

APHIS SALES ORDER REQUEST FORM

State Office: Date:

Agreement Number: Amendment: Number

Cooperator Name: FMMI Customer #

A/P Mailing Address: (Billing address) Category:

Cooperator Financial POC: Cooperator PO #:

Sales Order Type:

Budget Period: FMMI PO (if a USDA Agency):

WBS Element: TAS:

Agreement Performance Period:

Amount of This SO Request: Total Amount to Date:

Overhead Rate: WS Pooled Job Costs: Frequency of Billing:

Previously on OSEC OSEC Date: Species Managed:

Location of Work:

Additional Comments:

CSA renewal through 12/31/2030

For WRO Use Only:

Received in WRO <input type="text" value="4/3/2026"/>	OSEC Report <input type="text" value="4/31/2026"/>	Overhead Calc. <input checked="" type="checkbox"/>	
		ACMS <input checked="" type="checkbox"/>	Mail Distribution Date <input type="text"/>
		Agr.Spec. <input checked="" type="checkbox"/>	No. & State <input type="text" value="1-WA elec"/>
Routing Notes:			
<input type="checkbox"/> MIPR	<input type="checkbox"/> Agreement	<input checked="" type="checkbox"/> CSA	<input checked="" type="checkbox"/> W9
<input type="checkbox"/> Mod	<input type="checkbox"/> Waiver	<input type="checkbox"/> DEOB	Attached <input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/> MRP <input checked="" type="checkbox"/> SHC
Scan Date: <input type="text" value="4/14/2026"/>	Sent to: <input type="text" value="Michelle"/>		

COOPERATIVE SERVICE AGREEMENT
between
CITY OF EVERETT (COOPERATOR)
and
UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE (APHIS)
WILDLIFE SERVICES (WS)

ARTICLE 1 – PURPOSE

The purpose of this Cooperative Service Agreement is to provide assistance to the City of Everett when it experiences conflicts with nuisance wildlife.

ARTICLE 2 – AUTHORITY

APHIS-WS has statutory authority under the Acts of March 2, 1931, 46 Stat. 1468-69, 7 U.S.C. §§ 8351-8352, as amended, and December 22, 1987, Public Law No. 100-202, § 101(k), 101 Stat. 1329-331, 7 U.S.C. § 8353, to cooperate with States, local jurisdictions, individuals, public and private agencies, organizations, and institutions while conducting a program of wildlife services involving mammal and bird species that are reservoirs for zoonotic diseases, or animal species that are injurious and/or a nuisance to, among other things, agriculture, horticulture, forestry, animal husbandry, wildlife, and human health and safety.

ARTICLE 3 - MUTUAL RESPONSIBILITIES

The cooperating parties mutually understand and agree to/that:

1. APHIS-WS shall perform services set forth in the Work Plan, which is attached hereto and made a part hereof. The parties may mutually agree in writing, at any time during the term of this agreement, to amend, modify, add or delete services from the Work Plan.
2. The Cooperator certifies that APHIS-WS has advised the Cooperator there may be private sector service providers available to provide wildlife damage management (WDM) services that the Cooperator is seeking from APHIS-WS.
3. There will be no equipment with a procurement price of \$5,000 or more per unit purchased directly with funds from the cooperator for use on this project. All other equipment purchased for the program is and will remain the property of APHIS-WS.
4. The cooperating parties agree to coordinate with each other before responding to media requests on work associated with this project.

ARTICLE 4 - COOPERATOR RESPONSIBILITIES

Cooperator agrees:

1. To designate the as the authorized representative who shall be responsible for collaboratively administering the activities conducted in this agreement;
- 2.

