

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Department of Real Estate and Asset Management

BID/RFP# NUMBER: 18ITB113946C-BKJ

BID/RFP# TITLE: Janitorial Services for Selected Fulton County Facilities (E, F, G, H & I)

ORIGINAL APPROVAL DATE: 12/19/2018

RENEWAL PERIOD FROM: 01/01/2020 **THROUGH** 12/31/2020

RENEWAL OPTION #: 1 **OF** 2

NUMBER OF RENEWAL OPTIONS: 2

RENEWAL AMOUNT: \$211,677.00

COMPANY'S NAME: Chi-ADA Corporation

ADDRESS: 2750 W. Oakland Park Blvd., Suite B

CITY: Oakland Park

STATE: FL

ZIP: 33311

This Renewal Agreement No. 1 was approved by the Fulton County Board of

Commissioners on BOC DATE: <u>12/18/19</u> BOC NUMBER: <u>19-1144</u>

NAME: Bart Okoro	(Drive)
(CEO, President, Vi	ice President)
VENDOR'S SIGNATURE: Bart Okovo E455AB32A3F845E.	DATE: 02/11/2020
ATTEST:	
	NOTARY PUBLIC:
TITLE:	COUNTY:
SEAL (Affix)	MY COMMISSION EXPIRES:
FULTON COUNTY, GEORGIA	
	DATE:
ROBERT L. PITTS, CHAIRMAN FULTON COUNTY BOARD OF COMM	
ATTEST:	
	DATE:
TONYA R. GRIER CHIEF DEPUTY CLERK TO THE COM	IMISSION
SEAL (Affix)	
DEPARTMENT AUTHORIZES RENEW	/AL OPTION ON THE AFOREMENTIONED BID/RFF
DEPARTMENT HEAD:	(Print)
DEPARTMENT HEAD SIGNATURE: _	DATE
ITEM#: RCS: RECESS MEETING	



Select Attach to add document(s)

THINITH THE PARTY OF THE PARTY

This site uses cookies, some of which are required for the operation of the site. Learn More 2

OK

NEXT

Vendor agrees to accept the renewal option and abide by the terms and conditions forth in the contract and specifications for Bid/RFP#

**IPPERSON Signing must have signature authority for the company/corporation)

**POWER BART Okoro

(CEO, President, Vice President)

**Docustigned by:

**Docustig

Pocusigned by:

Robert L. Pitts

ROBERT L. PITTS, CHAIRMAN

FULTON COUNTY BOARD OF COMMISSIONERS

DocuSigned by:
Tonya K. Gricr
EEC476C4837648D...

DATE: 02/20/2020

TONYA R. GRIER

CHIEF DEPUTY CLERK TO THE COMMISSION

DocuSigned by:

SEAL (Affix)



DEPARTMENT AUTHORIZES RENEWAL OPTION ON THE AFOREMENTIONED BID

DEPARTMENT HEAD: _____ (Print)

DEPARTMENT HEAD SIGNATURE: Joseph Davis DATE 02/19/2020

Please select RCS or RM from the checkbox $_{\rm X}$ RCS $^{\rm RM}$

ITEM#: 19-1144A RCS: 12/18/2019 ITEM#: 0 RM: 0
RECESS MEETING REGULAR MEETING



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RENEWAL PERIOD FROM: 01/01/2020 **THROUGH** 12/31/2020

RENEWAL OPTION #: 1 **OF** 2

NUMBER OF RENEWAL OPTIONS: 2

RENEWAL AMOUNT: \$225,255.48

COMPANY'S NAME: Diversified Maintenance-RWS, LLC

ADDRESS: 331 First Avenue North

CITY: Birmingham

STATE: AL

ZIP: 35204

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Commissioners on BOC DATE: <u>12/18/19</u> BOC NUMBER: <u>19-1144</u>

forth in the contract and specificat (Person signing must have signature author	
Larry McAlpin NAME:	(Print)
(CEO, President	byVice President)
VENDOR'S SIGNATURE: LAVY M Please select Attest	DATE: 02/27/2020 Cor Notary from checkbox DOCUSigned
ATTEST: Attest	X Notary
	NOTARY PUBLIC:
TITLE:	COUNTY:
SEAL (Affix)	MY COMMISSION EXPIRES:
FULTON COUNTY, GEORGIA Koburt J. Pitts ROBERT L. PITTS, CHAIRMAN FULTON COUNTY BOARD OF COM	DATE: 03/05/2020
TONYA R. GRIER	DATE:
CHIEF DEPUT <u>Y CLERKSTO</u> THE CO	OMMISSION
SEAL (Affix)	
DEPARTMENT AUTHORIZES REN	EWAL OPTION ON THE AFOREMENTIONED BID/RFP:
DEPARTMENT HEAD:	(Print)
DEPARTMENT HEAD SIGNATURE Please select RCS or X RCS	: Joseph Davis RM DATE O3/04/2020 DATE O3/04/2020 CRM DATE O3/04/2020 CRM DATE
ITEM#: 2019-1144 RCS: 12/18	8/2020 ITEM#:RM:
DECESS MEETING	PEGULAP MEETING





