



**FULTON
COUNTY**

**EXTENSION #3
FORM TO CONTRACT**

#17RFP107111K-EC

**PROJECT MANAGEMENT TEAM
SERVICES**

**DEPARTMENT OF REAL ESTATE AND ASSET
MANAGEMENT**

EXTENSION NO. 3 TO FORM OF CONTRACT

Contractor: **The Joint Venture of Heery International, Inc. and McAfee3 Architects**

Contract No. **17RFP107111K-EC, Project Management Team Services**

Address: **999 Peachtree Street, NE**
City, State **Atlanta, Georgia 30309**

Telephone: **(404) 946-2055**

E-mail: [**Rob.Chomiak@cbre.com**](mailto:Rob.Chomiak@cbre.com)

Contact: **Rob Chomiak, P. E. CCM, LEED AP**
Senior Managing Director

W I T N E S S E T H

WHEREAS, Fulton County ("County") entered into a Contract with **The Joint Venture of Heery International, Inc. and McAfee3 Architects** to provide/perform Project Management Team Services, dated October 16, 2017, on behalf of the Department of Real Estate and Asset Management; and

WHEREAS, the County wishes to extend the subject contract, with all terms and conditions unchanged, for an additional 3 months, from October 1, 2023 through December 31, 2023 to continue to provide without disruption, project management services for the FCURA (Urban Redevelopment) Bonds Capital Improvement Programs; and

WHEREAS, the Contractor has performed satisfactorily over the period of the contract; and

WHEREAS, this Extension was approved by the Fulton County Board of Commissioners on **Wednesday, November 16, 2022; BOC Item #22-0869**.

NOW, THEREFORE, the County and the Contractor agree as follows:

This Extension No. 3 to Form of Contract is effective as of the 16 day of November 2022, between the County and **The Joint Venture of Heery International, Inc. and McAfee3 Architects**, who agree that all Services specified will be performed by in accordance with this Extension No. 3 to Form of Contract and the Contract Documents for an additional three-month period, with the contract ending as of 31 day of December 2023.

1. **COMPENSATION:** The services herein shall be performed by Contractor for a total amount not to exceed **\$635,356.00** (Six Hundred Thirty-Five Thousand

Three Hundred and Fifty-Six Dollars and No Cents).

3. **LIABILITY OF COUNTY:** This Extension No. 3 to Form of Contract shall not become binding on the County and the County shall incur no liability upon same until such agreement has been executed by the Chair to the Commission, attested to by the Clerk to the Commission and delivered to Contractor.
4. **EFFECT OF EXTENSION NO. 3 TO FORM OF CONTRACT:** Except as modified by this Extension No. 3 to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

[INTENTIONALLY LEFT BLANK]

IN WITNESS THEREOF, the Parties hereto have caused this Contract to be executed by their duly authorized representatives as attested and witnessed and their corporate seals to be hereunto affixed as of the day and year date first above written.

OWNER:

CONSULTANT:

FULTON COUNTY, GEORGIA

THE JOINT VENTURE OF HEERY INTERNATIONAL, INC. AND MCAFEE3 ARCHITECTS

DocuSigned by:

Robert L. Pitts

Robert L. Pitts, Chairman
Fulton County Board of Commissioners

DocuSigned by:

Robert Chomiak

Robert Chomiak,
Senior Managing Director

ATTEST:

ATTEST:

DocuSigned by:

Tonya R. Grier

Tonya R. Grier
Clerk to the Commission

DocuSigned by:

Wade Purcell

Secretary/
Assistant Secretary

(Affix Corporate Seal)

(Affix Corporate Seal)

APPROVED AS TO FORM:

ATTEST:

DocuSigned by:

Denzel Stewart

Office of the County Attorney

APPROVED AS TO CONTENT:

DocuSigned by:

Joseph N. Davis

Joseph N. Davis, Director
Department of Real Estate and Asset Management



2022-0869	11/16/2022		
ITEM#: _____	RCS: _____	ITEM#: _____	RM: _____
RECESS MEETING		REGULAR MEETING	





CERTIFICATE OF LIABILITY INSURANCE

DATE(MM/DD/YYYY)
03/01/2022

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).

PRODUCER Aon Risk Services Northeast, Inc. Stamford CT Office 1600 Summer Street Stamford CT 06907-4907 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 CBRE Group, Inc. and Subsidiaries 2100 McKinney Avenue Suite 1250 Dallas TX 75201 USA	INSURER A: Zurich American Ins Co		16535
	INSURER B: American Zurich Ins Co		40142
	INSURER C: ACE Property & Casualty Insurance Co.		20699
	INSURER D: Navigators Insurance Co		42307
	INSURER E:		
	INSURER F:		

Holder Identifier :

COVERAGES CERTIFICATE NUMBER: 570091777001 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. Limits shown are as requested

INSR LTR	TYPE OF INSURANCE	ADDITIONAL INSURED	SUBROGATION WAIVED	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC OTHER:	Y	Y	GL0838419920	03/01/2022	03/01/2023	EACH OCCURRENCE \$5,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$50,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$5,000,000 GENERAL AGGREGATE \$5,000,000 PRODUCTS - COMP/OP AGG \$5,000,000
A	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY			BAP 8384200 20	03/01/2022	03/01/2023	COMBINED SINGLE LIMIT (Ea accident) \$5,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10,000	Y		G27952501007	03/01/2022	03/01/2023	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000
B	<input checked="" type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		Y	WC838419523 All Other States WC914173616 Wisconsin	03/01/2022	03/01/2023	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1,000,000 E.L. DISEASE-EA EMPLOYEE \$1,000,000 E.L. DISEASE-POLICY LIMIT \$1,000,000
A		N/A	Y		03/01/2022	03/01/2023	

Certificate No : 570091777001

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

CBRE Heery, Inc. is a subsidiary of CBRE Group, Inc. RE: Project Number: 17RFP10711K-EC. Fulton County Government - Purchasing Department is included as Additional Insured in accordance with the policy provisions of the General Liability and Umbrella Liability policies. General Liability Policy evidenced herein is Primary Non-Contributory to other insurance available to an Additional Insured, but only in accordance with the policy's provisions. A waiver of subrogation is granted in favor of Fulton County Government - Purchasing Department in accordance with the policy provisions of the General Liability and Workers' Compensation policies.

CERTIFICATE HOLDER

CANCELLATION

Fulton County Government Purchasing Department 130 Peachtree Street, SW, Suite 1168 Atlanta GA 30303-3459 USA	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