Emily Coba

Associate Engineer

3200 Cedar St

Everett, WA 98201

425-257-8889

ecoba@everettwa.gov

3. To authorize APHIS-WS to conduct direct control activities as defined in the Work Plan. APHIS-WS will be considered an invitee on the lands controlled by the Cooperator. Cooperator will be required to exercise reasonable care to warn APHIS-WS as to dangerous conditions or activities in the project areas.
4. To reimburse APHIS-WS for costs, not to exceed the annually approved amount specified in the Financial Plan. If costs are projected to exceed the amount reflected in the Financial Plan, the agreement with amended Work Plan and Financial Plan shall be formally revised and signed by both parties before services resulting in additional costs are performed. The Cooperator agrees to pay all costs of services submitted via an invoice from APHIS-WS within 30 days of the date of the submitted invoice(s). Late payments are subject to interest, penalties, and administrative charges and costs as set forth under the Debt Collection Improvement Act of 1996.
5. To provide a Tax Identification Number or Social Security Number in compliance with the Debt Collection Improvement Act of 1996.
6. As a condition of this agreement, the Cooperator ensures and certifies that it is not currently debarred or suspended and is free of delinquent Federal debt.
7. To notify APHIS-WS verbally or in writing as far in advance as practical of the date and time of any proposed meeting related to the program.
8. The Cooperator acknowledges that APHIS-WS shall be responsible for administration of APHIS-WS activities and supervision of APHIS-WS personnel.
9. The Cooperator will not be connected to the USDA APHIS computer network(s).

ARTICLE 5 – APHIS-WS RESPONSIBILITIES

APHIS-WS Agrees:

1. To designate the following as the APHIS-WS authorized representative who shall be responsible for collaboratively administering the activities conducted in this agreement.

Brook Zscheile, Acting State Director, Washington

720 O’Leary Street NW

Olympia, WA 98502

360-753-9884

Brook.Zscheile@usda.gov

2. To conduct activities at sites designated by Cooperator as described in the Work and Financial Plans. APHIS-WS will provide qualified personnel and other resources necessary to implement the approved WDM activities delineated in the Work Plan and Financial Plan of this agreement.
3. That the performance of wildlife damage management actions by APHIS-WS under this agreement is contingent upon a determination by APHIS-WS that such actions are in compliance with the National Environmental Policy Act, Endangered Species Act, and any other applicable federal statutes. APHIS-WS will not make a final decision to conduct requested wildlife damage management actions until it has made the determination of such compliance.
4. To invoice Cooperator monthly for actual costs incurred by APHIS-WS during the performance of services agreed upon and specified in the Work Plan. Authorized auditing representatives of the Cooperator shall be accorded reasonable opportunity to inspect the accounts and records of APHIS-WS pertaining to such claims for reimbursement to the extent permitted by Federal law and regulations.

ARTICLE 6 – CONTINGENCY STATEMENT

This agreement is contingent upon the passage by Congress of an appropriation from which expenditures may be legally met and shall not obligate APHIS-WS upon failure of Congress to so appropriate. This agreement may also be reduced or terminated if Congress only provides APHIS-WS funds for a finite period under a Continuing Resolution.

ARTICLE 7 – NON-EXCLUSIVE SERVICE CLAUSE

Nothing in this agreement shall prevent APHIS-WS from entering into separate agreements with any other organization or individual for the purpose of providing wildlife damage management services exclusive of those provided for under this agreement.

ARTICLE 8 – CONGRESSIONAL RESTRICTIONS

Pursuant to Section 22, Title 41, United States Code, no member of or delegate to Congress shall be admitted to any share or part of this agreement or to any benefit to arise therefrom.

ARTICLE 9 – LAWS AND REGULATIONS

This agreement is not a procurement contract (31 U.S.C. 6303), nor is it considered a grant (31 U.S.C. 6304). In this agreement, APHIS-WS provides goods or services on a cost recovery basis to nonfederal recipients, in accordance with all applicable laws, regulations and policies.

ARTICLE 10 – LIABILITY

APHIS-WS assumes no liability for any actions or activities conducted under this agreement except to the extent that recourse or remedies are provided by Congress under the Federal Tort Claims Act (28 U.S.C. 1346(b), 2401(b), and 2671-2680).

ARTICLE 11 – NON-DISCRIMINATION CLAUSE

The United States Department of Agriculture prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance program. Not all prohibited bases apply to all programs.

