

### **EXTENSION #2**

## FAA CONTRACT #DTFAWA-15-C000018

# Fulton County Executive Airport – Charlie Brown Field

For

**DEPARTMENT OF PUBLIC WORKS** 

#### **EXTENSION NO. 2 TO FORM OF CONTRACT**

Contractor: Robinson Aviation, Inc. (RVA)

Contract No. FAA Contract #DTFAWA-15-C000018

Address: 1601 Northwest Expressway, Suite 850

City, State Oklahoma City, OK 73118

Telephone: 405-840-3771

E-mail: melissa.markel@rvainc.com

Contact: Melissa Markel,

Vice President, Contracts & Administration

#### WITNESSETH

WHEREAS, Fulton County ("County") entered into a Contract with Robinson Aviation, Inc. to provide air traffic control night coverage services at Fulton County Executive Airport – Charlie Brown Field, dated January 1, 2022, on behalf of the Department of Public Works; and

WHEREAS, the County wishes to extend the subject contract, with all terms and conditions unchanged, for an additional twelve month period; 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 December 1<sup>st</sup>, 2021; Item #21-0973.

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

This Extension No. 2 to Form of Contract is effective as of the 1<sup>st</sup> day of January, 2022, between the County and Robinson Aviation, Inc. who agree that all Services specified will be performed by in accordance with this Extension No. 2 to Form of Contract and the Contract Documents for an additional twelve month period with the contract ending as of 31<sup>st</sup> day of December, 2022.

- 1. **COMPENSATION:** The services herein shall be performed by Contractor for a total amount not to exceed, \$252,936.00.
- 3. **LIABILITY OF COUNTY:** This Extension No. 2 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. 2 TO FORM OF CONTRACT:** Except as modified by this Extension No. 2 to Form of Contract, the Contract, and all Contract Documents, remain in full force and effect.

[INTENTIONALLY LEFT BLANK]

OWNER:

RECESS MEETING

**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.

**CONSULTANT:** 

FULTON COU	NTY, GEORGIA	ROBINSON AVIATION, INC.	
DocuSigned by:		DocuSigned by:	
Robert L. Pitts		Melissa Markel	
14Rebert4LA. Pitts,	Chairman	₩eiissa Markel, Vice Presider	nt
Fulton County I	Board of Commissioners	Contracts & Administration	
ATTEST:		ATTEST:	
DocuSigned by:		DocuSigned by:	
Tonya R. Grier		Cluris Dias	
EET ONY 2018. Grier		³/Secretary/	
Clerk to the Co	<b>ന്നുipsiയു</b> igned by:	Assistant Secretary	
(Affix County S		(Affix Corporate Seal)	
APPROVED AS	S TO FORM:	ATTEST:	
Decusioned by:  Derival Stewart  22 Office of the Co	ounty Attorney S TO CONTENT:	Notary Public  County: Canadian	
DocuSigned by:			
David Clark		Commission Expires: 07/26/	2024
65DavidoGlark, Di	rector	— Docusigne	<del>u by.</del>
Department of	Public Works	(Affix Notary Seal)	
ITEM#:	RCS:	ITEM#: <sup>2021-0973</sup> RM: 12/1/2021	

**REGULAR MEETING** 

ROBIAVI-01

APEER

ACORD.

#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/7/2021

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).