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 02/21/2020

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

and commonte accents to me					
I ROBOOLK	1-205-581-3330	CONTACT NAME:	Alex Russell		
Edgewood Partners Insurance Center	(EPIC)	PHONE	205-581-3331 FAX (A/C, No): 205-2		50-1173
[Alabama Branch - Branch ID 15491]		E-MAIL	alex.russell@epicbrokers.com		
2901 2nd Avenue South, Suite 200		ADDRESS:	diex.iubbelieepicblokelb.co		
			INSURER(S) AFFORDING COVERAGE		NAIC#
Birmingham, AL 35233		INSURER A :	CHARTER OAK FIRE INS CO		25615
NSURED OMS Parent, LLC, Diversified Maintenance Systems -		INSURER B :	TRAVELERS IND CO OF AMER		25666
	nance Systems -	INSURER C :	TRAVELERS PROP CAS CO OF AME	R	25674
RWS, LLC dba Rite Way Service 331 1st Avenue North		INSURER D :	INSURER D: EVANSTON INS CO		
352 250 11/01/20 1/02/51		INSURER E :	ZURICH AMER INS CO		16535
Birmingham, AL 35204		INSURER F :	ILLINOIS UNION INS CO		27960

COVERAGES CERTIFICATE NUMBER: 58554221

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.

			ADDL	SUBR		POLICY EFF	POLICY EXP		_
INSR LTR		TYPE OF INSURANCE		WVD	POLICY NUMBER	(MM/DD/YYYY)	(MM/DD/YYYY)	LIMIT	S
A	Х	CLAIMS-MADE X OCCUR	х	х	6605P018388COF20	03/01/20	03/01/21	EACH OCCURRENCE DAMAGE TO RENTED	\$ 1,000,000 \$ 100,000
		CLAIMS-MADE X OCCUR						PREMISES (Ea occurrence) MED EXP (Any one person)	\$ 0
								PERSONAL & ADV INJURY	\$ 1,000,000
	GEN	I'L AGGREGATE LIMIT APPLIES PER:						GENERAL AGGREGATE	\$ 2,000,000
		POLICY X PRO- JECT LOC						PRODUCTS - COMP/OP AGG	\$ 2,000,000
		OTHER:							\$
В	AUT	OMOBILE LIABILITY	х	х	8105P0179332043G	03/01/20	03/01/21	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	х	ANY AUTO						BODILY INJURY (Per person)	\$
		OWNED SCHEDULED AUTOS ONLY AUTOS						BODILY INJURY (Per accident)	\$
	х	HIRED X NON-OWNED AUTOS ONLY						PROPERTY DAMAGE (Per accident)	\$
									\$
C	х	UMBRELLA LIAB X OCCUR			ZUP61N2470420NF	03/01/20	03/01/21	EACH OCCURRENCE	\$ 5,000,000
		EXCESS LIAB CLAIMS-MADE						AGGREGATE	\$ 5,000,000
		DED RETENTION\$							\$
D		KERS COMPENSATION EMPLOYERS' LIABILITY Y / N		х	60020202455600 (AL Only)	01/01/20	12/31/20	X PER OTH- STATUTE ER	
		PROPRIETOR/PARTNER/EXECUTIVE CER/MEMBER EXCLUDED?	N/A					E.L. EACH ACCIDENT	\$ 1,000,000
	(Man	datory in NH)						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
		s, describe under CRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000
E	Cri	me			MPL0027753802	04/03/19	04/03/20	Client's Property	5,000,000
F	Pol	lution			CPYG27418508003	01/01/19	01/01/21	Per Claim/Agg	1,000,000
C	Wor	k Comp (Other States)			UB5P10735A2043G	03/01/20	03/01/21	Stat/Acc/Emp/Polic	1,000,000

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

RE: Bid #181TB113946C-BKJ ý Janitorial Services for Selected Fulton County Facilities (Groups E, F, G, H and I) Fulton County Government, Officials, Officers and its Employees are Additional Insureds under General Liability and Automobile Liability as required by written contract. General Liability Additional Insured status is afforded on a Primary and Non-Contributory basis as required by written contract. Insured General Liability policy contains Additional Insured endorsement CG D2 46 08 05. General Liability, Automobile Liability and Workers Compensation policies provide Waiver of Subrogation in favor Fulton County Government, Officials, Officers and its Employees as required by written contract. Umbrella policy is follow form over underlying General Liability, Auto Liability and Employers Liability.