ARTICLE 12 - DURATION, REVISIONS, EXTENSIONS, AND TERMINATIONS

This agreement shall become effective on January 1, 2026 and shall continue through December 31, 2030 not to exceed five years. This Cooperative Service Agreement may be amended by mutual agreement of the parties in writing. The Cooperator must submit a written request to extend the end date at least 10 days prior to expiration of the agreement. Also, this agreement may be terminated at any time by mutual agreement of the parties in writing, or by one party provided that party notifies the other in writing at least 60 days prior to effecting such action. Further, in the event the Cooperator does not provide necessary funds, APHIS-WS is relieved of the obligation to provide services under this agreement.

In accordance with the Debt Collection Improvement Act of 1996, the Department of Treasury requires a Taxpayer Identification Number for individuals or businesses conducting business with the agency.

Cooperator's Tax ID No.: 91-6001248

APHIS-WS's Tax ID: 41-0696271

Cooperator:



04/02/2026

Hon. Mayor Cassie Franklin
3200 Cedar St
Everett, WA 98201

Date

**UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
WILDLIFE SERVICES**

BROOK ZSCHEILE

Digitally signed by BROOK
ZSCHEILE
Date: 2026.04.03 07:16:50 -07'00'

Brook Zscheile, Acting State Director, Washington
USDA, APHIS, WS
720 O'Leary Street NW, Olympia, WA 98502

Date

**WENDY
ANDERSON**

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ANDERSON
Date: 2026.04.13 13:40:11 -06'00'

Wendy Anderson, Director, Western Region
USDA, APHIS, WS
2150 Centre Ave., Bldg. B, Mailstop 3W9, Ft. Collins, CO 80526

Date

Prepared by (APHIS-WS employee): Evan Moran and Kris Kooi

WORK PLAN/FINANCIAL PLAN

Cooperator: City of Everett – Public Works

Contact: Emily Coba, (425) 257-8889, ecoba@everettwa.gov

Cooperative Service Agreement No.: 26-7353-7164-RA

WBS Element: AP.RA.RX53.73.0272

Location: 3200 Cedar Street, Everett, WA

Dates: January 1, 2026 - December 31, 2026

In accordance with the Cooperative Service Agreement 26-7353-7164-RA (2026 signature year) between City of Everett and the United States Department of Agriculture (USDA), Animal and Plant Health Inspection Service (APHIS), Wildlife Services (WS), this Work Plan sets forth the objectives, activities and budget of the wildlife control activities for the period of January 1, 2026 through December 31, 2026.

Program Objective/Goals

Wildlife Services' objective is to provide assistance to City of Everett when it experiences wildlife conflicts caused by birds. This assistance may be in the form of educational information, non-lethal techniques, or direct control. If direct control is necessary, the most effective and safe tools and techniques available will be utilized.

The specific goal is to provide the City of Everett an integrated wildlife damage management program to alleviate damages and human health and safety issues associated with gulls, as well as other nuisance bird species.

Plan of Action

The objective of the wildlife control activities will be accomplished in the following manner:

1. WS will assign one Wildlife Specialist on an intermittent basis, not to exceed 80 hours, to the project and will also provide the vehicle, field supplies and equipment.
2. Damage control will be accomplished primarily with the use of the following:
 - Egg addling
 - Self-setting decoy traps
 - Nest Removal

3. Evan Moran, West District Supervisor, Poulsbo, WA, will supervise this project, (360) 337-2778. This project will be monitored by Brook Zscheile, Acting State Director, Olympia, WA, (360) 753-9884.
4. WS will cooperate with the Washington Department of Fish and Wildlife, the U.S. Fish and Wildlife Service, county and local city governments, and other entities to ensure compliance with applicable Federal, State, and local laws and regulations.
5. WS will evaluate the control work conducted during the period of performance to assess ongoing damage and communicate with City of Everett on future work plans as needed.
6. City of Everett will be billed monthly by WS only for expenses shown in the Financial Plan and will not exceed the Agreement Total. Salaries and benefits are defined as compensation for all hours worked, benefits, differentials, hazardous duty allowances, annual leave, sick leave and awards. The financial point of contact for this Work Plan/Financial Plan is Michelle Rodriguez, Budget Analyst, (360) 742-5496.