PRO	DUCER				CONTA	CT Allison F	Peer				
Frates Irwin Risk Management Solutions 103 Dean A McGee Avenue STE 700 Oklahoma City. OK 73102			PHONE (A/C, No, Ext): (405) 290-5721 FAX (A/C, No):								
			E-MAIL ADDRESS: Apeer@fratesirwin.com								
	,,				ADDICE			RDING COVERAGE			NAIC#
					INCLIDE			ern Insurance	Compa	inv	38628
INSL	IPEN						33140 1401111		Compa	···y	00020
					INSURER B:						
	Robinson Aviation (RVA), In 1601 NW Expressway, Suite				INSURE						
	Oklahoma City, OK 73118				INSURER D :						
					INSURE						
	VEDACES CED	TIF1	CATI	E NUMBER:	INSURE	KF:		DEVICION NU	MDED.		
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	POLICY PRO- JECT LOC							PRODUCTS - COM		\$	
	OTHER:								, 0. , 1.00	\$	
Α	AUTOMOBILE LIABILITY							COMBINED SINGL (Ea accident)	E LIMIT	\$	1,000,000
	X ANY AUTO	x	x	05881770-4		2/3/2021	2/3/2022	BODILY INJURY (P	er person)	\$	
	OWNED AUTOS ONLY X SCHEDULED AUTOS	'`						BODILY INJURY (F		\$	
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMA (Per accident)	GE	\$	
	X Hired & NonOwned							(r or accident)		\$	
	UMBRELLA LIAB OCCUR							EACH OCCURREN	ICF	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE	.02	\$	
	DED RETENTION \$	1								\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							PER STATUTE	OTH- ER	T	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?							E.L. EACH ACCIDE		\$	
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA			
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - PO		\$	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	ACORI	D 101, Additional Remarks Schedu	ile, may b	e attached if mor	e space is requi	red)			
CERTIFICATE HOLDER				CANO	CELLATION						
Fulton County Government Purchasing & Contract Compliance Department			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., SW, Suite 1168										

Atlanta, GA 30303

**AUTHORIZED REPRESENTATIVE** 



#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 01-06-2021

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.

lf	MPORTANT: If the certificate holder i SUBROGATION IS WAIVED, subject his certificate does not confer rights t	to t	he te	rms and conditions of th	e polic	cy, certain po	olicies may			
	DUCER				CONTA NAME:		•			
Fal	con Insurance Agency of Houston, Inc.				PHONE (A/C, No	o. Ext): 830-89	95-6130	FAX (A/C, No):		
19	747 Highway 59N Suite 314				É-MAIL ADDRE	ss. akingma	n@falconins			
Hu	mble, TX 77338				ADDILL			RDING COVERAGE	NAIC#	
					INSURE	RA: Starr Sp			NAIO #	
INSL	RED				INSURE	RB:				
	Robinson Aviation (RVA), Inc	С.			INSURER C:					
	1601 NW Freeway, Suite 850	0			INSURER D:					
	Oklahoma City, OK 73118				INSURE	RE:				
					INSURE	RF:				
				NUMBER:				REVISION NUMBER:		
IN C E	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY IXCLUSIONS AND CONDITIONS OF SUCH	QUIF PERT POLI	REME TAIN, CIES.	NT, TERM OR CONDITION THE INSURANCE AFFORD LIMITS SHOWN MAY HAVE	OF AN' ED BY	Y CONTRACT THE POLICIES REDUCED BY I	OR OTHER I S DESCRIBEI PAID CLAIMS	DOCUMENT WITH RESPECT D HEREIN IS SUBJECT TO A	TO WHICH THIS	
INSR LTR		INSD	SUBR WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	(MM/DD/YYYY)	LIMITS		
	COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE OCCUR							EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$		
								MED EXP (Any one person) \$		
								PERSONAL & ADV INJURY \$		
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE \$		
	POLICY PRO- LOC OTHER:							PRODUCTS - COMP/OP AGG \$		
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident) \$		
	ANY AUTO							BODILY INJURY (Per person) \$		
	OWNED SCHEDULED AUTOS ONLY							BODILY INJURY (Per accident) \$		
	HIRED NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident) \$		
	AG 100 GILET							\$		
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE \$		
	EXCESS LIAB CLAIMS-MADE							AGGREGATE \$		
	DED RETENTION\$							\$		
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							X PER OTH-		
Α	ANYPROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A	X	100 0004451		12/31/2020	12/31/2021	E.L. EACH ACCIDENT \$	1,000,000	
	(Mandatory in NH) If yes, describe under					12/01/2020		E.L. DISEASE - EA EMPLOYEE \$	1,000,000	
	DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT \$	1,000,000	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICI	LES (	ACORD	101, Additional Remarks Schedu	le, may b	e attached if more	e space is requir	ed)		
CERTIFICATE HOLDER CANCELLATION										
Fulton County Government Purchasing & Contract Compliance Department 130 Peachtree St SW, Suite 1168				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 REPRESENT. TIVE						
Atlanta GA 30303						(	0 11	- P	1	



