ***OR*** |
| **Consent** | **[x]**  |  |
| **Contact Person/Department:** | **Elizabeth Nielsen, Deputy County Administrator** | **Phone:** | **842-8005** |
| **Address:** | **1312 Fairlane Road** |
| **Person Appearing/Title:** | **Elizabeth Nielsen, Deputy County Administrator** |
| **Subject/Summary of Issue:**  |
| Staff is requesting Board approval of a Rate Contract with United Rentals (North America) Inc., for heavy equipment rentals. Staff is also seeking Board approval to provide the County Administrator, or her designee, authority to approve departmental requests to utilize this Master Rate Contract as need arises during the terms of the Contract. The term of this Master Rate Contract is from September 1, 2021 through June 30, 2024.  |
|  |
| **NO** | [ ]  | *Describe why no financial impact:*       |
| **YES** | [x]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: |  |  |  |  |  |
| Fund:  |  |  | Description: |  | Org.: |   | Description: |        |
| Account: |  |  | Description: |  |  |
| Activity Code:  |  |  | Description: |       |  |
| Local Preference: YES [ ]  NO [ ]  |
| For Contracts – *Explain how vendor was selected:*       |
|       |
| Additional Information: All-County Thethe Fin | All-county rate contract, no accounting provided at this time. Departments will submit .  |
| requests to the CAO, or her designee, when services are needed. These requests will include all required accounting.  |
| **Recommended Motion:** |
| Staff respectfully requests approval of the Master Rate Contract with United Rentals (North America), Inc, and provides authority for the County Administrator, or her designee, to approve departmental requests to utilize the contract as needed during the term of the contract.  |
| **Reviewed as recommended by policy:** |  | ***Special Requests*:** |
| County Counsel |       |
| *Certified Minute Order(s)* |       | *Quantity:* |       |
| Auditor |       |
|  |  |
| Personnel |       | *Other:* |       |
| CAO |       |       |

***NOTE: For consideration for placement on the agenda, the original agenda worksheet and backup material must be submitted directly to the Board Clerk (after reviewing signatures have been obtained) by 12:00 p.m. on the Wednesday prior to the Board Meeting.*** Revised 1/15/15