



CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Public Works

BID/RFP# NUMBER: 22ITBC079A-KM

BID/RFP# TITLE: Colilert Reagent 24 and Colilert 18 Reagent Supplies

ORIGINAL APPROVAL DATE: January 11, 2023

RENEWAL EFFECTIVE DATES: January 11, 2024 to December 31, 2024

RENEWAL OPTION #: 1 of 2

NUMBER OF RENEWAL OPTIONS: 1 renewal option remains

RENEWAL AMOUNT: \$90,669.40

COMPANY'S NAME: IDEXX Distribution, Inc.

ADDRESS: One IDEXX Drive

CITY: Westbrook

STATE: ME

ZIP: 04092

This Renewal Agreement No. 1 was approved by the Fulton County Board of Commissioners on BOC DATE: 3/6/2024 BOC NUMBER: 24-0146

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Vendor agrees to accept the renewal option and abide by the terms and conditions set forth in the contract and specifications as referenced herein:

FULTON COUNTY, GEORGIA

DocuSigned by:

Robert L. Pitts

14E1B4AA5F0A44A...

**Robert L. Pitts, Chairman
Fulton County Board of Commissioners**

ATTEST:

DocuSigned by:

Tonya R. Grier

EEC476C4237678D...

**Tonya R. Grier
Clerk to the Commission**

(Affix County Seal)

AUTHORIZATION OF RENEWAL:

DocuSigned by:

David Clark

65CE1C9FD0834B8...

**David Clark, Director
Public Works**

IDEXX DISTRIBUTION, INC.

DocuSigned by:

Chun-Ming Chen

A51E4A524ABB4A4...

**Chun-Ming Chen
Vice President**

ATTEST:

**Secretary/
Assistant Secretary**

(Affix Corporate Seal)

ATTEST:

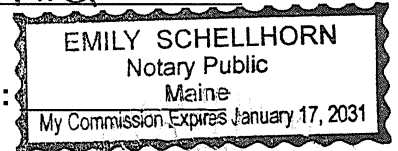
Emily Schellhorn

Notary Public

County: Cumberland

Commission Expires:

(Affix Notary Seal)



ITEM#: _____ RCS: _____	ITEM#: 24-0146 RM: 3/6/2024
RECESS MEETING	REGULAR MEETING



CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
03/25/2024

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.

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

PRODUCER
Aon Risk Services Northeast, Inc.
Boston MA Office
53 State Street
Suite 2201
Boston MA 02109 USA

CONTACT NAME:
PHONE (A/C, No. Ext): (866) 283-7122 FAX (A/C, No.): (800) 363-0105
E-MAIL ADDRESS:
INSURER(S) AFFORDING COVERAGE
NAIC #

INSURED
IDEXX Laboratories, Inc.
One IDEXX Drive
Westbrook ME 04092-2041 USA

INSURER A: Travelers Property Cas Co of America 25674
INSURER B: Travelers Casualty & Surety Company 19038
INSURER C: The Phoenix Insurance Company 25623
INSURER D:
INSURER E:
INSURER F:

COVERAGES CERTIFICATE NUMBER: 570104548480 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,

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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Project 221TBC079A-KM

CERTIFICATE HOLDER
Fulton County Government
Purchasing and Contract Compliance Department
130 Peachtree Street, SW Ste. 1168
Atlanta GA 30303-3459

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
Aon Risk Services Northeast, Inc.

Holder Identifier :
Certificate No : 570104548480