3353 Peachtree Road NE, Suite 1000 Atlanta, GA 30326

Certificate Holder:	FULTON COUNTY GOVERNMENT PURCHASING & CONTRACTING COMPLIANCE DEPARTMENT 130 PEACHTREE STREET SW SUITE 1168					
Named Insured:	ATLANTA, GA 30303  ROBINSON AVIATION (RVA), INC.  1601 N.W. EXPRESSWAY, SUITE 850  OKLAHOMA CITY, OK 73118					
Policy Period: Policy Number: Issuing Company:	From: <u>DECEMBER 15, 2020</u> To: <u>DECEMBER 15, 2021</u> 1000239814-01  STARR INDEMNITY & LIABILITY COMPANY					

This is to certify that the policy(ies) listed herein have been issued providing coverage for the listed insured as further described. This certificate of insurance is not an insurance policy and does not amend, extend, or alter the coverage afforded by the policy(ies) listed herein. Notwithstanding any requirement, term or condition of any contract, or other document with respect to which this certificate of insurance may be concerned or may pertain, the Insurance afforded by the policy(ies) listed on this certificate is subject to all the terms, exclusions, and conditions of such policy(ies).

Aviation Commercial General Liability	Limits of Insurance				
Each Occurrence Limit	\$5,000,000.				
Damage to Premises Rented to You Limit	\$ 50,000. Any one premises				
Medical Expense Limit	\$ 10,000. Any one person				
Personal & Advertising Injury Aggregate Limit	\$5,000,000.				
General Aggregate Limit	\$ NOT APPLICABLE				
Products/Completed Operations Aggregate Limit	\$5,000,000.				
Hangarkeepers Limit					
Each Aircraft Limit	\$ NOT COVERED				
Each Loss Limit	\$ NOT COVERED				
Hangarkeeper's Deductible	NOT APPLICABLE Each Aircraft				

THE CERTIFICATE HOLDER IS INCLUDED AS ADDITIONAL INSURED, BUT SOLELY AS RESPECTS THE OPERATIONS OF THE NAMED INSURED.

THE CERTIFICATE HOLDER IS PROVIDED A WAIVER OF SUBROGATION AS RESPECTS TO LIABILITY COVERAGE.

Certificate Number:	47.1		
Issued By and Date:	DECEMBER 03, 2021 (JE)	100	

В

(Authorized Representative)

#### WAIVER OF TRANSFER OF RIGHTS OF RECOVERY AGAINST OTHERS TO US

This endorsement modifies insurance provided under the follow	wing:					
COMMERCIAL GENERAL LIABILITY COVERAGE FORM						
SCHEDUL	E					
Name of Person or Organization:	-E					
FULTON COUNTY GOVERNMENT PURCHASING & CONTRACTING COMPLIANCE DEPARTMENT 130 PEACHTREE STREET SW, SUITE 1168 ATLANTA, GA 30303	Т					
(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)						
The Transfer Of Rights Of Recovery Against Others To Us Condition (SECTION IV - COMMERCIAL GENERAL LIABILITY CONDITIONS) is amended by the addition of the following:						
We waive any right of recovery we may have against the person or organization shown in the Schedule above because of payments we make for injury or damage arising out of your ongoing operations or "your work" done under a contract with that person or organization and included in the "products-completed operations hazard". This waiver applies only to the person or organization shown in the Schedule above.						
All other provisions of this policy remain the same.						
This endorsement becomes effective DECEMBER 3, 2021 to	be attache	ed to and hereby made a part of:				
Policy No. 1000239814-01 Issued to ROBINSON AVIATION (RVA), INC.						
NOBINGON AVIATION (NVA), INC.						
By STARR INDEMNITY & LIABILITY COMPANY		,				
Endorsement No. 27	Б	Alle				
Date of Issue DECEMBER 3, 2021 (JE)	Ву _	(Authorized Representative)				

