***Submit completed worksheet to:***

*Siskiyou County Clerk, 311 Fourth St., Rm 201, Yreka, CA 96097*

# **Agenda Worksheet**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Regular** |  |  | **Time Requested:** | **5 Minutes** | **Meeting Date:** | **August 5, 2025** |
| ***OR*** |
| **Consent** | **X** |  |
| **Contact Person/Department:** | **Craig S Kay** | **Phone:** | **842-8036** |
| **Address:** | **311 Fourth Street Room 108 Yreka CA 96097** |
| **Person Appearing/Title:** | **Craig S Kay, Assessor-Recorder** |
| **Subject/Summary of Issue:** |
| Exchange Agreement between CD-Data dba ParcelQuest, a California Corporation and County of Siskiyou.This replaces the agreement executed 9/7/2021, adding the Guard Dog program, which is available to the County and Property Owners of Siskiyou County FREE of charge.The data uploaded to ParcelQuest weekly will be used to monitor activity on a property owner’s property, and once the property owner is subscribed to Guard Dog online, they will be notified of the recording activity via email. If they suspect fraudulent activity, the email will give them instructions as to who to call. |
| **Financial Impact:** |
| **NO** | [x]  | *Describe why no financial impact:* Presentation and staff direction only |
| **YES** | [ ]  | *Describe impact by indicating amount budgeted and funding source below* |
| Amount: | $0.00 |  |  |  |  |
| Fund:  | 1001 |  | Description: |  | Org.: | 207010 | Description: |  |
| Account: | 560100 |  | Description: | Prof. & Spec. |  |
| Activity Code:  | N/A |  | Description: |       |  |
| Local Preference: YES [ ]  NO [x]  |
| For Contracts – *Explain how vendor was selected:*  |
|       |
| Additional Information: |       |
|       |
| **Recommended Motion:** |
| Approve the Exchange Agreement with ParcelQuest as submitted, with the Chair authorized to sign. |
| **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 10:00 a.m. on the Monday the week prior to the Board Meeting.*** Revised 8/09/2021