

CONTRACT AMENDMENT B

This CONTRACT AMENDMENT is made and entered into between KITSAP COUNTY, a municipal corporation, with its principal offices at 614 Division Street, Port Orchard, Washington 98366, hereinafter "COUNTY", and Agape Unlimited, hereinafter "CONTRACTOR."

In consideration of the mutual benefits and covenants contained herein, the parties agree that their Contract, numbered as Kitsap County Contract No. KC-188-24, executed on 02/23/2024 and amended on 07/24/2024 shall be further amended as follows:

1. ARTICLE I, Section 1.2 Term shall be amended as follows:

Contract is extended from 12/31/2024 to 12/31/2025 for a new contract term of 01/01/2024 to 12/31/2025.

2. EXHIBIT A: STATEMENT OF WORK AND PROJECT TIMELINE, II. PROJECT TIMELINE shall be amended as follows:

Completion Date shall be extended from 12/31/2024 to 12/31/2025.

3. EXHIBIT B: BUDGET shall be replaced in its entirety.

- Administration – Direct Expenses (HHGP) is increased by \$1,820 from \$1,820 to \$3,640.
 - This amount reflects the removal of \$0 unspent funds from 1st year of contract, and additional funding of \$1,820 for 2nd year of contract.
- Building O&M – Building Operations Expenses (HHGP) is increased by \$18,095 from \$18,095 to \$36,190.
 - This amount reflects the removal of \$0 unspent funds from 1st year of contract, and additional funding of \$18,095 for 2nd year of contract.
- Building O&M – Salaries and Benefits (HHGP) is increased by \$4,879 from \$4,879 to \$9,758.
 - This amount reflects the removal of \$0 unspent funds from 1st year of contract, and additional funding of \$4,879 for 2nd year of contract.
- Building O&M – Building Operations Expenses (AHGP) is increased by \$15,064 from \$15,081 to \$30,145.
 - This amount reflects the removal of \$17 unspent funds from 1st year of contract, and additional funding of \$15,081 for 2nd year of contract.
- Building O&M – Salaries & Benefits (AHGP) is increased by \$6,875 from \$6,875 to \$13,750.
 - This amount reflects the removal of \$0 unspent funds from 1st year of contract, and additional funding of \$13,750 for 2nd year of contract.

Contract total is increased from \$46,750 to \$93,483.

2. Except as expressly provided in this Contract Amendment, all other terms and conditions of the original Contract, and any subsequent amendments, addenda or modifications thereto, remain in full force and effect.

This amendment shall be effective upon execution by the parties.

DATED this 3rd day March, 2025. DATED this 13 day March, 2025.

AGAPE UNLIMITED

KITSAP COUNTY



Sara Marez-Fields, Executive Director



Victoria Brazitis, County Administrator

Approved as to form by the Prosecuting Attorney's Office

EXHIBIT B: BUDGET

Contractor: Agape Unlimited – Koinonia Inn

Contract Number: KC-188-24-B

Time Period: January 1, 2024 – December 31, 2025

Cost Category	Fund Source	Previous Budget	Amendment Changes this Contract	Current Budget
Administration - Direct Expenses	Homeless Housing Grant Program - 1131.5419	\$1,820.00	\$1,820.00	\$3,640.00
Building O & M - Building Operations Expenses	Homeless Housing Grant Program - 1131.5419	\$18,095.00	\$18,095.00	\$36,190.00
Building O & M - Salaries & Benefits	Homeless Housing Grant Program - 1131.5419	\$4,879.00	\$4,879.00	\$9,758.00
Building O & M - Building Operations Expenses	Affordable Housing Grant Program - 1131.5419 T000649	\$15,081.00	\$15,064.00	\$30,145.00
Building O & M - Salaries & Benefits	Affordable Housing Grant Program - 1131.5419 T000649	\$6,875.00	\$6,875.00	\$13,750.00
Budget Total		\$46,750.00	\$46,733.00	\$93,483.00

Line items changes must be requested in writing and require Kitsap County approval.

- Reimbursement requests/invoices must be submitted through the Housing and Homelessness Division reimbursement request process.

Client#: 79672

AGAPUNLI

ACORD™

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 09/30/2024

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 any rights to the certificate holder in lieu of such endorsement(s).

PRODUCER: Propel Insurance, 1201 Pacific Avenue; Suite 1000, COM Middle Market, Tacoma, WA 98402-4321. CONTACT NAME: Loretta Schuelke, PHONE: 800 499-0933, FAX: 866 577-1326, E-MAIL ADDRESS: loretta.schuelke@propelinsurance.com. INSURER(S) AFFORDING COVERAGE: INSURER A: Berkley Regional Insurance Company (NAIC # 29580), INSURER B: Philadelphia Indemnity Ins Company (NAIC # 18058).

COVERAGES CERTIFICATE NUMBER: 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.

Table with columns: INSR LTR, TYPE OF INSURANCE, ADDL INSR, SUBR WVD, POLICY NUMBER, POLICY EFF (MM/DD/YYYY), POLICY EXP (MM/DD/YYYY), LIMITS. Rows include Commercial General Liability, Automobile Liability, Umbrella Liab, Excess Liab, Workers Compensation and Employers' Liability, Professional Liability, and Crime.

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER: HHGP/AHGP (Homeless Housing Grant Program/Affordable Housing Grant Program), 614 Division St. MS 23, Port Orchard, WA 98366. CANCELLATION: 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: Mitchell R. [Signature]

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debarment 

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Agape Unlimited   

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As of 2/18/2025



Debarred Contractors List

A debarred contractor may not bid on, or have a bid considered on, any public works contract. You can search and filter this list using the options presented below.

Company Name: Principal: From: To:

WA UBI Number: RCW: Penalty Due: Wage Due:

License Number:

[Download all debarment data](#)

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Company Name	UBI	License	Principals	Related Business	Status	RCW	Debar Begins	Debar Ends	Penalty Due	Wages Due
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As of 2/18/2025