#### **ADDITIONAL INSURED ENDORSEMENT**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE FORM

**SCHEDULE** 

	<u> </u>
Name of Additional Insured Person(s) or Organization(s):	
FULTON COUNTY GOVERNMENT PURCHASING & CONTRACTING COMPLIANCE DEPARTM 130 PEACHTREE STREET SW SUITE 1168 ATLANTA, GA 30303	IENT
Information required to complete this Schedule, if not show	wn above, will be shown in the Declarations.
SECTION II - WHO IS AN INSURED is amended to organization(s) shown in the Schedule, but only with respersonal and advertising injury" caused, in whole or in particular or those acting on your behalf:	ect to liability for "bodily injury", "property damage" or
A. In the performance of your ongoing operations; or	
B. In connection with your premises owned by or rented to	o you.
As respects the above additional insured:	
<ol> <li>this insurance does not apply to any claim or liability aris sold, handled, or distributed by the above additional insu</li> </ol>	
2. this insurance does not apply to the design, manufacture additional insured.	ture, repair, sale, or servicing of aircraft by the above
3. this insurance does not apply to structural alterations, no or for that person or organization.	new construction and demolition operations performed by
All other provisions of this policy remain the same.	
This endorsement becomes effective DECEMBER 3, 2021 Policy No. 1000239814-01 Issued to ROBINSON AVIATION (RVA), INC.	to be attached to and hereby made a part of:
By STARR INDEMNITY & LIABILITY COMPANY	
Endersoment No. 20	100
Endorsement No. 26  Date of Issue DECEMBER 3, 2021 (JE)	By
	(Authorized Representative)



COMMERCIAL INSURANCE - AVIATION

Energy Centre 1100 Poydras Street Suite 2150 New Orleans LA 70163 504 310-3600 *main* 504 310-3610 *fax* www.chubb.com

December 1, 2021

#### ACE PROPERTY & CASUALTY INSURANCE COMPANY

**CERTIFICATE OF INSURANCE (PAGE 1 OF 2)** 

THIS CERTIFICATE OF INSURANCE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE OF INSURANCE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE INSURANCE POLICY BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER, AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER

THIS IS TO CERTIFY that the Insured set forth below is at this date insured with ACE PROPERTY & CASUALTY INSURANCE COMPANY as indicated under the Policy described in the following schedule.

#### DESCRIPTIVE SCHEDULE

Named Insured:Robinson Aviation (RVA) Inc.Address:1601 NW Expressway, Suite 850

Oklahoma City, Oklahoma 73118

**Policy Number:** AAP N07385511 008

**Policy period:** From: October 1, 2021 to October 1, 2023 (both dates at 12.01 am LST)

**Location:** KFTY Fulton County Airport – Brown Field, Atlanta, GA

**Type:** Aviation Operations Liability Insurance

Limits of insurance: Bodily Injury, Personal Injury/Advertising Injury and Property Damage combined

\$10,000,000 each occurrence/offense, which includes automobile liability while on

airport property, subject to the following limitations:

Aggregate limits shown may have been reduced by paid claims.

Additional Agreement: Solely with respect to the agreement between the Named Insured and this Certificate Holder shown in this Certificate of Insurance, WHO IS AN INSURED is amended by endorsement to include as an insured person or organization the following Certificate Holder as an insured, but only with respect to liability to which the insurance provided under the above Policy(ies) applies that is caused, in whole or in part, by the Named Insured's acts or omissions or the acts or omissions of those acting on the Named Insured's behalf in the performance of the Named Insured's "aviation operations".



December 1, 2021

# ACE PROPERTY & CASUALTY INSURANCE COMPANY CERTIFICATE OF INSURANCE (PAGE 2 OF 2)

This certificate is issued at the request of the following Certificate Holder:

Fulton County Government – Purchasing and Contract Compliance Department 130 Peachtree Street, S.W. Suite 1168
Atlanta, GA 30303-3459

**<u>COMMENTS:</u>** The above Certificate Holder is included as an Additional Insured as per endorsement AAP207 (11-04).

This Certificate of Insurance neither affirmatively nor negatively amends, alters, or extends the coverages afforded by the policy described above. Aggregate limits shown may have been reduced by paid claims. We have made provision to provide you with thirty (30) days prior written notice in the event of cancellation of the above described policy, except that such notice will be ten (10) days for non-payment of premium, or such shorter periods as may be required by the automatic termination, review and cancellation provisions of the Extended Coverage - War, Hi-jacking and Other Perils Endorsement and the Nuclear Risks Exclusion Clause, if they form part of the policy.

By \_\_\_\_\_(Authorized representative)