FINANCIAL PLAN
For the disbursement of funds from
The City of Everett
to
USDA APHIS Wildlife Services
for
Integrated Wildlife Damage Management
from
January 1, 2026 to December 31, 2026

1

Cost Element		Full Cost
Personnel Compensation	\$	3,360.00
Vehicles	\$	445.00
Supplies and Materials	\$	300.00
Subtotal (Direct Charges)	\$	4105.00
Pooled Job Costs	11.00%	\$ 451.55
Indirect Costs	16.15%	\$ 662.96
Agreement Total	\$	5,219.51

The distribution of the budget from this Financial Plan may vary as necessary to accomplish the purpose of this agreement, but may not exceed: **\$5,219.51**

Mailing Address:	Billing Address:
CITY OF EVERETT PUBLIC WORKS	Same as Mailing
Emily Coba, Associate Engineer	Financial POC: Emily Coba
3200 Cedar St.	(425) 257-8889, ecoba@everettwa.gov
Everett, WA 98201	Tax ID: 91-6001248

City of Everett, Washington



Hon. Mayor Cassie Franklin

04/02/2026

Date

UNITED STATES DEPARTMENT OF AGRICULTURE
ANIMAL AND PLANT HEALTH INSPECTION SERVICE
WILDLIFE SERVICES

BROOK ZSCHEILE

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ZSCHEILE
Date: 2026.04.03 07:17:16 -07'00'

Brook Zscheile, Acting State Director, Washington

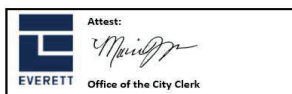
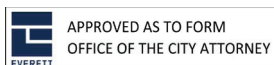
Date

**WENDY
ANDERSON**

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Wendy Anderson, Director, Western Region

Date













USDA_Wildlife Management Services_Service Agreement_EC_2026.03.27_SD


Final Audit Report

2026-04-02

Created:	2026-04-01
By:	Marista Jorve (mjorve@everettwa.gov)
Status:	Signed
Transaction ID:	CBJCHBCAABAAAd2bRA-jDW6-Tw7OnDNbolRkuQaPyctkd

"USDA_Wildlife Management Services_Service Agreement_EC_2026.03.27_SD" History


-  Document created by Marista Jorve (mjorve@everettwa.gov)
2026-04-01 - 10:58:59 PM GMT
-  Document emailed to Emily Coba (ecoba@everettwa.gov) for approval
2026-04-01 - 11:00:44 PM GMT
-  Email viewed by Emily Coba (ecoba@everettwa.gov)
2026-04-02 - 3:17:09 PM GMT
-  Document approved by Emily Coba (ecoba@everettwa.gov)
Approval Date: 2026-04-02 - 3:20:04 PM GMT - Time Source: server
-  Document emailed to Tim Benedict (TBenedict@everettwa.gov) for approval
2026-04-02 - 3:20:09 PM GMT
-  Email viewed by Tim Benedict (TBenedict@everettwa.gov)
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-  Document approved by Tim Benedict (TBenedict@everettwa.gov)
Approval Date: 2026-04-02 - 4:02:14 PM GMT - Time Source: server
-  Document emailed to Cassie Franklin (cfranklin@everettwa.gov) for signature
2026-04-02 - 4:02:16 PM GMT
-  Email viewed by Cassie Franklin (cfranklin@everettwa.gov)
2026-04-02 - 5:27:27 PM GMT
-  Document e-signed by Cassie Franklin (cfranklin@everettwa.gov)
Signature Date: 2026-04-02 - 5:27:43 PM GMT - Time Source: server

 Document emailed to Marista Jorve (mjorve@everettwa.gov) for approval

2026-04-02 - 5:27:44 PM GMT

 Document approved by Marista Jorve (mjorve@everettwa.gov)

Approval Date: 2026-04-02 - 6:22:28 PM GMT - Time Source: server

 Agreement completed.