CERTIFICATE HOLDER	CANCELLATION
Fulton County Government ý Purchasing Dept., its officers employees, servants and agents	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
130 Peachtree St., S.W. Suite 1168	AUTHORIZED REPRESENTATIVE
Atlanta, GA 30303-3459	Bally
USA	

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SUPPLEMENT TO CERTIFICATE OF INSURANCE

DATE 02/21/2020

NAME OF INSURED: DMS Parent, LLC, Diversified Maintenance Systems - RWS, LLC dba Rite Way Service

Additional Description of Operations/Remarks from Page 1:

Certificate holder is named as additional insured as respects to General and Auto Liability (on a primary and non-contributory basis) as required by written contract; Excess/Umbrella is follow form; General Liability additional insured endorsement includes ongoing and completed operations; Waiver of subrogation is issued in favor of certificate holder as respects to General Liability, Auto Liability and Workers Compensation as required by written contract; All policies contain a 30 day notice of cancellation (10 for non-pay) subject to policy terms and conditions;

Crime Policy #MPL00277538-02 Employee Theft Limit \$5,000,000 and Client's Property Limit \$5,000,000

Additional Information:

COMMENT HISTORY



18ITB113946C-BKJ, Janitorial Services for Selected Fulton County Facilities

Sender: Brian Jones

Envelope Id: ac697ff1-522d-4443-878d-774bb7dbcd3a

Time Zone: (UTC-08:00) Pacific Time (US & Canada)

Date Sent: 12/18/2019 | 3:11:26 PM

Date Completed: 3/5/2020 | 1:03:41 PM

All Recipients

Larry McAlpin -12/19/2019 | 9:49:43 AM

What File is needed?

Brian Jones (sender) -12/19/2019 | 9:53:25 AM

Current Certificate of Insurance



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RENEWAL OPTION #: 1 **OF** 2

NUMBER OF RENEWAL OPTIONS: 2

RENEWAL AMOUNT: \$401,763.79

COMPANY'S NAME: Quality Cleaning Services, Inc.

ADDRESS: 6308 Linecrest Drive

CITY: Douglasville

STATE: GA

ZIP: 30134

This Renewal Agreement No. 1 was approved by the Fulton County Board of

Commissioners on BOC DATE: <u>12/18/19</u> BOC NUMBER: <u>19-1144</u>

	ns for Bid/RFP# for the company/corporation)
NAME: Clifford Featherstone	(Print)
(CEO, President, V	/ice President)
VENDOR'S SIGNATURE: Lifford Fur	atherstone DATE: 12/18/2019
ATTEST:	
-	NOTARY PUBLIC:
TITLE:	COUNTY:
SEAL (Affix)	MY COMMISSION EXPIRES:
FULTON COUNTY, GEORGIA	
	DATE:
ROBERT L. PITTS, CHAIRMAN FULTON COUNTY BOARD OF COMM	
ATTEST:	
	DATE:
TONYA R. GRIER CHIEF DEPUTY CLERK TO THE COM	
SEAL (Affix)	
DEPARTMENT AUTHORIZES RENEW	VAL OPTION ON THE AFOREMENTIONED BID/RFP
DEPARTMENT HEAD:	(Print)
DEPARTMENT HEAD SIGNATURE: _	DATE
ITEM#:RCS:	





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Vendor agrees to accept the renewal op- forth in the contract and specifications f	tion and abide by the terms and conditions set				
(Person signing must have signature authority for the	ne company/corporation)				
NAME: Clifford Featherstone	(Print)				
(CEO, President, Vice					
VENDOR'S SIGNATURE:	Fedfrey tre DATE: 12-18-2019				
ATTEST:					
Lillian Gibson TITLE: Secretory	LEANOTARY PUBLIC:				
TITLE: Secretary	COUNTY:				
SEAL (Affix)	IY COMMISSION EXPIRES:				
FULTON COUNTY, GEORGIA DocuSigned by:	RGIA				
Robert L. Pitts	DATE: 01/16/2020				
ROBERT 64:APITTS, CHAIRMAN					
FULTON COUNTY BOARD OF COMMISS	BIONERS				
ATTEST:					
Tonya K. Grice	DATE: 02/12/2020				
TONYA R. GRIER					
CHIEF DEPUTY CLERK TO THE COMMIS DocuSigned by:	SSION				
SEAL (Affix)					
DEPARTMENT AUTHORIZES RENEWAL OPTION ON THE AFOREMENTIONED BID/RFP					
DEPARTMENT HEAD: Joseph Davis	(Print)				
DEPARTMENT HEAD SIGNATURE: Joseph	01 /16 /2020				
Please select RCS or RM 570	20000100				
X RCS	RM				
ITEM#:19-1144 RCS:12/18/2019	ITEM#: 0 RM: 0				
RECESS MEETING	REGULAR MEETING				