**EXHIBIT A**

**CITY OF ST. HELENA PUBLIC WORKS PROJECT**

**WORK ORDER NO.**

|  |  |
| --- | --- |
| PROJECT NAME & NO.: |  |
| CITY PROJECT MANAGER: |  |
| CONSULTANT PROJECT MANAGER: |  |

SCOPE OF SERVICE:

See Consultant’s Scope of Services and Fee Schedule attached as Exhibit B-1 & B-2.

|  |  |  |  |
| --- | --- | --- | --- |
| START DATE:  |  | COMPLETION DATE:  |  |

|  |  |
| --- | --- |
| NOT-TO-EXCEED AMOUNT FOR THIS PROJECT:  | **$0.00** |

TERMS AND CONDITIONS: This Project Work Order is issued and entered into as of the last date written below in accordance with the terms and conditions set forth in the “Master Professional Services Agreement with (Consultant)**,** dated (Monday, day, year), which is hereby incorporated and made part of this Project Work Order. In the event of a discrepancy or conflict between the terms and conditions of the Project work Order and the Master Agreement, the Master Agreement shall govern.

CITY OF ST. HELENA

By: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Mark T. Prestwich**

 **City Manager**

(FIRM NAME)

By: Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name:

Title:

APPROVED AS TO FORM:

By:

 **Name: Thomas B. Brown**

 **Title: City Attorney**

Attachments: Exhibit B-1 - Consultant’s scope of services

 Exhibit B-2 - Compensation