

## PHSKC Agreement #11060 APDE AM 1

## **AMENDMENT**

This Amendment between PHSKC and Snohomish County acting through its Health Department (SCHD) changes the referenced Agreement for the following purpose(s): Contractors APDE division is being engaged by Snohomish County Health Department to perform the following services:

The Department is requesting consultation on data needs, costumized data analyses(including analyses for custom geographic area) and technical review of health data, to be scoped in collaboration with the PHSKC.

Posiniant Nama & Address: Snahamish Haalth District 2020 Busker Avenue, Suite 206 Everett WA 09201			
Recipient Name & Address: Snohomish Health District, 3020 Rucker Avenue, Suite 306, Everett, WA 98201			
Project Title: Data and Analytics Agreement for Services - Snohomish Co. Health Dept; 11060 APDE AM 1			
Effective Date of Amendment: August 31, 2024			
Agreement End Date: No Change	⊠ Change to: December 30, 2025		
Agreement Amount:	⊠Change to: \$14,890		
Funding Details: No Change Revise the following funding details:			
Funding Source PHSKC Contract #	Amount Effective Date	<u>New or</u> <u>Revised</u>	
Funding Summary:   No Change	Revise to read:		
FEDERAL: COUNTY:	STATE: OTI	HER:	
Exhibits:  No Change  Revise as follows:			
King County Terms & Conditions: ☐ No Change ☐ Revise as follows:			
B. Duration The duration of this Agreement shall be from September 1, 2024, through December 31, 2025. PROVIDED, HOWEVER, that the Customer's obligations after December 31, 2024, are contingent upon local legislative appropriation of necessary funds for this specific purpose in accordance with the County Charter and applicable law.			
C. Cost of Services/Billing The Department shall reimburse the Contractor for its cost to complete the services specified in this Agreement at the rate of \$120 per hour, with a minimum cost of \$360 (3 hours), not to exceed \$5,000.			
All other terms and conditions of the referenced Agreement and any previous Agreement amendment not revised herein shall remain unchanged and in full force and effect.			
RECIPIENT SIGNATURE	PRINTED NAME AND TITLE	DATE SIGNED	
Signed by:		8/21/2024	
Lacey Harper	Department Director		
PHSKC SIGNATURE	PRINTED NAME AND TITLE Nadine Chan	DATE SIGNED	
Signed by: Nadine Chan	Division Director, Health Sciences	8/21/2024	
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