

Master Design Professional Agreement Project Assignment Amendment (PAA)

The District and Design Professional will implement this Project Assignment Amendment (PAA) in accordance with the Master Design Professional Agreement dated _______ that clearly defines conditions of their Agreement, the expected performance criteria, and the anticipated deliverable work. This PAA to the Master Design Professional Agreement ("Agreement") is made and entered into by and between the Foothill-De Anza Community College District and _______ (hereinafter referred to as "Design Professional") as of the

date of District's execution below ("Effective Date").

1. PAA PROJECT SUMMARY

A. PAA Project Information

PAA Number	
Project Number and Name	
PAA End Date	
PAA Total Value	\$

B. General Project Description of PAA.

[Insert general project description to provide context for tasks]

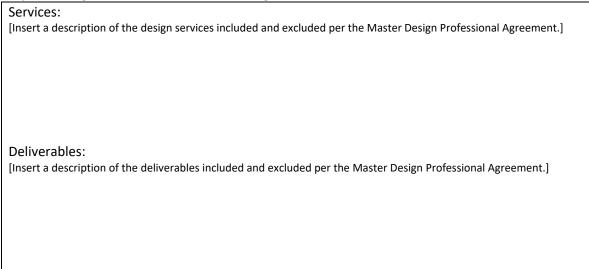
2. PAA SCOPE OF SERVICES

The Design Professional shall provide all services and deliverables set forth to the District's satisfaction for each phase of work identified below. Reference Section 1. PAA Project Information and Section 5. PAA Compensation and Invoicing for aggregate cost of all phases of work and reimbursable expenses, if applicable.

A. Scope of Design Professional Services – Pre-Design Phase

Services:
[Insert a description of the pre-design services included and excluded per the Master Design Professional Agreement.]
Deliverables:
[Insert a description of the deliverables included and excluded per the Master Design Professional Agreement.]

B. Scope of Design Professional Services – Design Phase



C. Scope of Design Professional Services – Procurement Phase

Services:	
[Insert a description of procurement services included and excluded pe	er the Master Design Professional Agreement.]

Deliverables:

[Insert a description of the deliverables included and excluded per the Master Design Professional Agreement.]

D. Scope of Design Professional Services – Construction Phase

Services:

[Insert a description of construction services included and excluded per the Master Design Professional Agreement.]

Deliverables:
[Insert a description of the deliverables included and excluded per the Master Design Professional Agreement.]

E. Scope of Design Professional Services – Close Out Phase

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se	rvices:	

[Insert a description of close-out services included and excluded per the Master Design Professional Agreement.]

Deliverables:

[Insert a description of the deliverables included and excluded per the Master Design Professional Agreement.]

3. DESIGN PROFESSIONAL SERVICES SCHEDULE

Dates are approximate; exact dates are subject to change by the District with no impact on contract pricing or the PAA contract term.

Phase	Anticipated Start Date	Anticipated End Date

4. PAA STAFFING PLAN

A. District Contract Manager

Name:	
Department:	
Address:	
Phone:	
Email:	

B. Design Professional Contract Manager

Name:	
Title:	
Address:	
Phone:	
Email:	

C. Other Staffing

Name:	Email:

D. Consultants (if applicable)

Company:	Discipline:	Name:	Email:	

E. Contract Personnel (if applicable)

Agency Name:	Area of Work:	Staff Name:	Assignment:

5. PAA COMPENSATION AND INVOICING

The District will compensate the Design Professional for providing the services and deliverables set forth in this PAA which is subject to the terms and conditions set forth in the Master Design Professional Agreement, including without limitation Section 12 and Attachment E – Compensation.

Schedule of Values (Insert Phase)	Invoice Period	Compensation Not to Exceed
	Monthly	\$
	Completion of Tasks	
	Completion of Work	
	Monthly	\$
	Completion of Tasks	
	Completion of Work	
	Monthly	\$
	Completion of Tasks	
	Completion of Work	

	Monthly Completion of Tasks Completion of Work	\$
	Monthly Completion of Tasks Completion of Work	\$
Reimbursables	Per Master Design Professional Agreement, Invoice requires back up.	\$

Maximum Compensation: \$_____

Remit all invoices to the following e-mail address:

measureginvoices@fhda.edu With a copy to the Project/Contract Manager's e-mail address

All invoices should include the following information:

- Measure G
- Project Number and Name:
- All items billed against Schedule of Values, with percent of completion.
- Backup billing data
- Purchase Order Number
- Construction Monitoring Invoices shall be submitted separately and independent of the design, bid phase, and construction administration services.

6. INSURANCE REQUIREMENTS PER THE MASTER DESIGN PROFESSIONAL AGREEMENT

- All insurance requirements are applicable per the Master Design Professional Agreement.
- Remit all insurance certificates to: sleedominguez@gilbaneco.com
- Additionally Insured:
 - The following entities shall be named additionally insured per the Master Design Professional Agreement:
 - Foothill De Anza Community College District 12345 El Monte Road Los Altos Hills, CA 94022
 - Gilbane Building Company 7 Jackson Walkway Providence, RI 02903

7. APPROVALS

Design Professional	Foothill-De Anza Community College District	
By:	By:	
Name:	Name:	
Title:	Title:	
Date:	Date:	

Foothill-De Anza Community College District		
By:		
Name:		
Title:		
Date:		

This contract is not valid until signed by both parties above and approved/ratified by the Board of Trustees.