2026-04-02 - 6:22:28 PM GMT

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
 requester. Do not
 send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	City of Everett	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):
	<input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) _____	Exempt payee code (if any) 3 Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) C
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions _____ <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions.	Requester's name and address (optional)
2930 Wetmore Ave Suite 9H		
6 City, state, and ZIP code		
Everett, WA 98201		
7 List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)																																																																
Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a TIN</i> , later.																																																																
Note: If the account is in more than one name, see the instructions for line 1. See also <i>What Name and Number To Give the Requester</i> for guidelines on whose number to enter.																																																																
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Part II Certification	
Under penalties of perjury, I certify that:	
1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and	
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and	
3. I am a U.S. citizen or other U.S. person (defined below); and	
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.	
Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.	

Sign Here	Signature of U.S. person <i>TSam</i>	Date <i>1/2/2026</i>
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they

APPROVAL FOR FISCAL YEAR 2026 AGREEMENTS

Initiative Title: WILDLIFE SERVICE - HUMAN HEALTH / SAFETY GENERAL

Proposed funding level: \$ 42,368,667

What is the purpose of the initiative/agreement and how does it align with the Agency's and Secretary's priorities?

Wildlife Services (WS) Wildlife Services (WS) provides Federal leadership and expertise to resolve wildlife conflicts to allow people and wildlife to coexist. WS works with government agencies, local municipalities, citizens and others to reduce the effects of wildlife on human health and safety. The work is conducted in a variety of settings; schools, homes, industrial, airports and parks. Health and safety activities include protecting humans against aggressive wildlife (geese, coyotes, mountain lions) and protecting drinking water from wildlife contamination. In addition to the numerous partnerships across the nation, WS has four strategic program areas that support the success of this core mission:

- The National Training Academy ensures personnel receive training to safely administer wildlife damage management activities.
- The Aviation Safety and Training Operations Center provide training to pilots and crew to conduct low-level flying operations.

The WS National Wildlife Disease Program (NWDP) and National Rabies Management Program monitor wildlife for zoonotic diseases that can infect humans, including rabies, avian influenza, plague and tularemia.

- The NWDP Surveillance and Emergency Response System can assist during natural disasters including wildfires, floods, and disease outbreaks.

This initiative supports USDA goal 2 and APHIS objectives 2.1, 2.2, 2.4

Previous Year's Funding Level \$ \$38,116,704

<Details found on Excel spreadsheet titled Awards Support for Initiative Doc.FY25>

Historic instruments used to accomplish the initiatives goals

Cooperative Agreement (CA)	Grant (GR)	Interagency Agreement (IA)	Incoming Fund Agreement (RA/TF/OTC)
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

Signatures:

Approving official:

Title	Name	Signature and date	Signature Needed	
Management Analyst	Emily Brown	EMILY BROWN <small>Digitally signed by EMILY BROWN Date: 2025.12.02 10:57:43 -05'00'</small>	Signature Needed	<input checked="" type="checkbox"/>
Program Manager	Steven Wickenheiser	STEVEN WICKENHEISER <small>Digitally signed by STEVEN WICKENHEISER Date: 2025.11.25 13:38:27 -05'00'</small>	Signature Needed	<input checked="" type="checkbox"/>
Signatory or Delegate	David Reinhold	CHRISTINA TAYLOR <small>Digitally signed by CHRISTINA TAYLOR Date: 2025.11.25 14:16:58 -05'00'</small>	Signature Needed	<input checked="" type="checkbox"/>
SES	Jessica Fantinato	JESSICA FANTINATO <small>Digitally signed by JESSICA FANTINATO Date: 2025.12.01 10:14:43 -05'00'</small>	≥ \$250,000	<input checked="" type="checkbox"/>