

DEPARTMENT OF PURCHASING & CONTRACT COMPLIANCE

CONTRACT RENEWAL AGREEMENT

DEPARTMENT: Department Of Real Estate & Asset Management
BID/RFP NUMBER: 25ITB1259516C-JH
BID/RFP TITLE: Hazardous Waste Disposal
ORIGINAL APPROVAL DATE: May 1, 2025
RENEWAL EFFECTIVE DATES: January 1, 2026
RENEWAL OPTION #: 1 OF 2
NUMBER OF RENEWAL OPTIONS: 2
RENEWAL AMOUNT: \$70,000.00
COMPANY'S NAME: Clean Harbors Environmental Services, Inc
ADDRESS: 42 Longwater Drive
CITY: Norwell
STATE: MA
ZIP: 02061
This Renewal Agreement No was approved by the Fulton County Board of
Commissioners on BOC DATE: BOC NUMBER:
CERTIFICATE OF INSURANCE: The Contractor/Vendor is required to maintain insurance du

CERTIFICATE OF INSURANCE: The Contractor/Vendor is required to maintain insurance during the entire term of this Agreement, including any contract renewals. Upon request, the Contractor/Vendor must furnish the County a Certificate of Insurance showing the required coverage as specified in the Contract Agreement and any renewals. A current COI must be provided before the commencement of work on this project under this Contract Renewal. The cancellation of any policy of insurance required by this Agreement shall meet the requirements of notice under the laws of the State of Georgia as presently set forth in the Georgia Code.

SIGNATURES: SEE NEXT PAGE

SIGNATURES:

Contractor/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	Clean Harbors Environmental Services, Inc
Robert L. Pitts, Chairman Fulton County Board of Commissioners	William B. Hallam Senior Vice President
ATTEST:	ATTEST:
Tonya R. Grier Clerk to the Commission	Secretary/ Assistant Secretary
(Affix County Seal)	(Affix Corporate Seal)
AUTHORIZATION OF RENEWAL:	ATTEST:
Joseph Davis, Director Department Of Real Estate & Asset Management	Notary Public et County:
	Commission Expires:
	(Affix Notary Seal)
ITEM#:RM:	ITEM#:2 nd RM:
REGULAR MEETING	SECOND REGULAR MEETING

CERTIFICATE OF INSURANCE